** PUBLIC DISCLOSURE COPY **

Department of the Treasury

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

▶ 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.

2019 A For the 2018 calendar year, or tax year beginning APR 1, 2018 and ending MAR 31, Check if applicable: C Name of organization D Employer identification number American Civil Liberties Union Address change Foundation of KS Name change 43-0926406 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ termin-ated 913-490-4100 6701 W. 64th Street, Suite 210 City or town, state or province, country, and ZIP or foreign postal code 1,205,639. G Gross receipts \$ Amended return 66202 Overland Park, KS H(a) Is this a group return Applica-tion pending F Name and address of principal officer: Nadine Johnson for subordinates? Yes X No 6701 W 64th St #210, Overland Park, KS 6620 H(b) Are all subordinates included? Tax-exempt status: X = 501(c)(3) = 501(c)() ◀ (insert no.) 4947(a)(1) or [If "No," attach a list. (see instructions) J Website: ▶ aclukansas.org **H(c)** Group exemption number ▶ K Form of organization: X Corporation Trust Association Other > L Year of formation: 1971 M State of legal domicile: KS Part I Summary Briefly describe the organization's mission or most significant activities: The misson of the ACLU **Activities & Governance** Foundation of Kansas is to protect and defend the Constitutional if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 14 $\overline{14}$ Number of independent voting members of the governing body (Part VI, line 1b) 4 15 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 0 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, line 38 7b **Prior Year Current Year** 913,405. 1,189,624. Contributions and grants (Part VIII, line 1h) 5,072. 5,907. Program service revenue (Part VIII, line 2g) 1.436. 10,108. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0. 11 1.205,639 919,913. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 513,450. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 661,263. 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 252,253. 258,352. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 765,703. 919,615. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 154,210. 286,024. Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year **End of Year** 28 1,155,904. 1,428,225. 20 Total assets (Part X, line 16) 83,888. 60,639. 21 Total liabilities (Part X, line 26) 三年 072,016. 367,586. 22 Net assets or fund balances. Subtract line 21 from line 20 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. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign Nadine Johnson, Executive Director Here Type or print name and title Date PTIN Preparer's signature Print/Type preparer's name Stanley H House, CPA 12/13/19 self-employed P00642974 Stanley H House, CPA Paid Firm's name ▶ House Park Dobratz & Wiebler, P.C. Firm's EIN ▶ 43-1562209 Preparer Firm's address > 605 W. 47th Street, Suite 301 Use Only Phone no. 816 - 931 - 3393 Kansas City, MO 64112 X Yes May the IRS discuss this return with the preparer shown above? (see instructions)

	1990 (2018) FOUNDATION OF KS 43-0926406 Page 2
Pa	rt 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 misson of the ACLU Foundation of Kansas is to protect and defend
	the Constitutional rights and civil liberties of every individual in
	Kansas regardless of creed, race, religion or other labeling through
	education, advocacy, and litigation.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$
	The ACLU Foundation of Kansas works to protect, defend, and strengthen
	the rights and civil liberties guaranteed to every individual in Kansas
	by the United States Constitution. The most significant activities the
	organization engages in to achieve these goals are education, advocacy,
	and litigation.
	414 11019401011
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
44	Other program services (Describe in Schedule O.)
4d	Other program services (Describe in Schedule O.)
40	(Expenses \$ including grants of \$) (Revenue \$) Total program convice expenses \$ 60.2 0.45.

Form **990** (2018)

Form 990 (2018) Foundation o 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)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
•	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	Ť		
U	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
′		7		x
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II			
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			_V
	Schedule D, Part III	8		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?			,,
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	<u> </u>	
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	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? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
-	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			<u> </u>
D	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
		14b		x
15	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	175		
13		15		x
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	13		
10		46		x
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	4-		_v
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			_v
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			\ . ,
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21		X

Form 990 (2018) Foundation of KS
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? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		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? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		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)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		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? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			1
_	Note. All Form 990 filers are required to complete Schedule O	38	Х	<u> </u>
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			口
			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			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
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Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			_		Yes	No			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,								
	filed for the calendar year ending with or within the year covered by this return	2a	15						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b		X			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)							
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X			
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule of	o		3b					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	author	ity over, a						
	financial account in a foreign country (such as a bank account, securities account, or other financial a	accour	nt)?	4a		_X_			
b	If "Yes," enter the name of the foreign country: ▶								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccoun	ts (FBAR).						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X			
b	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?								
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5с		<u> </u>			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th	e orga	anization solicit						
	any contributions that were not tax deductible as charitable contributions?			6a		X			
b									
	were not tax deductible?			6b					
7	Organizations that may receive deductible contributions under section 170(c).								
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices p	provided to the payor?	7a		<u> </u>			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		<u> </u>			
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as req	uired						
	to file Form 8282?	1		7с		X			
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d							
е	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?								
f	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?								
g									
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h					
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	l by th	е	8					
	sponsoring organization have excess business holdings at any time during the year?								
9	Sponsoring organizations maintaining donor advised funds.			-					
а				9a	$\vdash \vdash \vdash$				
b				9b					
10	Section 501(c)(7) organizations. Enter:	۱	1						
a	Initiation fees and capital contributions included on Part VIII, line 12	10a							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b							
11	Section 501(c)(12) organizations. Enter:	11a	1						
a		11a							
D	Gross income from other sources (Do not net amounts due or paid to other sources against	146							
199	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041	2	12a					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		ıza					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120	1						
	Is the organization licensed to issue qualified health plans in more than one state?			13a					
u	Note. See the instructions for additional information the organization must report on Schedule O.			iou					
b	Enter the amount of reserves the organization is required to maintain by the states in which the								
~	organization is licensed to issue qualified health plans	13b							
С	Enter the amount of reserves on hand	13c							
				14a		х			
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule			14b					
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner								
	excess parachute payment(s) during the year?			15		Х			
	If "Yes," see instructions and file Form 4720, Schedule N.								
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t incor	ne?	16		Х			
	If "Yes," complete Form 4720, Schedule O.								
				Form	990	(2018)			

Form 990 (2018) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X				
Sec	tion 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 in Schedule O.							
b	Enter the number of voting members included in line 1a, above, who are independent 1b							
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?	2		X				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision							
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X				
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X				
6	Did the organization have members or stockholders?	6		X				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	_		v				
	more members of the governing body?	7a		X				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			v				
_	persons other than the governing body?	7b		X				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		v					
a	The governing body?	8a	X					
b	Each committee with authority to act on behalf of the governing body?	8b	X					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			Х				
Sac	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Λ				
366	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		Vaa	Na				
100	Did the organization have local chapters, branches, or affiliates?	10a	Yes	No X				
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	IUa		21				
D	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b						
112	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?							
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.							
12a								
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b	X	Х				
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe							
·	in Schedule O how this was done	12c	Х					
13	Did the organization have a written whistleblower policy?	13	Х					
14	Did the organization have a written document retention and destruction policy?	14	Х					
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?							
а	The organization's CEO, Executive Director, or top management official	15a	Х					
	Other officers or key employees of the organization	15b		Х				
	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?	16a		Х				
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?	16b						
Sec	tion 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) a	availab	ole				
	for public inspection. Indicate how you made these available. Check all that apply.							
	X Own website Another's website X Upon request Other (explain in Schedule O)							
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	al					
	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	11.						
	Roberta Beier, Director of Finance and Administration - 913-490-	410	υ					
_	6701 W. 64th Street, Suite 210, Overland Park, KS 66202							

Form 990 (2018) 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 (Ď), (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.

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

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

(A)	(B)	(C)		(D)	(E)	(F)					
Name and Title	Average	(ala	Position (do not check more than one		Reportable	Reportable	Estimated				
	hours per	box	, unle	ss pe	rson i	s both	n an	compensation	compensation	amount of	
	week	—	cer ar	nd a d	irecto	r/trus	tee)	from	from related	other	
	(list any	rector						the	organizations	compensation	
	hours for related	or di	ee			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the	
	organizations	ruste	l trus		99/	npen		(88-2/1099-181130)		organization and related	
	below	Individual trustee or director	Institutional trustee	<u></u>	Key employee	Highest compensated employee	er			organizations	
	line)	Indivi	Instit	Officer	Key e	Highe	Former				
(1) Leslie Bissell	1.00										
Secretary	1.00	Х		Х				0.	0.	0.	
(2) Jim Bell	1.00										
Director	1.00	Х						0.	0.	0.	
(3) Sandy Brown	1.00										
Director	1.00	Х						0.	0.	0.	
(4) Micheline Burger	1.00										
Director	1.00	X						0.	0.	0.	
(5) Susan Estes	1.00										
President/ Nat'l Board Rep	1.00	X		Х				0.	0.	0.	
(6) Roberta Eveslage	1.00										
Affirmative Action Officer	1.00	Х		Х				0.	0.	0.	
(7) Bob Eye	1.00										
Director	1.00	Х						0.	0.	0.	
(8) Mark Johnson	1.00										
Director	1.00	Х						0.	0.	0.	
(9) Lon Lewis	1.00										
Treasurer	1.00	Х		X				0.	0.	0.	
(10) Raymond Rico	1.00										
Director	1.00	Х						0.	0.	0.	
(11) Jeff Wicks	1.00										
Director	1.00	Х						0.	0.	0.	
(12) Amii Castle	1.00										
Director	1.00	Х						0.	0.	0.	
(13) Anna M. Tietze	1.00										
Equity and Inclusion Officer	1.00	Х	_	Х				0.	0.	0.	
(14) Brad R. Stuewe	1.00]									
Director	1.00	Х	_					0.	0.	0.	
(15) Micah Kubic	35.00	1									
Executive Director	5.00		_	X	_			89,596.	0.	5,010.	
		-									
		1									
				•	-	_	_			- 000 (aa.ta)	

Form **990** (2018)

Form 990 (2018)	Foundation									43-09	<u> 1264</u>	106	Pa	age 8
Part VII Sect	ion A. Officers, Directors, Trus (A)	tees, Key Emp (B)	oloy		(0	C)		t C	ompensated Employee (D)	s (continued) (E)	\neg		(F)	
	Name and title	Average hours per week (list any hours for related organizations below line)	box	not c , unle:	ss per	more rson i irecto	Highest compensated hard so on the subject of the s	an	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensatio from related organization (W-2/1099-MIS	on d s	am comp fro orga and	cimate ount o other oensat om the anizati relate nizatio	of tion e on ed
											\dashv			
											+			
											\dashv			
											\dashv			
											\dashv			
											\dashv			
1b Sub-total								<u> </u>	89,596.		0.	5	5,01	LO.
	continuation sheets to Part VI lines 1b and 1c)							▶	89,596.		0.			0. 10.
2 Total numb	per of individuals (including but nation from the organization							o re	eceived more than \$100,	000 of reportable	;			0
	anization list any former officer,	director, or tru	ıstee	e. ke	v en	olan	vee.	or l	highest compensated er	nplovee on			Yes	No
line 1a? If	'Yes," complete Schedule J for s lividual listed on line 1a, is the su	uch individual				· 						3		X
and related	l organizations greater than \$150	0,000? If "Yes,	" co	mple	ete S	Sche	edule	J f	or such individual			4		Х
rendered to	rson listed on line 1a receive or a the organization? If "Yes." com										<u></u>	5		Х
1 Complete t	pendent Contractors this table for your five highest co										 pensat	ion fro	m	
the organiz	ration. Report compensation for (A)					ith c	or wi	thin	(B)			(C		
	Name and business	address	NC	ONE	<u> </u>				Description of s	ervices		ompen	isation	1
2 Total numb	per of independent contractors (i	ncludina but na	ot lin	niter	d to t	thos	se lis	ted	above) who received mo	ore than				
	of compensation from the organi	•				C						Form 9	990 (2	2018)

Form 990 (2018)

Part VIII Statement of Revenue

		Check if Schedule O conta	ains a response	or note to any lin	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
र इ	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	l I					
Ē,S	С	Fundraising events						
ifts ar A	d	Related organizations						
s, G	е	Government grants (contributi						
Sign	f	All other contributions, gifts, gran						
but		similar amounts not included above	/e 1f 1 ,	189,624.				
ÖĘ	g	Noncash contributions included in lines						
Sol	h	Total. Add lines 1a-1f		>	1,189,624.			
				Business Code				
ø	2 a	Litigation Fees		541100	5,907.	5,907.		
Program Service Revenue	b							
Se	С							
am	d							
og. B	е							
4	f	All other program service reve	nue					
	g	Total. Add lines 2a-2f		>	5,907.			
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)		4,685.			4,685.	
	4	Income from investment of tax	exempt bond p	roceeds				
	5	Royalties		<u> </u>				
			(i) Real	(ii) Personal				
	6 a	Gross rents						
		Less: rental expenses						
		Rental income or (loss)						
		Net rental income or (loss)						
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	5,423.					
	b	Less: cost or other basis						
		and sales expenses						
		Gain or (loss)			5,423.			E 122
		Net gain or (loss)		····· •	5,423.			5,423.
e	8 а	Gross income from fundraising including \$	•					
/en		-						
Be		contributions reported on line	•					
Other Reven	h	Part IV, line 18						
₹		Net income or (loss) from fund						
		Gross income from gaming ac						
	Ja	Part IV, line 19						
	b	Less: direct expenses						
		Net income or (loss) from gam						
		Gross sales of inventory, less						
		and allowances						
	b	Less: cost of goods sold						
		Net income or (loss) from sales						
Ī		Miscellaneous Revenue		Business Code				
ſ	11 a							
	b							
	С							
	d	All other revenue						
		Total. Add lines 11a-11d		>				
	12	Total revenue. See instructions			1,205,639.	5,907.	0.	10,108.

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 respons		(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
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	94,606.	55,817.	15,137.	23,652
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	410,866.	277,065.	59,342.	74,459
8	Pension plan accruals and contributions (include	,	•	•	•
-	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	112,024.	59,678.	32,967.	19,379
10	Payroll taxes	43,767.	28,723.	6,561.	19,379. 8,483.
11	Fees for services (non-employees):	,	,	,	
a	Management				
b	Legal				
c	Accounting				
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	140.		140.	
g g	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch O.)	53,230.	35,644.	17,586.	
12	Advertising and promotion	00,1000			
13	Office expenses	87,865.	53,099.	22,579.	12,187
14	Information technology	16,446.	10,033.	3,644.	2,769
15	Royalties			7,4224	_,
16	Occupancy				
17	Travel	42,155.	31,781.	5,194.	5,180
18	Payments of travel or entertainment expenses	12,1001	3277321	3 / 2 3 2 4	3,200
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	6,142.	3,334.	1,950.	858.
20	Interest	14.	3,331.	14.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,379.		1,379.	
23		6,443.	3,754.	2,282.	407.
23 24	Other expenses. Itemize expenses not covered	3,1131	3,7.314	= / = 0 = 1	207
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	Education and projects	44,538.	43,117.	87.	1,334
b		,	,		,
c					
d					
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	919,615.	602,045.	168,862.	148,708
26	Joint costs. Complete this line only if the organization	,	,		
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

Form **990** (2018)

Par	LA	Dalance Sneet					
		Check if Schedule O contains a response or not	e to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			425,281.	1	435,765.
	2	Savings and temporary cash investments			,	2	96,858.
	3	Pledges and grants receivable, net			172,351.	3	220,343.
	4	Accounts receivable, net			255.	4	959.
	5	Loans and other receivables from current and fo					
		trustees, key employees, and highest compensa		· · · · · · · · · · · · · · · · · · ·			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disquali					
		section 4958(f)(1)), persons described in section	,				
		employers and sponsoring organizations of sect		•			
g		employees' beneficiary organizations (see instr).		·		6	
Assets	7	Notes and loans receivable, net				7	
As	8	Inventories for sale or use				8	
	9	B			7,412.	9	8,011.
	_	Land, buildings, and equipment: cost or other			,		
		basis. Complete Part VI of Schedule D	10a	82,591.			
	b	basis. Complete Part VI of Schedule D Less: accumulated depreciation	10b	77,073.	6,896.	10c	5,518.
	11	Investments - publicly traded securities			540,656.	11	657,719.
	12	Investments - other securities. See Part IV, line			, , , , , , , , , , , , , , , , , , , ,	12	, ,
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets	l l		14		
	15	Other assets. See Part IV, line 11		3,053.	15	3,052.	
	16	Total assets. Add lines 1 through 15 (must equ		1,155,904.	16	1,428,225.	
	17	Accounts payable and accrued expenses		79,388.	17	60,639.	
	18	Grants payable		,	18	,	
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete		l l		21	
,	22	Loans and other payables to current and former					
ties		key employees, highest compensated employee					
Liabilities		Complete Part II of Schedule L	,			22	
Lia	23	Secured mortgages and notes payable to unrela		l l		23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	-				
		Schedule D	,	·	4,500.	25	0.
	26	Total liabilities. Add lines 17 through 25			83,888.	26	60,639.
		Organizations that follow SFAS 117 (ASC 958					
s		complete lines 27 through 29, and lines 33 an					
၁၁	27	Unrestricted net assets			883,884.	27	1,240,928.
alai	28	Temporarily restricted net assets			163,132.	28	101,658.
9	29	Democratic methods to the description		25,000.	29	25,000.	
ָב בים		Organizations that do not follow SFAS 117 (A), check here 🕨 🗌				
or		and complete lines 30 through 34.					
î	30	Capital stock or trust principal, or current funds				30	
SSE	31	Paid-in or capital surplus, or land, building, or ed				31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in				32	
ž	33	Total net assets or fund balances			1,072,016.	33	1,367,586.
	34	Total liabilities and net assets/fund balances .			1,155,904.	34	1,428,225.

Form **990** (2018)

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form	1990 (2018) Foundation of KS	43-0	920400	Pag	ge IZ			
Pa	rt 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	1,205	5,6	39.			
2	Total expenses (must equal Part IX, column (A), line 25)	2	919	9,6	<u> 15.</u>			
3	3 Revenue less expenses. Subtract line 2 from line 1							
4	4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))4							
5	Net unrealized gains (losses) on investments	5	9	, 5	46.			
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 in Schedule O)	9			0.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,							
	column (B)) 10 1							
Pa	rt XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII				<u>Ш</u>			
				Yes	No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X			
	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?		2b	X				
	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 X Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the							
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X				
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O.						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit						
	Act and OMB Circular A-133?		За		X			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit						

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

Open to Public Inspection

American Civil Liberties Union **Employer identification number** Name of the organization Foundation of KS 43-0926406 Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 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). 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: 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). X 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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. 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. 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. 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. 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. 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. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed in your governing document? (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) above (see instructions))

09114 1

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.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	330,443.	451,615.	1013414.	913,405.	1189624.	3898501.
2	Tax revenues levied for the organ-						
	ization'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	330,443.	451,615.	1013414.	913,405.	1189624.	3898501.
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)						334,324.
	Public support. Subtract line 5 from line 4.						3564177.
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	330,443.	451,615.	1013414.	913,405.	1189624.	3898501.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources			778.	1,693.	4,685.	7,156.
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						3905657.
12	Gross receipts from related activities,	•	,			12	245,534.
13	First five years. If the Form 990 is for	~			•		
804	organization, check this box and stop	here Dor					>
	ction C. Computation of Publi			. (2)			01 26
	Public support percentage for 2018 (li		•	* * * * * * * * * * * * * * * * * * * *		14	91.26 % 94.93 %
15	Public support percentage from 2017					15	
16a	33 1/3% support test - 2018. If the containing and life is	-					, 37
_	stop here. The organization qualifies		•			or mare shook thi	
D	33 1/3% support test - 2017. If the c						
47-	and stop here. The organization qual						
17a	10% -facts-and-circumstances test and if the organization meets the "fac	-					
	•		·	•		· ·	
h	meets the "facts-and-circumstances" 10% -facts-and-circumstances test	ū				7a and line 15 is 1	
D	more, and if the organization meets the	_					
	organization meets the "facts-and-circ		•		•		. .
1Ω	Private foundation. If the organization			•			
<u>18</u>	i iivate iouiidatioii. Ii tile orgaliizatio	ii did fiot bliech a l	DON OIT HITE TO, TO	i, iou, ira, ui 170	, oriect trile bux al	10 300 1131100110115	

Schedule A (Form 990 or 990-EZ) 2018

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.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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 per-						
	formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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.)						
Sec	ction B. Total Support		T			_	
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	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 five years. If the Form 990 is for	· ·			•	. , . ,	
0	check this box and stop here						
	ction C. Computation of Publi			. (5)		T .= T	
	Public support percentage for 2018 (li	, (,,	,	(,,		15	<u>%</u>
	Public support percentage from 2017 ction D. Computation of Inves					16	%
	-			20 13 column (f)		17	0/
	Investment income percentage for 20 Investment income percentage from 2					18	<u>%</u>
198	33 1/3% support tests - 2018. If the						. .
L	more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization						
i.	line 18 is not more than 33 1/3%, che						
20	Private foundation If the organization						

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? 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.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **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)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? 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.
- 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)? 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) 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).
- **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? If "Yes," provide detail in Part VI.
- 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? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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))? If "Yes," provide detail in Part VI.
- **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? If "Yes," provide detail in **Part VI.**
- 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? If "Yes," provide detail in Part VI.
- 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)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		
- Ou		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
Ja		
9b		
9с		
10a		
10b		

Par	T IV Supporting Organizations (continued)			
	• • • • • • • • • • • • • • • • • • • •		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a. b. or c. provide detail in Part VI.	11c		
Sect	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? 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 directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	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? 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.	2		
Sect	tion 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)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
<u> </u>	the supported organization(s).	1		
Seci	tion D. All Type III Supporting Organizations		V	
_			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? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), 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? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sect	tion 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)			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions)	<u> </u>	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	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? 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.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	OL		
2	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below. Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
а	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>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	Ja		
	of its supported organizations? If "Ves " describe in Part VI the role played by the organization in this regard	3b		

Pai	Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Organi	zations		
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. A				
	other Type III non-functionally integrated supporting organizations must co	omplete Sec	tions A through E.		
Sect	ion 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			
Sect	ion 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):				
а	Average monthly value of securities	1a			
b	Average monthly cash balances	1b			
С	Fair market value of other non-exempt-use assets	1c			
d	Total (add lines 1a, 1b, and 1c)	1d			
е	Discount claimed for blockage or other				
	factors (explain in detail in Part VI):				
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 1-1/2% 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 .035	6			
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sect	ion C - Distributable Amount			Current Year	
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1			
2	Enter 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	Check here if the current year is the organization's first as a non-functiona	lly integrated	d Type III supporting orga	nization (see	
	instructions).				

Schedule A (Form 990 or 990-EZ) 2018

Par	t V Type III Non-Functionally Integrated 509((a)(3) Supporting Orga	inizations _(continued)	
Secti	on D - Distributions	Current Year		
1	Amounts paid to supported organizations to accomplish exer			
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose			
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	ne organization is responsive	·	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
	•	(i)	(ii)	(iii)
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2018	Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
<u>a</u>	From 2013			
b	From 2014			
с	From 2015			
d	From 2016			
е	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
<u>_ i</u>	Carryover from 2013 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D,			
	line 7: \$			
<u>a</u>	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
с	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
a	Excess from 2014			
b	Excess from 2015			
с	Excess from 2016			
	Excess from 2017			
	Evenes from 2018			

Schedule A (Form 990 or 990-EZ) 2018

American Civil Liberties Union

Schedule A	Form 990 or 990-EZ) 2018 Foundation of KS	43-0926406 Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a 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 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 Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any addit (See instructions.)	or 17b; Part III, line 12; s 1 and 2; Part IV, Section C, t V, Section B, line 1e; Part V,

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service **Schedule of Contributors**

Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

2018

Name of the organization	Employer identification number
American Civil Liberties Union	
Foundation of KS	43-0926406
Organization type (check one):	

Filers of:		Section:					
Form 990	or 990-EZ	X 501(c)(3) (enter number) organization					
		4947(a)(1) nonexempt charitable trust not treated as a private foundation					
		527 political organization					
Form 990	I-PF	501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
		covered by the General Rule or a Special Rule. '), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.					
General I	Rule						
	-	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special F	Rules						
:	sections 509(a)(1) a any one contributor	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; line 1. Complete Parts I and II.					
;	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.						
· · · · · · · · · · · · · · · · · · ·	year, contributions of the checked, enter he purpose. Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., plete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year					
but it mu	st answer "No" on F	t isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to e filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).					

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

American Civil Liberties Union

Foundation of KS

Employer identification number

43-0926406

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	onal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Nume, address, and 2n + 4	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		- \$ \$ 30,555.	Person X Payroll
(a)	(b)	(c)	(d)
No. 4	Name, address, and ZIP + 4	Total contributions - \$ 149,800.	Person X Payroll Complete Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	runio, addi 035, and EIF T T	- \$ 76,596.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Trumo, addi 033, dila Eli TT	- \$	Person Payroll Complete Part II for noncash contributions.)

Name of organization
American Civil Liberties Union
Foundation of KS

Employer identification number
43-0926406

Part II	Noncash Property (see instructions). Use duplicate copies of P	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
			
			1

Schedule B (Form 990, 990-EZ, or 990-PF) (2018) Page 4 Name of organization **Employer identification number** American Civil Liberties Union Foundation of KS 43-0926406 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy

Tax	x) (see separate instructions), t	then			
•	Section 501(c)(4), (5), or (6) orga	anizations: Complete Part III.			
Nan	ne of organization Amer:	ican Civil Libertie	es Union	Empl	oyer identification number
	Found	dation of KS			43-0926406
Pa	art I-A Complete if the	organization is exempt und	der section 501(c)	or is a section 527 or	ganization.
2	•	rganization's direct and indirect polit penditures ampaign activities	. •	▶\$	
Pa	art I-B Complete if the	e organization is exempt un	der section 501(c)(3).	
1	Enter the amount of any excis	e tax incurred by the organization ur	nder section 4955	 \$	
2	Enter the amount of any excis	e tax incurred by organization mana	gers under section 4955	▶\$	
3	If the organization incurred a s	section 4955 tax, did it file Form 472	0 for this year?		Yes No
4a	Was a correction made?				Yes No
	o If "Yes." describe in Part IV.				
Pa	art I-C Complete if the	e organization is exempt un	der section 501(c),	except section 501(c	<u>)(3).</u>
1	Enter the amount directly expe	ended by the filing organization for s	ection 527 exempt funct	tion activities > \$	
2	Enter the amount of the filing	organization's funds contributed to o	other organizations for se	ection 527	
	exempt function activities			▶\$	
3	Total exempt function expend	itures. Add lines 1 and 2. Enter here	and on Form 1120-POL,	,	
	line 17b			▶\$	
4	Did the filing organization file	Form 1120-POL for this year?			Yes No
5	Enter the names, addresses a	nd employer identification number (E	EIN) of all section 527 po	litical organizations to which	the filing organization
		anization listed, enter the amount pa			·
		ere promptly and directly delivered to		•	e segregated fund or a
	political action committee (PA	C). If additional space is needed, pro	ovide information in Part	IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2018

LHA

832041 11-08-18

Schedule C (Form 990 or 990-EZ) 2018 Foun		43-0	926406 Page 2			
Part II-A Complete if the organiza	ion is exen	npt under section	501(c)(3) and file	ed Form 5768 (ele	ction under	
section 501(h)).						
A Check ▶ ☐ if the filing organization bel	ongs to an affi	liated group (and list in	Part IV each affiliated	group member's name	e, address, EIN,	
expenses, and share of exc	ess lobbying	expenditures).				
B Check ▶ ☐ if the filing organization che	cked box A ar	nd "limited control" pro	visions apply.			
	Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)					
1a Total lobbying expenditures to influence p	ublic opinion (grass roots lobbying)		28,333.		
b Total lobbying expenditures to influence a		47,893.				
c Total lobbying expenditures (add lines 1a	and 1b)	, , , , , , , , , , , , , , , , , , , ,		76,226.		
				843,389.		
e Total exempt purpose expenditures (add li				919,615.		
f Lobbying nontaxable amount. Enter the ar				162,942.		
If the amount on line 1e, column (a) or (b) is:	The lob	bying nontaxable am	ount is:			
Not over \$500,000	20% of	the amount on line 1e.				
Over \$500,000 but not over \$1,000,000	\$100,00	00 plus 15% of the exce	ess over \$500,000.			
Over \$1,000,000 but not over \$1,500,000	\$175,00	00 plus 10% of the exce	ess over \$1,000,000.			
Over \$1,500,000 but not over \$17,000,000	\$225,00	00 plus 5% of the exces	ss over \$1,500,000.			
Over \$17,000,000	\$1,000,	000.				
			-			
g Grassroots nontaxable amount (enter 25%	of line 1f)			40,736.		
h Subtract line 1g from line 1a. If zero or less	s, enter -0-			0.		
i Subtract line 1f from line 1c. If zero or less	, enter -0			0.		
j If there is an amount other than zero on ei	her line 1h or	line 1i, did the organiza	tion file Form 4720			
reporting section 4911 tax for this year?					Yes No	
	4-Year Ave	eraging Period Under	Section 501(h)			
(Some organizations that made		01(h) election do not hat la structions for lin	•	of the five columns be	low.	
Lo	bbying Expe	nditures During 4-Yea	r Averaging Period			
Calendar year (or fiscal year beginning in)	a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total	

Lobbying Expenditures During 4-Year Averaging Period											
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total						
2a Lobbying nontaxable amount	90,888.	105,438.	139,855.	162,942.	499,123.						
b Lobbying ceiling amount (150% of line 2a, column(e))					748,685.						
c Total lobbying expenditures	44,258.	73,505.	80,168.	76,226.	274,157.						
d Grassroots nontaxable amount	22,722.	26,360.	34,964.	40,736.	124,782.						
e Grassroots ceiling amount (150% of line 2d, column (e))					187,173.						
f Grassroots lobbying expenditures	8,841.	18,146.	19,631.	28,333.	74,951.						

Schedule C (Form 990 or 990-EZ) 2018

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

		(a)		(b)	
4 6	lobbying activity.	Yes	No	Amo	ount
I L	During the year, did the filing organization attempt to influence foreign, national, state, or				
lo	ocal legislation, including any attempt to influence public opinion on a legislative matter				
c	or referendum, through the use of:				
a ∨	/olunteers?				
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c N	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
f G	Grants to other organizations for lobbying purposes?				
_	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h F	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?				
	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	f "Yes," enter the amount of any tax incurred under section 4912				
c If	f "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	f the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? III-A Complete if the organization is exempt under section 501(c)(4), section	, FO1/a\/F\	0r 000	tion	
d II		1 50 1 (0)(5)	, or sec	LION	
d If					
d If	501(c)(6).			Yes	N
d II	501(c)(6).		1	Yes	N
d f Part	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members?			Yes	No
d	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	e prior year? 1 501(c)(5)	2 3 , or sec	tion	
d if	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section	e prior year? n 501(c)(5) No," OR (, or sec b) Part	tion	
1 V 2 C 3 C Part	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes."	e prior year? n 501(c)(5) No," OR (, or sec b) Part	tion	
d	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members	e prior year? n 501(c)(5) No," OR (, or sec b) Part	tion	
d	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	e prior year? n 501(c)(5) No," OR (g , or sec b) Part	tion	
d	Mere substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	e prior year? n 501(c)(5) No," OR (or sec b) Part	tion	
d III art 1 V 2 E 3 E art b C c T	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the lill-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year	prior year? n 501(c)(5) No," OR (2 3, or sec b) Part	tion	
1 V 2 C 3 C 2 S e a C b C c T	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	e prior year? n 501(c)(5) No," OR (2 3 , or sec b) Part	tion	No e 3, is
1 V22 C33 C2art 1 C C T C C T C C T C C T C C T C C T C C T C C T C C T C C C T C C C T C C C C T C	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues In notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds	e prior year? n 501(c)(5) No," OR (2 3 , or sec b) Part	tion	
1 V 2 C 3 C 2 C T 3 A 4 H 6 C C T 3 A 4 H 6 C C T 3 A 4 H 6 C C T 3 A 4 H 6 C C C T 3 A 4 H 6 C C C C C C C C C C C C C C C C C C	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues for notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expensions.	e prior year? n 501(c)(5) No," OR (2 3 , or sec b) Part	tion	
1 V 22 E 33 E 22 S e a C b C T 33 A	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues for notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedages the organization agree to carryover to the reasonable estimate of nondeductible lobbying and potexpenditure next year?	e prior year? n 501(c)(5) No," OR (2 3, or sec b) Part	tion	
1 V 2 E 3 E 2 S e a C c T 3 A 4 H	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues f notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polescependiture next year? Taxable amount of lobbying and political expenditures (see instructions)	e prior year? n 501(c)(5) No," OR (2 3 , or sec b) Part	tion	
1 V 2 E 3 E 2 S 6 C T 3 A 4 H C C 5 T Part	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues for nondeductible lobbying and political expenditure of nondeductible lobbying and political expenditure next year? Expenses to report and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Expension and political expenditures (see instructions) IV Supplemental Information	e prior year? n 501(c)(5) No," OR (2 3, or sec b) Part 1 2a 2b 2c 3	tion III-A, line	
1 V 2 C 3 C 2 S 6 C C T 3 A 4 H C C 6 T 7 art 7 rovides	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues f notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polescependiture next year? Taxable amount of lobbying and political expenditures (see instructions)	e prior year? n 501(c)(5) No," OR (2 3, or sec b) Part 1 2a 2b 2c 3	tion III-A, line	

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.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

American Civil Liberties Union Foundation of KS

Employer identification number 43-0926406

Pai			or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	e 6. (a) Donor advised funds	(b) Funds and other accounts
4	Total number at and of year	(a) Donor advised funds	(b) Furius and other accounts
1 2	Total number at end of year		
3	Aggregate value of grants from (during year) Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	l writing that the assets held in donor advis	sed funds
·	are the organization's property, subject to the organization's	-	
6	Did the organization inform all grantees, donors, and donor ac		
•	for charitable purposes and not for the benefit of the donor or		
	• •		
Pai			
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or ed	ducation) Preservation of a his	torically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b			_
С	Number of conservation easements on a certified historic stru	cture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	fter 7/25/06, and not on a historic structo	ure
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation ease	ement is located	
5	Does the organization have a written policy regarding the peri	odic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and enforcing cons	servation easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspecting, handle	ling of violations, and enforcing conserva	tion easements during the year
_	> \$		6 M O (7 M)
8	Does each conservation easement reported on line 2(d) above	•	
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation	·	· · · · · · · · · · · · · · · · · · ·
	include, if applicable, the text of the footnote to the organizati	on's financial statements that describes	the organization's accounting for
Par	conservation easements. t III Organizations Maintaining Collections of	Art Historical Treasures or Of	ther Similar Assets
	Complete if the organization answered "Yes" on Form		
12	If the organization elected, as permitted under SFAS 116 (ASC		ment and halance sheet works of art
Iu	historical treasures, or other similar assets held for public exh		•
	the text of the footnote to its financial statements that describ		ince of public service, provide, in rain Am,
h	If the organization elected, as permitted under SFAS 116 (ASC		t and halance sheet works of art historical
D	treasures, or other similar assets held for public exhibition, ed	· ·	
	relating to these items:	addition, or resourer in farther area or pa	bile service, provide the following amounts
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
2	If the organization received or held works of art, historical trea		al gain, provide
_	the following amounts required to be reported under SFAS 11		J, p. 5.1.45
а	Revenue included on Form 990, Part VIII, line 1		> \$
	Assets included in Form 990, Part X		

832051 10-29-18

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

Schedule D (Form 990) 2018

09114__1

	t III Organizations Maintaining Co		Historical Tre	asures or	Other			2040		age 🗲
	•							_		
3	Using the organization's acquisition, accessio	n, and other records	s, cneck any of the f	ollowing that	are a sig	gnificant u	se of its c	ollection	items	
	(check all that apply):	_	□ .	_						
а	Public exhibition	d		hange progra	ıms					
b	Scholarly research	е	Other							
С										
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 o	f art, historical treas	sures, or othe	r similar	assets		_		_
	to be sold to raise funds rather than to be mai							Yes		No
Par	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, custodia	ın or other intermedi	ary for contributions	s or other ass	ets not i	ncluded				
	on Form 990, Part X?							Yes		No
b	If "Yes," explain the arrangement in Part XIII a									
								Amoun	t	
С	Beginning balance					1c				
d	Additions during the year									
е	Distributions during the year									
f	Ending balance									
2a	Did the organization include an amount on Fo							Yes		No
	If "Yes," explain the arrangement in Part XIII.]
Par						10.				
		(a) Current year	(b) Prior year	(c) Two year		(d) Three y	ears back	(e) Four	vears	hack
1a	Beginning of year balance	34,198.	32,709.		,433.		33,618.	(6) 1 641		217.
b	Contributions	, -	, -		<i>'</i>				,	
C	Net investment earnings, gains, and losses	912.	2,851.	3	3,663.		-1,773.		1,790.	
d	Grants or scholarships	•	-,		,		_,			
е	Other expenditures for facilities	1,324.	1,306.	1	1,304.		1,323.		1	300
	and programs	1,324.	56.	_	83.		89.			89.
f	Administrative expenses	33,646.		2.7					22	
g	End of year balance		34,198.		2,709.		30,433.		33,	618.
2	Provide the estimated percentage of the curre	ent year end balance	· · · · · · · · · · · · · · · · · ·) held as:						
a	Board designated or quasi-endowment		_%							
b	Permanent endowment ► 74.00	%								
С	Temporarily restricted endowment ▶ 26									
	The percentages on lines 2a, 2b, and 2c should	· ·								
3a	Are there endowment funds not in the posses	sion of the organiza	tion that are held ar	nd administer	ed for th	e organiza	ation	ſ		
	by:								Yes	No
	(i) unrelated organizations							3a(i)		X
	(ii) related organizations							3a(ii)	Х	
b	If "Yes" on line 3a(ii), are the related organizat	ions listed as require	ed on Schedule R?					3b	Х	
4	Describe in Part XIII the intended uses of the		vment funds.							
Par	t VI Land, Buildings, and Equipme									
	Complete if the organization answered	"Yes" on Form 990	, Part IV, line 11a. S	ee Form 990,	, Part X,	line 10.				
	Description of property	(a) Cost or of	` '	or other		ccumulate	ed	(d) Boo	k value	€
		basis (investm	nent) basis	(other)	dep	preciation				
1a	Land									
b	Buildings									
С	Leasehold improvements									
d	Equipment			3,291.		67,7	73.		5,52	L8.
е	Other			9,300.		9,30	0.0			0.
	. Add lines 1a through 1e. (Column (d) must eq		K. column (B). line 1	Oc.)			▶	ļ	5,52	L8.

Schedule D (Form 990) 2018

		vii Libertie		
Schedule	D (Form 990) 2018 Foundation	of KS	4	3-0926406 Page 3
Part VI	Investments - Other Securities.			
	Complete if the organization answered "Yes"	on Form 990, Part IV, lir	ne 11b. See Form 990, Part X, line 12.	
(a) Desc	ription of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market value
(1) Finan	cial derivatives			
(2) Close	ely-held equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)	//			
	. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VI	III Investments - Program Related.			
	Complete if the organization answered "Yes"			
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX				
	Complete if the organization answered "Yes"	on Form 990, Part IV, lir	ne 11d. See Form 990, Part X, line 15.	
		Description	, ,	(b) Book value
(1)		·		
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
<u>(9)</u>				
Part X		•		>
	Complete if the organization answered "Yes"	on Form 990, Part IV, lir		25.
<u>1. </u>	(a) Description of liability		(b) Book value	
(1) Fe	ederal income taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

▶

Schedule D (Form 990) 2018

(8) (9)

Foundation of KS

Par	t XI Reconciliation of Revenue per Audited Financial State	ements With R	evenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12a.			
1	Total revenue, gains, and other support per audited financial statements			1	1,209,929.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	9,546.		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
	Add lines 2a through 2d			2e	9,546. 1,200,383.
3	Subtract line 2e from line 1			3	1,200,383.
	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1	- 0-6		
	Investment expenses not included on Form 990, Part VIII, line 7b		5,256.		
b	Other (Describe in Part XIII.)	4b			5 056
	Add lines 4a and 4b			4c	5,256.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)	tomonto With F		5	1,205,639.
Par	t XII Reconciliation of Expenses per Audited Financial Sta		xpenses per F	teturn	1.
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12a.			014 250
				1	914,359.
	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1			
	Donated services and use of facilities				
	Prior year adjustments				
	Other losses				
	Other (Describe in Part XIII.)	2d		_	0
	Add lines 2a through 2d			2e	914,359.
	Subtract line 2e from line 1			3	914,359.
	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1	F 0F6		
	Investment expenses not included on Form 990, Part VIII, line 7b		5,256.		
	Other (Describe in Part XIII.)	4b			F 256
	Add lines 4a and 4b			4c	5,256.
5 Dar	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 t XIII Supplemental Information.	<u>}.)</u>		5	919,615.
		D 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	101 5 11/1: 4	D 13	/ !:
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4			; Part X	i, line 2; Part XI,
lines 2	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide an	y additional informa	tion.		
Dar	t V, line 4:				
rai	c v, line 4.				
The	majority of the endowment funds are pe	rmanent 1v	restricte	a ac	nor
1110	. Majorrey or the chaowment runas are pe		TCBCLICCC	<u>u uc</u>)IIOI
con	tributions. Amounts in excess of the pe	rmanently	restricte	d er	ndowment
<u></u>	eribacions. Madanes in excess of the pe		TCBCLICCC	<u>u cı</u>	Idowiiiciic
fun	ds are classified as temporarily restri	cted net a	assets and	car	n be used
	ab alo olabbilioa ab compolalily loboli		ibboob and		- 20 4204
tow	vards the organization's exempt purpose.				
	arab one organization b onempt purpose.				
Par	t X, Line 2:				
	·				
The	Foundation is exempt from income taxes	under Int	ernal Rev	enue	e Code
	•				
(IR	C) Section 501(c)(3). The organization'	s account	ing policy	is	to
pro	vide liabilities for uncertain income t	ax provisi	ons when	<u>a</u> 1i	lability
					<u>=</u>
<u>is</u>	probable and estimable. The organization	n has no u	ncertain	tax	positions
for	the years ended March 31, 2019 and 201	.8 and is r	not aware	of a	any

Schedule D (Form 990) 2018

832054 10-29-18

Part XIII Supplemental Information (continued)							
violation of its tax status as an organization exempt from income taxes.							
The organization is no longer subject to audits for Federal or state							
purposes for periods prior to fiscal 2016.							

SCHEDULE 0

(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.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

American Civil Liberties Union Foundation of KS

Employer identification number 43-0926406

Form 990, Part I, Line 1, Description of Organization Mission:

rights and civil liberties of every individual in Kansas regardless of

creed, race, religion or other labeling through education, advocacy,

and litigation.

Form 990, Part VI, Section B, line 11b:

The Form 990 is reviewed and approved by the Finance Committee. A copy of the Form 990 is also provided to the full Board of Directors prior to filing.

Form 990, Part VI, Section B, Line 12c:

All potential conflicts of interest are required to be immediately brought to the attention of the Board on a continuous basis. The Board reviews, rules on, and documents all potential conflicts of interest.

Form 990, Part VI, Section B, Line 15a:

The Board of Directors reviews the performance of the executive director and sets compensation based on the accomplishment of certain goals. The executive director's compensation is compared to compensation of similar-sized ACLU affiliates in other states. Compensation is approved by the Finance Committee in the annual budget process.

Form 990, Part VI, Section C, Line 19:

The organization's governing documents, conflict of interest policy, and financial statements are made available to the public upon request.

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

Schedule O (Form 990 or 990-EZ) (2018)

SCHEDULE R (Form 990)

Part I

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.

(c)

(d)

(e)

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

(a)

Department of the Treasury Internal Revenue Service

American Civil Liberties Union Foundation of KS

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

(b)

Employer identification number 43-0926406

(f)

Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state of foreign country)	or Total inco	me End-of-yea		ontrolling ntity	g
Part II Identification of Related Tax-Exempt Organi organizations during the tax year.	zations. Complete if the organization	answered "Yes" on Form 990), Part IV, line 34, b	pecause it had one	or more related tax-exe	mpt	
(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	(f) Direct controlling entity	controlling Section 8	
American Civil Liberties Union of Kansas -				501(c)(3))		Yes	No
91-2090691, 6701 West 64th Street, Suite 210, Overland Park, KS 66202	Protect & defend rights & civil liberties	Kansas	501(c)(4)		N/A		х
<u> </u>							

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

Schedule R (Form 990) 2018

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)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)				
Name, address, and EIN	Primary activity	Legal domicile Direct controlling	Direct controlling	Direct controlling	Legal domicile Direct controlling	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total	Share of	1		Disproportiona		Code V-UBI	General	Percentage ownership
of related organization		(state or foreign	entity	excluded from tax under	income	end-of-year assets		itions?	ons? No No No No No No No No No N		ownership				
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	0				
	1														
	1														
	1														
	1														
	1														
	1														
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		l .					l								

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	ent	Section 512(b)(13) controlled entity?	
		,						Yes	No	

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?				
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		X	
	Gift, grant, or capital contribution to related organization(s)	1b		X	
С	Gift, grant, or capital contribution from related organization(s)	1c		Х	
	Loans or loan guarantees to or for related organization(s)	1d		Х	
	Loans or loan guarantees by related organization(s)	1e		Х	
f	Dividends from related organization(s)	1f		X	
g	Sale of assets to related organization(s)	1g		X	
	Purchase of assets from related organization(s)	1h		X	
i	Exchange of assets with related organization(s)	1i		Х	
	Lease of facilities, equipment, or other assets to related organization(s)	1j		Х	
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		Х	
	Performance of services or membership or fundraising solicitations for related organization(s)	11		Х	
	n Performance of services or membership or fundraising solicitations by related organization(s)	1m		Х	
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X		
	Sharing of paid employees with related organization(s)	10	X		
р	Reimbursement paid to related organization(s) for expenses	1p		Х	
	Reimbursement paid by related organization(s) for expenses	1q	Х		
r	Other transfer of cash or property to related organization(s)	1r		Х	
s	Other transfer of cash or property from related organization(s)	1s		Х	
	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) American Civil Liberties Union of Kansas	N	13,868.	Pro rata share of facilities				
(2) American Civil Liberties Union of Kansas	0	274,902.	Timecards				
(3) American Civil Liberties Union of Kansas	Q	31,900.	Cash reimbursement				
<u>(4)</u>							
<u>(5)</u>							
<u>(6)</u>							

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)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.? Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproptionate allocation	Code V-UBI amount in box 2 of Schedule K-	General of managing partner? Yes No	(k) r Percentage ownership
	-									

832165 10-02-18 Schedule R (Form 990) 2018

Form **8868**

(Rev. January 2019)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-1709

Form 8868 (Rev. 1-2019)

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or Type or American Civil Liberties Union print 43-0926406 Foundation of KS File by the Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN) due date for filina vour 6701 W. 64th Street, Suite 210 return. See instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions. Overland Park, KS 66202 Enter the Return Code for the return that this application is for (file a separate application for each return) Return Application Application Return Code Is For Is For Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 10 Form 990-PF Ω4 Form 5227 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 8870 Form 990-T (trust other than above) 06 12 Roberta Beier, Director of Finance and Administration The books are in the care of ▶ 6701 W. 64th Street, Suite 210 - Overland Park, KS 66202 Telephone No. ► 913-490-4100 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box 🕨 🔲 . If it is for part of the group, check this box 🕨 🦳 and attach a list with the names and EINs of all members the extension is for. I request an automatic 6-month extension of time until February 15, 2020 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year or $_$, and ending $_$ $exttt{MAR}$ $\,\,$ 31 , $\,\,$ $\,$ $\,$ $\,$ 2019► X tax year beginning APR 1, 2018 Initial return Final return If the tax year entered in line 1 is for less than 12 months, check reason: Change in accounting period 3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 0. any nonrefundable credits. See instructions. За If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment

823841 12-19-18

instructions

LHA

For Privacy Act and Paperwork Reduction Act Notice, see instructions.