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

Return of Organization Exempt From Income Tax

Under section 501(c) of the Internal Revenue Code (except black lung benefit trust or private foundation) or section 4947(a)(1) nonexempt charitable trust

Note: *The organization may have to use a copy of this return to satisfy state reporting requirements.*

OMB No. 1545-0047 | 1999 | This Form is Open to Public Inspection

A For the 1999 calendar year, OR tax year period beginning 07/01 **, 1999, and ending** 06/30/2000

B Check if: [ ] Change of address [ ] Initial return [ ] Final return [ ] Amended return (required also for state reporting)

Please use IRS label or print or type. See Specific Instructions.

C Name of organization: GREATER K. C. LINC, INC.

Number and street (or P.O. box if mail is not delivered to street address): 3100 BROADWAY — Room/suite: 226

City or town, state or country, and ZIP + 4: KANSAS CITY, MO 64111

D Employer identification number: 43-1676730

E Telephone number: ( ) -

F Check ▶ [ ] if exemption application is pending

G Type of organization → [X] Exempt under section 501(c) (3) ◀ (insert number) OR ▶ [ ] section 4947(a)(1) nonexempt charitable trust

Note: Section 501(c)(3) exempt organizations and 4947(a)(1) nonexempt charitable trusts MUST attach a completed Schedule A (Form 990).

H (a) Is this a group return filed for affiliates? [ ] Yes [X] No

(b) If "Yes," enter the number of affiliates for which this return is filed: ▶

(c) Is this a separate return filed by an organization covered by a group ruling? [ ] Yes [X] No

I If either box in H is checked "Yes," enter four-digit group exemption number (GEN) ▶

J Accounting method: [ ] Cash [X] Accrual [ ] Other (specify) ▶

K Check here ▶ [ ] if the organization's gross receipts are normally not more than $25,000. The organization need not file a return with the IRS; but if it received a Form 990 Package in the mail, it should file a return without financial data. **Some states require a complete return.**

Note: *Form 990-EZ may be used by organizations with gross receipts less than $100,000 and total assets less than $250,000 at end of year.*

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 15.)

Revenue	1	Contributions, gifts, grants, and similar amounts received: STMT 1				
	a	Direct public support	1a	720,611.		
	b	Indirect public support	1b			
	c	Government contributions (grants)	1c	16,079,620.		
	d	**Total** (add lines 1a through 1c) (attach schedule of contributors) (cash $ 16,800,231. noncash $)			1d	16,800,231.
	2	Program service revenue including government fees and contracts (from Part VII, line 93)			2	376,801.
	3	Membership dues and assessments			3	
	4	Interest on savings and temporary cash investments			4	436,434.
	5	Dividends and interest from securities			5	
	6 a	Gross rents	6a			
	b	Less: rental expenses	6b			
	c	Net rental income or (loss) (subtract line 6b from line 6a)			6c	
	7	Other investment income (describe ▶)			7	
	8 a	Gross amount from sales of assets other than inventory — (A) Securities / (B) Other	8a			
	b	Less: cost or other basis and sales expenses	8b			
	c	Gain or (loss) (attach schedule)	8c			
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))			8d	
	9	Special events and activities (attach schedule)				
	a	Gross revenue (not including $ of contributions reported on line 1a)	9a			
	b	Less: direct expenses other than fundraising expenses	9b			
	c	Net income or (loss) from special events (subtract line 9b from line 9a)			9c	
	10a	Gross sales of inventory, less returns and allowances	10a			
	b	Less: cost of goods sold	10b			
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)			10c	
	11	Other revenue (from Part VII, line 103)			11	36,031.
	12	**Total revenue** (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)			12	17,649,497.
Expenses	13	Program services (from line 44, column (B))			13	14,770,744.
	14	Management and general (from line 44, column (C))			14	982,527.
	15	Fundraising (from line 44, column (D))			15	
	16	Payments to affiliates (attach schedule)			16	
	17	**Total expenses** (add lines 16 and 44, column (A))			17	15,753,271.
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)			18	1,896,226.
	19	Net assets or fund balances at beginning of year (from line 73, column (A))			19	7,396,973.
	20	Other changes in net assets or fund balances (attach explanation)			20	
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)			21	9,293,199.

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See Specific Instructions on page 19.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash $ 8,159,749. noncash $)	22	8,159,749.	8,159,749.	STMT 3	
23 Specific assistance to individuals (attach schedule)	23				
24 Benefits paid to or for members (attach schedule)	24				
25 Compensation of officers, directors, etc.	25	240,965.	240,965.		
26 Other salaries and wages	26	2,097,440.	1,697,570.	399,870.	
27 Pension plan contributions	27				
28 Other employee benefits	28	577,067.	558,296.	18,771.	
29 Payroll taxes	29	98,468.	98,353.	115.	
30 Professional fundraising fees	30				
31 Accounting fees	31	8,893.		8,893.	
32 Legal fees	32				
33 Supplies	33	484,404.	434,801.	49,603.	
34 Telephone	34	60,508.	32,861.	27,647.	
35 Postage and shipping	35	90,055.	89,761.	294.	
36 Occupancy	36	140,185.		140,185.	
37 Equipment rental and maintenance	37	54,565.	29,436.	25,129.	
38 Printing and publications	38	133,085.	125,737.	7,348.	
39 Travel	39	34,299.	19,462.	14,837.	
40 Conferences, conventions, and meetings	40	304,139.	263,327.	40,812.	
41 Interest	41				
42 Depreciation, depletion, etc. (attach schedule)	42	180,285.		180,285.	
43 Other expenses (itemize): a STMT 4	43a	3,089,164.	3,020,426.	68,738.	
b	43b				
c	43c				
d	43d				
e	43e				
44 **Total functional expenses** (add lines 22 through 43) *Organizations completing columns (B)-(D), carry these totals to lines 13-15*	44	15,753,271.	14,770,744.	982,527.	

Reporting of Joint Costs. - Did you report in column (B) (Program services) any joint costs from a combined educational campaign and fundraising solicitation? ▶ ☐ Yes ☒ No

If "Yes," enter **(i)** the aggregate amount of these joint costs $ ______ ; **(ii)** the amount allocated to Program services $ ______ ;
(iii) the amount allocated to Management and general $ ______ ; and **(iv)** the amount allocated to Fundraising $ ______

Part III Statement of Program Service Accomplishments (See Specific Instructions on page 22.)

What is the organization's primary exempt purpose? ▶ SEE STATEMENT 5

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

		Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
a	SEE STATEMENT 6 (Grants and allocations $ 2,488,739.)	3,778,001.
b	SEE STATEMENT 6 (Grants and allocations $ 247,666.)	359,376.
c	SEE STATEMENT 6 (Grants and allocations $ 1,541,324.)	2,256,324.
d	SEE STATEMENT 6 (Grants and allocations $ 388,202.)	3,430,777.
e	Other program services (attach schedule) STMT 7 (Grants and allocations $ 3,493,818.)	4,946,266.
f	**Total of Program Service Expenses** (should equal line 44, column (B), Program services) ▶	14,770,744.

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Part IV Balance Sheets (See Specific Instructions on page 22.)

Note: *Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.*

	Line	Description			(A) Beginning of year		(B) End of year
Assets	45	Cash - non-interest-bearing			1,334,476.	45	2,392,783.
	46	Savings and temporary cash investments			3,251,891.	46	5,537,057.
	47a	Accounts receivable	47a	4,242,211.			
	b	Less: allowance for doubtful accounts	47b	1,121,000.	5,494,927.	47c	3,121,211.
	48a	Pledges receivable	48a				
	b	Less: allowance for doubtful accounts	48b			48c	
	49	Grants receivable				49	
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)				50	
	51a	Other notes and loans receivable (attach schedule)	51a				
	b	Less: allowance for doubtful accounts	51b			51c	
	52	Inventories for sale or use				52	
	53	Prepaid expenses and deferred charges			4,111.	53	4,913.
	54	Investments - securities (attach schedule)				54	
	55a	Investments - land, buildings, and equipment: basis	55a				
	b	Less: accumulated depreciation (attach schedule)	55b			55c	
	56	Investments - other (attach schedule)				56	
	57a	Land, buildings, and equipment: basis	57a	1,051,644.			
	b	Less: accumulated depreciation (attach schedule)	57b	425,063.	383,430.	57c	626,581.
	58	Other assets (describe ▶)				58	
	59	**Total assets** (add lines 45 through 58) (must equal line 74)			10,468,835.	59	11,682,545.
Liabilities	60	Accounts payable and accrued expenses			3,071,862.	60	2,389,346.
	61	Grants payable				61	
	62	Deferred revenue				62	
	63	Loans from officers, directors, trustees, and key employees (attach schedule)				63	
	64a	Tax-exempt bond liabilities (attach schedule)				64a	
	b	Mortgages and other notes payable (attach schedule)				64b	
	65	Other liabilities (describe ▶)				65	
	66	**Total liabilities** (add lines 60 through 65)			3,071,862.	66	2,389,346.
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶** [X] and complete lines 67 through 69 and lines 73 and 74.					
	67	Unrestricted			1,392,516.	67	4,094,140.
	68	Temporarily restricted			6,004,457.	68	5,199,059.
	69	Permanently restricted				69	
		Organizations that do not follow SFAS 117, check here ▶ [ ] and complete lines 70 through 74.					
	70	Capital stock, trust principal, or current funds				70	
	71	Paid-in or capital surplus, or land, building, and equipment fund				71	
	72	Retained earnings, endowment, accumulated income, or other funds				72	
	73	**Total net assets or fund balances** (add lines 67 through 69 OR lines 70 through 72; column (A) must equal line 19 and column (B) must equal line 21)			7,396,973.	73	9,293,199.
	74	**Total liabilities and net assets/fund balances** (add lines 66 and 73)			10,468,835.	74	11,682,545.

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See Specific Instructions, page 24.)

a	Total revenue, gains, and other support per audited financial statements	a	17,649,497.
b	Amounts included on line **a** but not on line 12, Form 990:		
(1)	Net unrealized gains on investments $		
(2)	Donated services and use of facilities $		
(3)	Recoveries of prior year grants $		
(4)	Other (specify): $		
	Add amounts on lines **(1)** through **(4)**	b	
c	Line **a** minus line **b**	c	17,649,497.
d	Amounts included on line 12, Form 990 but not on line **a**:		
(1)	Investment expenses not included on line 6b, Form 990 $		
(2)	Other (specify): $		
	Add amounts on lines **(1)** and **(2)**	d	
e	Total revenue per line 12, Form 990 (line **c** plus line **d**)	e	17,649,497.

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total expenses and losses per audited financial statements	a	15,753,271.
b	Amounts included on line **a** but not on line 17, Form 990:		
(1)	Donated services and use of facilities $		
(2)	Prior year adjustments reported on line 20, Form 990 $		
(3)	Losses reported on line 20, Form 990 $		
(4)	Other (specify): $		
	Add amounts on lines **(1)** through **(4)**	b	
c	Line **a** minus line **b**	c	15,753,271.
d	Amounts included on line 17, Form 990 but not on line **a**:		
(1)	Investment expenses not included on line 6b, Form 990 $		
(2)	Other (specify): $		
	Add amounts on lines **(1)** and **(2)**	d	
e	Total expenses per line 17, Form 990 (line **c** plus line **d**)	e	15,753,271.

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see Specific Instructions on page 24.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
SEE STATEMENT 13		240,965.	17,768.	NONE

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than $100,000 from your organization and all related organizations, of which more than $10,000 was provided by the related organizations? ☐ Yes ☒ No
If "Yes," attach schedule - see Specific Instructions on page 25.

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Part VI Other Information (See Specific Instructions on page 25.)

		Line	Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77		X
78 a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	78a		X
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	78b		X
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		X
b	If "Yes," enter the name of the organization ▶ ______ and check whether it is ☐ exempt **OR** ☐ nonexempt.			
81 a	Enter the amount of political expenditures, direct or indirect, as described in the instructions for line 81 — 81a: NONE			
b	Did the organization file **Form 1120-POL** for this year?	81b		X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X	
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions for reporting in Part III.) — 82b:			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A	
85	*501(c)(4), (5), or (6) organizations.* **a** Were substantially all dues nondeductible by members?	85a	N/A	
b	Did the organization make only in-house lobbying expenditures of $2,000 or less?	85b	N/A	
	If "Yes" was answered to either 85a or 85b, **do not** complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.			
c	Dues, assessments, and similar amounts from members — 85c: NONE			
d	Section 162(e) lobbying and political expenditures — 85d: NONE			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices — 85e: NONE			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) — 85f: NONE			
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	85g	N/A	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A	
86	*501(c)(7) orgs.* Enter: **a** Initiation fees and capital contributions included on line 12 — 86a: N/A			
b	Gross receipts, included on line 12, for public use of club facilities — 86b: N/A			
87	*501(c)(12) orgs.* Enter: **a** Gross income from members or shareholders — 87a: N/A			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) — 87b: N/A			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88		X
89 a	*501(c)(3) organizations.* Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ NONE ; section 4912 ▶ NONE ; section 4955 ▶ NONE			
b	*501(c)(3) and 501(c)(4) orgs.* Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ NONE			
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization ▶ NONE			
90 a	List the states with which a copy of this return is filed ▶			
b	Number of employees employed in the pay period that includes March 12, 1999 (See inst.)	90b	30	

91 The books are in care of ▶ JOHN RICH Telephone no. ▶ 816-889-5055
Located at ▶ 3100 BROADWAY, KANSAS CITY, MO ZIP + 4 ▶ 64111

92 *Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of* **Form 1041** - Check here ▶ ☐
and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92 NONE

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Part VII **Analysis of Income-Producing Activities** (See Specific Instructions on page 29.)

Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a STATE ASSISTANCE					376,801.
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	436,434.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b OTHER REVENUE			01	36,031.	
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				472,465.	376,801.

105 **Total** (add line 104, columns (B), (D), and (E)) ▶ 849,266.

Note: *Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.*

Part VIII **Relationship of Activities to the Accomplishment of Exempt Purposes** (See Specific Instructions on page 30.)

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93A	STATE PROVIDED SALARIES, SUPPLIES, AND RENTS WHICH HELP TO SERVE THE NEEDS OF GREATER KC LINC, INC.

Part IX **Information Regarding Taxable Subsidiaries and Disregarded Entities (See Specific Instructions on page 30.)**

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Please Sign Here

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. (**Important:** See General Instruction U, on page 14.)

▶ Signature of officer | Date | ▶ Type or print name and title.

Paid Preparer's Use Only

Preparer's signature ▶	Date	Check if self-employed ▶ ☐	Preparer's SSN or PTIN 511-80-2296
Firm's name (or yours if self-employed) and address ▶	BAIRD KURTZ & DOBSON 120 WEST 12TH STREET, SUITE 1200 KANSAS CITY, MO	EIN ▶ 44-0160260 ZIP + 4 ▶ 64105-1936	

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SCHEDULE A (Form 990)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information - (See separate instructions.)

▶ Must be completed by the above organizations and attached to their Form 990 or 990-EZ.

OMB No. 1545-0047

1999

Name of the organization: GREATER K. C. LINC, INC.

Employer identification number 43-1676730

Part I **Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than $50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over $50,000 . . . . ▶	NONE			

Part II **Compensation of the Five Highest Paid Independent Contractors for Professional Services**
(See page 1 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than $50,000	(b) Type of service	(c) Compensation
SOFTERWARE 540 PENNSYLVANIA AVE, FT WASHINGTON, PA	SOFTWARE SERVICES	76,200.
Total number of others receiving over $50,000 for professional services . . . . ▶ NONE		

Part III Statements About Activities

			Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum?	1		X
	If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ $			
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any of its trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary:			
a	Sale, exchange, or leasing of property?	2a		X
b	Lending of money or other extension of credit?	2b		X
c	Furnishing of goods, services, or facilities?	2c		X
d	Payment of compensation (or payment or reimbursement of expenses if more than $1,000)?	2d	X	
e	Transfer of any part of its income or assets?	2e		X
	If the answer to any question is "Yes," attach a detailed statement explaining the transactions.			
3	Does the organization make grants for scholarships, fellowships, student loans, etc.?	3		X
4a	Do you have a section 403(b) annuity plan for your employees?	4a		X
b	Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs qualify to receive payments. (See page 2 of the instructions.)			

Part IV Reason for Non-Private Foundation Status (See pages 2 through 4 of the instructions.)

The organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).

6 ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V, page 4.)

7 ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).

8 ☐ A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).

9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). **Enter the hospital's name, city, and state** ▶ ____________________

10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)

11a ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)

11b ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)

12 ☐ 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 charitable, etc., 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). (Also complete the **Support Schedule** in Part IV-A.)

13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: **(1)** lines 5 through 12 above; or **(2)** section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See page 4 of the instructions.)

(a) Name(s) of supported organization(s)	**(b)** Line number from above

14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See page 4 of the instructions.)

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Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) *Use cash method of accounting.*

Note: *You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.*

Calendar year (or fiscal year beginning in) ▶	(a) 1998	(b) 1997	(c) 1996	(d) 1995	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	14600895.	6,428,636.	3,048,432.	1,227,339.	25305302.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable, etc., purpose	609,008.	504,700.			1,113,708.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	129,872.	68,191.	53,244.	17,287.	268,594.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets STMT 14	27,027.	12,967.			39,994.
23 Total of lines 15 through 22	15366802.	7,014,494.	3,101,676.	1,244,626.	26727598.
24 Line 23 minus line 17	14757794.	6,509,794.	3,101,676.	1,244,626.	25613890.
25 Enter 1% of line 23	153,668.	70,145.	31,017.	12,446.	

26 **Organizations described in lines 10 or 11:** a Enter 2% of amount in column (e), line 24 ▶ 26a 512,278.

b Attach a list (which is not open to public inspection) showing the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1995 through 1998 exceeded the amount shown in line 26a. Enter the sum of all these excess amounts ▶ 26b

c Total support for section 509(a)(1) test: Enter line 24, column (e) ▶ 26c 25613890.

d Add: Amounts from column (e) for lines: 18 268,594. 19 ______ 22 39,994. 26b ______ ▶ 26d 308,588.

e Public support (line 26c minus line 26d total) ▶ 26e 25305302.

f **Public support percentage (line 26e (numerator) divided by line 26c (denominator))** ▶ 26f 98.7952 %

27 **Organizations described on line 12: a** For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," attach a list to show the name of, and total amounts received in each year from, each "disqualified person." Enter the sum of such amounts for each year: NOT APPLICABLE

(1998) ______ (1997) ______ (1996) ______ (1995) ______

b For any amount included in line 17 that was received from a nondisqualified person, attach a list to show the name of, and amount received for each year, that was more than the **larger** of **(1)** the amount on line 25 for the year or **(2)** $5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) After computing the difference between the amount received and the larger amount described in **(1)** or **(2)**, enter the sum of these differences (the excess amounts) for each year:

(1998) ______ (1997) ______ (1996) ______ (1995) ______

c Add: Amounts from column (e) for lines: 15 ______ 16 ______ 17 ______ 20 ______ 21 ______ ▶ 27c

d Add: Line 27a total ______ and line 27b total ______ ▶ 27d

e Public support (line 27c total minus line 27d total) ▶ 27e

f Total support for section 509(a)(2) test: Enter amount on line 23, column (e) ▶ 27f

g **Public support percentage (line 27e (numerator) divided by line 27f (denominator))** ▶ 27g %

h **Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))** ▶ 27h %

28 **Unusual Grants:** For an organization described in line 10, 11, or 12 that received any unusual grants during 1995 through 1998, attach a list (which is not open to public inspection) for each year showing the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not include these grants in line 15. (See page 4 of the instructions.)

Part V **Private School Questionnaire** (See page 4 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV) NOT APPLICABLE

			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following:			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to:			
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

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Part VI-A **Lobbying Expenditures by Electing Public Charities** (See page 6 of the instructions.)
(To be completed **ONLY** by an eligible organization that filed Form 5768) NOT APPLICABLE

Check here ▶ **a** ☐ if the organization belongs to an affiliated group.
Check here ▶ **b** ☐ if you checked **"a"** above and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	**36**		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	**37**		
38 Total lobbying expenditures (add lines 36 and 37)	**38**		
39 Other exempt purpose expenditures	**39**		
40 Total exempt purpose expenditures (add lines 38 and 39)	**40**		
41 Lobbying nontaxable amount. Enter the amount from the following table -			
If the amount on line 40 is - / **The lobbying nontaxable amount is -**			
Not over $500,000 ... 20% of the amount on line 40			
Over $500,000 but not over $1,000,000 ... $100,000 plus 15% of the excess over $500,000			
Over $1,000,000 but not over $1,500,000 ... $175,000 plus 10% of the excess over $1,000,000	**41**		
Over $1,500,000 but not over $17,000,000 ... $225,000 plus 5% of the excess over $1,500,000			
Over $17,000,000 ... $1,000,000			
42 Grassroots nontaxable amount (enter 25% of line 41)	**42**		
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	**43**		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	**44**		

Caution: *If there is an amount on either line 43 or line 44, you must file Form 4720.*

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 7 of the instructions.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in) ▶	**(a)** 1999	**(b)** 1998	**(c)** 1997	**(d)** 1996	**(e)** Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B **Lobbying Activity by Nonelecting Public Charities**
(For reporting only by organizations that did not complete Part VI-A) (See page 8 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers		X	
b Paid staff or management (Include compensation in expenses reported on lines **c** through **h**.)		X	
c Media advertisements		X	
d Mailings to members, legislators, or the public		X	
e Publications, or published or broadcast statements		X	
f Grants to other organizations for lobbying purposes		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		X	
i Total lobbying expenditures (add lines **c** through **h**)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

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Part VII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations** (See page 8 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

		Yes	No
a Transfers from the reporting organization to a noncharitable exempt organization of:			
(i) Cash	51a(i)		X
(ii) Other assets	a(ii)		X
b Other transactions:			
(i) Sales or exchanges of assets with a noncharitable exempt organization	b(i)		X
(ii) Purchases of assets from a noncharitable exempt organization	b(ii)		X
(iii) Rental of facilities, equipment, or other assets	b(iii)		X
(iv) Reimbursement arrangements	b(iv)		X
(v) Loans or loan guarantees	b(v)		X
(vi) Performance of services or membership or fundraising solicitations	b(vi)		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	c		X

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

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ▶ ☐ Yes ☒ No

b If "Yes, " complete the following schedule:

(a) Name of organization	(b) Type of organization	(c) Description of relationship

FORM 990, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
GRANTS PAID			
COMPREHENSIVE NEIGHBORHOOD SERVICES	501(C)(3)	SYSTEM REFORM-DEVELOP MORE EFFECTIVE SERVICES	2,488,739.
EDUCARE	501(C)(3)	ENHANCE EARLY CHILDHOOD DEVELOPMENT	247,666.
FOSTER CARE ASSISTANCE / TITLE IV-E	501(C)(3)	PARTIAL REIMBURSEMENT TO ORGANIZATIONS	1,541,324.
WELFARE-TO-WORK / BEFORE & AFTER SCHOOL CARE	501 (C) (3)	SERVING THE UNEMPLOYED AND UNDEREMPLOYED	3,882,020.
		TOTAL CONTRIBUTIONS PAID	8,159,749.

FORM 990, PART II - OTHER EXPENSES

DESCRIPTION	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL
ADMINISTRATIVE FEES	190,386.	190,386.	
CONSULTANTS	670,994.	630,699.	40,295.
PERFORMANCE INCENTIVES	298,043.	297,722.	321.
BUS AND TAXI SERVICE	27,559.	27,559.	
EQUIPMENT	335,381.	332,900.	2,481.
FACILITIES USAGE	41,680.	41,680.	
CHILD CARE	181,341.	181,341.	
INSURANCE	25,681.	24,947.	734.
ADVERTISING	99,010.	97,519.	1,491.
OTHER	66,989.	46,520.	20,469.
AUTO MILEAGE	30,649.	28,093.	2,556.
PARKING	451.	60.	391.
BAD DEBT	1,121,000.	1,121,000.	
TOTALS	3,089,164.	3,020,426.	68,738.

FORM 990, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE
==

GREATER K.C. LINC (LOCAL INVESTMENT COMMISSION) IS A CITIZEN-DRIVEN COMMUNITY COLLABORATIVE INVOLVING EFFORTS BY THE STATE OF MISSOURI TO WORK WITH NEIGHBORHOOD LEADERS, CITIZENS, BUSINESS, CIVIC AND LABOR LEADERS TO IMPROVE THE LIVES OF ITS CHILDREN AND FAMILIES IN KANSAS CITY, MISSOURI, AND JACKSON COUNTY, MISSOURI. IT IS INVOLVED IN A VARIETY OF COMMUNITY EFFORTS AND PARTNERSHIPS. ITS AREAS OF CONCENTRATION INCLUDE: CHILDREN AND FAMILIES, AGING, HEALTH CARE, HOUSING, SCHOOL-LINKED SERVICES, WELFARE REFORM AND BUSINESS DEVELOP-MENT. LINC IS ALSO INVOLVED IN INITIATIVES TO PROVIDE EMPLOYMENT TO THOSE ON WELFARE, CREATE NEW BUSINESS IN THE CENTRAL CITY, IMPROVE THE DELIVERY OF HUMAN SERVICES AND HELP IMPROVE THE LIVES OF FAMILIES AND CHILDREN.

LINC ALSO IS THE COMMUNITY PARTNERSHIP SELECTED BY THE STATE OF MISSOURI TO ADMINISTER THE "CARING COMMUNITIES" FUND CREATED BY SEVEN STATE DEPARTMENTS--SOCIAL SERVICES, MENTAL HEALTH, HEALTH, LABOR, EDUCATION, CORRECTIONS, AND ECONOMIC DEVELOPMENT--TO SUPPORT AND DEVELOP SCHOOL-LINKED, NEIGHBORHOOD-BASED SERVICES. THE FUND WILL BE USED TO SUPPORT SERVICES AT SELECTED SCHOOLS WHERE INTEREST IS SHOWN BY PARENTS, NEIGHBORS AND THE SCHOOL PRINCIPAL. THE EFFORT INVOLVES 60 SCHOOLS IN FIVE SCHOOL DISTRICTS. THE SCHOOL-LINKED SERVICES ARE PART OF A LARGER EFFORT TO DEVELOP COMPREHENSIVE INTEGRATED NEIGHBORHOOD SERVICES THROUGH NEIGHBORHOOD INVOLVEMENT, PROFESSIONAL DEVELOPMENT AND CHANGE MANAGEMENT.

FORM 990, PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

DESCRIPTION	GRANTS AND ALLOCATIONS	EXPENSES
COMPREHENSIVE NEIGHBORHOOD SERVICES - FACILITATES PLANNING AND DEVELOPMENT PROCESS, IN COOPERATION WITH LOCAL SCHOOL DISTRICTS AND THE COMMUNITY, TO DELIVER MULTI-DISCIPLINARY SERVICES THROUGH NEIGHBORHOOD LINKAGES WITH LOCAL SCHOOLS	2,488,739.	3,778,001.
EDUCARE IS DESIGNED TO ENHANCE THE EARLY CHILDHOOD DEVELOPMENT OF CHILDREN BETWEEN THE AGES OF ZERO TO THREE YEARS OLD. THE PROGRAM OFFERS TRAINING, EDUCATIONAL RESOURCES AND HOME VISITS TO FAMILY CARE PROVIDERS LOCATED IN JACKSON, CLAY AND PLATTE COUNTY.	247,666.	359,376.
TITLE IV-E -FEDERAL GOV'T PROVIDES PARTIAL REIMBURSEMENT TO ORGANIZATIONS UNDER TITLE IV-E OF SOCIAL SECURITY ACT. THE STATE OF MISSOURI HAS AN AGREEMENT WITH LINC TO LOCALLY ADMINISTER THE STATE'S TITLE IV-E CLAIMING PROCESS. THIS PROGRAM WAS SUSPENDED, BUT LINC WAS ABLE TO PROVIDE AGENCIES WITH THEIR RESPECTIVE SHARES OF FUNDING THROUGH 12-31-1999.	1,541,324.	2,256,324.
WELFARE-TO-WORK - LINC IS RESPONSIBLE FOR SERVING UNEMPLOYED AND UNDEREMPLOYED ADULTS BY DEVELOPING, PLANNING, CONTRACTING AND MONITORING THE COMMUNITY-BASED WELFARE-TO-WORK SYSTEM. THE SYSTEM FOCUSES ON JOB RETENTION ISSUSES AFFECTING EMPLOYMENT INCLUDING: CHILD CARE, JOB READINESS, PERSONAL SKILLS, EMPLOYER TRAINING & PUBLIC TRANSPORTATION.	388,202.	3,430,777.
TOTAL	4,665,931.	9,824,478.

FORM 990, PART III - OTHER PROGRAM SERVICES

DESCRIPTION	GRANTS AND ALLOCATIONS	EXPENSES
BEFORE AND AFTER SCHOOL PROGRAM - THIS PROGRAM IS DESIGNED TO IMPROVE EDUCATIONAL OUTCOMES AND SOCIETAL BENEFITS. FORTY-SIX SCHOOLS LOCATED IN THE KANSAS CITY MISSOURI SCHOOL DISTRICT WERE PARTICIPATING IN THIS PROGRAM.	3,493,818.	4,946,266.
TOTALS	3,493,818.	4,946,266.

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
LANDON ROWLAND STILWELL FINANCIAL 920 MAIN, 21ST FLOOR KANSAS CITY, MO 64105	CHAIRMAN AS REQ	NONE	NONE	NONE
VELDA COOK JACKSON COUNTY PROSECUTOR'S OFFICE 415 EAST 12TH STREET, 11TH FLOOR KANSAS CITY. MO 64106	COMMISSIONER AS REQ	NONE	NONE	NONE
JOHN (JACK) C. CRAFT CRAFT FRIDKIN SHAFFER & RHYME 4435 MAIN STREET KANSAS CITY, MO 64111	COMMISSIONER AS REQ	NONE	NONE	NONE
SUELLEN FRIED 4003 HOMESTEAD DRIVE SHAWNEE MISSION, KS 66208	COMMISSIONER AS REQ	NONE	NONE	NONE
BERT BERKLEY TENSION ENVELOPE CORP 819 EAST 19TH KANSAS CITY, MO 64108	VICE CHR AS REQ	NONE	NONE	NONE
ROBERT GLASER 5300 NE NORTHGATE CROSSING LEE'S SUMMIT, MO 64064	COMMISSIONER AS REQ	NONE	NONE	NONE
ANITA GORMAN 917 NE VIVION ROAD KANSAS CITY, MO 64118	COMMISSIONER AS REQ	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
BART HAKAN 221 WEST 53RD TERRACE KANSAS CITY, MO 64112	COMMISSIONER AS REQ	NONE	NONE	NONE
ADELE HALL HALL FAMILY FOUNDATION 5801 OAKWOOD ROAD SHAWNEE MISSION, KS 66208	COMMISSIONER AS REQ	NONE	NONE	NONE
JUDY HUNT 6526 RAINBOW SHAWNEE MISSION, KS 66208	COMMISSIONER AS REQ	NONE	NONE	NONE
MARCUS JACKSON KANSAS CITY POWER & LIGHT 1201 WALNUT STREET 2ND FLOOR KANSAS CITY, MO 64106	COMMISSIONER AS REQ	NONE	NONE	NONE
JAN KREAMER GREATER KANSAS CITY COMMUNITY FNDTN 1055 BROADWAY, SUITE 130 KANSAS CITY, MO 64105	COMMISSIONER AS REQ	NONE	NONE	NONE
MARK MCAFEE RITE-WAY MAGIC SUPPLY 13010 2ND STREET GRANDVIEW, MO 64030	COMMISSIONER AS REQ	NONE	NONE	NONE
ESTELLA MORALES CITY OF KC,MO PLANNING & DEVELOPMNT 414 EAST 12TH STREET, 13TH FLOOR	COMMISSIONER AS REQ	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
KANSAS CITY, MO 64106				
RICHARD MORRIS 13431 BALLANTINE OVERLAND PARK, KS 66213	COMMISSIONER AS REQ	NONE	NONE	NONE
JOHN PALMER EDP ENTERPRISES 11827 WEST 112TH STREET, #101 SHAWNEE MISSION, KS 66210	COMMISSIONER AS REQ	NONE	NONE	NONE
MARGIE PELTIER 2914 EAST 55TH STREET KANSAS CITY, MO 64130	COMMISSIONER AS REQ	NONE	NONE	NONE
OSCAR PINSKER 75 LEMANS PRAIRIE VILLAGE, KS 66208	COMMISSIONER AS REQ	NONE	NONE	NONE
SUSAN RAMIREZ C/O HAT 2900 CAMPBELL KANSAS CITY, MO 64109	COMMISSIONER AS REQ	NONE	NONE	NONE
PAUL ROJAS 2200 JEFFERSON KANSAS CITY, MO 64108	COMMISSIONER AS REQ	NONE	NONE	NONE
DAVID ROSS BANK OF AMERICA P.O. BOX 419119 KANSAS CITY, MO 64105	COMMISSIONER AS REQ	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
GENE STANDIFER 1317 EAST 28TH STREET KANSAS CITY, MO 64109-1213	COMMISSIONER AS REQ	NONE	NONE	NONE
HERMAN JOHNSON HERMAN JOHNSON COMPANY 912 BALTIMORE KANSAS CITY, MO 64105	VICE CHR AS REQ	NONE	NONE	NONE
DENISE JORDON THE KANSAS CITY GLOBE 615 EAST 29TH STREET KANSAS CITY, MO 64109	COMMISSIONER AS REQ	NONE	NONE	NONE
ROSEMARY SMITH LOWE SANTA FE NEIGHBORHOOD ASSN 3232 E. 29TH STREET KANSAS CITY, MO 64128	VICE CHR AS REQ	NONE	NONE	NONE
LOUIS SMITH E. M. KAUFFMAN FOUNDATION 4801 ROCKHILL ROAD KANSAS CITY, MO 64110-2046	COMMISSIONER AS REQ	NONE	NONE	NONE
OSCAR TSHIBANDA 620 ROMANY KANSAS CITY, MO 64113	COMMISSIONER AS REQ	NONE	NONE	NONE
KAY BARNES MAYOR 414 E. 12TH STREET 11TH FLOOR	COMMISSIONER AS REQ	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
KANSAS CITY, MO 64106				
BILL DUNN, SR. JE DUNN CONSTRUCTION CO 929 HOLMES KANSAS CITY, MO 64106	COMMISSIONER AS REQ	NONE	NONE	NONE
FRANK SALIZZONI H & R BLOCK 4410 MAIN STREET KANSAS CITY, MO 64111	COMMISSIONER AS REQ	NONE	NONE	NONE
KATHERYN SHIELDS JACKSON COUNTY EXECUTIVE 415 E. 12TH STREET STE 200 KANSAS CITY, MO 64106	COMMISSIONER AS REQ	NONE	NONE	NONE
BARRY WILKINSON 2408 SW WINTERGREEN COURT LEE'S SUMMIT, MO 64081	COMMISSIONER AS REQ	NONE	NONE	NONE
CANDACE CHEATEM 3100 BROADWAY, STE 226 KANSAS CITY, MO 64111	DEPUTY DIRECTOR FULL-TIME	67,974.	6,558.	NONE
BRENT SCHONDELMEYER 3100 BROADWAY, STE 226 KANSAS CITY, MO 64111	DIR OF COMMUNICATION FULL-TIME	63,001.	5,985.	NONE
JOHN SHIVELY 3100 BROADWAY, STE 226 KANSAS CITY, MO 64111	DIRECTOR OF MIS FULL-TIME	54,995.	5,225.	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
STEVEN GEIGER 3100 BROADWAY, SUITE 226 KANSAS CITY, MO 64111	DIR OF OPERATION FULL-TIME	54,995.	NONE	NONE
	GRAND TOTALS	240,965.	17,768.	NONE

SCHEDULE A, PART IV-A - OTHER INCOME

DESCRIPTION	1998	1997	1996	1995	TOTAL
OTHER INCOME	27,027.	12,967.			39,994.
TOTALS	27,027.	12,967.			39,994.

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach this form to your return.

OMB No. 1545-0172
1999
Attachment Sequence No. 67

Name(s) shown on return: GREATER K. C. LINC, INC.
Identifying number: 43-1676730

Business or activity to which this form relates: GENERAL DEPRECIATION

Part I **Election To Expense Certain Tangible Property (Section 179) (Note:** *If you have any "listed property," complete Part V before you complete Part I.*)

1	Maximum dollar limitation. If an enterprise zone business, see page 2 of the instructions	1	
2	Total cost of section 179 property placed in service. See page 2 of the instructions	2	
3	Threshold cost of section 179 property before reduction in limitation	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see page 2 of the instructions	5	

	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
6			
7	Listed property. Enter amount from line 27	7	

8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from 1998. See page 2 of the instructions	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2000. Add lines 9 and 10, less line 12 ▶	13	

Note: *Do not use Part II or Part III below for listed property (automobiles, certain other vehicles, cellular telephones, certain computers, or property used for entertainment, recreation, or amusement). Instead, use Part V for listed property.*

Part II **MACRS Depreciation for Assets Placed in Service ONLY During Your 1999 Tax Year (Do Not Include Listed Property.)**

Section A - General Asset Account Election

14 If you are making the election under section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check this box. See page 3 of the instructions ▶ ☐

Section B - General Depreciation System (GDS) (See page 3 of the instructions.)

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
15a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C - Alternative Depreciation System (ADS) (See page 5 of the instructions.)

(a) Classification of property	(b)	(c)	(d)	(e)	(f)	(g)
16a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part III **Other Depreciation (Do Not Include Listed Property.)** (See page 5 of the instructions.)

17	GDS and ADS deductions for assets placed in service in tax years beginning before 1999	17	
18	Property subject to section 168(f)(1) election	18	
19	ACRS and other depreciation	19	

Part IV **Summary** (See page 6 of the instructions.)

20	Listed property. Enter amount from line 26	20	4,607.
21	**Total.** Add deductions on line 12, lines 15 and 16 in column (g), and lines 17 through 20. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions	21	4,607.
22	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	22	

Part V Listed Property - Automobiles, Certain Other Vehicles, Cellular Telephones, Certain Computers, and Property Used for Entertainment, Recreation, or Amusement

Note: *For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete* **only** *23a, 23b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.*

Section A - Depreciation and Other Information (Caution: *See page 7 of the instructions for limits for passenger automobiles.)*

23a Do you have evidence to support the business/investment use claimed? Yes [ ] No [X] 23b If "Yes," is the evidence written? Yes [ ] No [X]

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
24 Property used more than 50% in a qualified business use (See page 6 of the instructions.): SEE LISTED PROPERTY DETAIL								
		%						
		%						
		%						
25 Property used 50% or less in a qualified business use (See page 6 of the instructions.):								
		%				S/L -		
		%				S/L -		
		%				S/L -		
26 Add amounts in column (h). Enter the total here and on line 20, page 1						26	4,607.	
27 Add amounts in column (i). Enter the total here and on line 7, page 1							27	

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person.
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
28 Total business/investment miles driven during the year (DO NOT include commuting miles - see page 1 of the instructions)												
29 Total commuting miles driven during the year												
30 Total other personal (noncommuting) miles driven												
31 Total miles driven during the year. Add lines 28 through 30												
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
32 Was the vehicle available for personal use during off-duty hours?												
33 Was the vehicle used primarily by a more than 5% owner or related person?												
34 Is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** *more than 5% owners or related persons.*

	Yes	No
35 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
36 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See page 8 of the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
37 Do you treat all use of vehicles by employees as personal use?		
38 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
39 Do you meet the requirements concerning qualified automobile demonstration use? See page 8 of the instructions		

Note: *If your answer to 35, 36, 37, 38, or 39 is "Yes," you need not complete Section B for the covered vehicles.*

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
40 Amortization of costs that begins during your 1999 tax year:					
41 Amortization of costs that began before 1999				41	
42 **Total.** Enter here and on "Other Deductions" or "Other Expenses" line of your return				42	

GREATER K. C. LINC, INC. 1999 43-1676730

Description of Property

GENERAL DEPRECIATION

DEPRECIATION

Asset description	Date placed in service	Unadjusted Cost or basis	Bus. %	179 exp. reduction in basis	ITC reduction in basis	Basis for depreciation	Salvage value %	Accumulated depreciation	Me-thod	Conv.	Life	ACRS class	MA CRS class	Current-year 179 expense	Current-year depreciation
Less: Retired Assets															
Subtotals															
Listed Property															
PLYMOTH VAN VOYAGE	03/24/1998	23,037.	100.000			23,037.		5,759.	SL		5.000				4,607.
Less: Retired Assets															
Subtotals		23,037.				23,037.		5,759.							4,607.
TOTALS		23,037.				23,037.		5,759.							4,607.

AMORTIZATION

Asset description	Date placed in service	Cost or basis	Accumulated amortization	Code	Life	Current-year amortization
TOTALS						

*Assets Retired

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FEDERAL FOOTNOTES

ATTACHMENT TO SCHEDULE A, PART III, 4(B)

GREATER K.C. LINC DISTRIBUTES FEDERAL TITLE IV-E FUNDS TO QUALIFIED 501(C)(3) ORGANIZATIONS THAT APPLY TO BE SUB-RECIPIENTS OF THE FUNDS AND MEET THE CRITERIA OF THE PROGRAM. THE STATE OF MISSOURI HAS AN AGREEMENT WITH LINC TO ADMINISTER THE STATE'S TITLE IV-E CLAIMING PROCESS. THIS PROGRAM WAS SUSPENDED, BUT LINC WAS ABLE TO PROVIDE AGENCIES WITH THEIR RESPECTIVE SHARES OF FUNDING THROUGH 12-31-1999. SEE ALSO FORM 990, PAGE 2, PART III.

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