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Par							
rou See	nust be a corporation (including instructions.) DO NOT file this	g a limited liability company) form unless you can checl	, an unincorporated association, or a trust to k "Yes" on lines 1, 2, 3, or 4.			·	
1	Are you a corporation? If "Yes of filing with the appropriate st be sure they also show state file."	tate agency. Include copies	cles of incorporation showing certification of any amendments to your articles and	✓	Yes		No
2	Are you a limited liability company (LLC)? If "Yes," attach a copy of your articles of organization showing certification of filing with the appropriate state agency. Also, if you adopted an operating agreement, attach a copy. Include copies of any amendments to your articles and be sure they show state filing certification. Refer to the instructions for circumstances when an LLC should not file its own exemption application.					Z	No
3	Are you an unincorporated as constitution, or other similar or include signed and dated copie	ganizing document that is d	a copy of your articles of association, ated and includes at least two signatures.		Yes	7	No
	and dated copies of any amen	dments.	of your trust agreement. Include signed		Yes		No
5	-	"Yes," attach a current copy	without anything of value placed in trust. showing date of adoption. If "No," explain	7	Yes		No
Pa		in Your Organizing Do	cument				
to m	eet the organizational test under se not meet the organizational test. I nal and amended organizing docur	ection 501(c)(3). Unless you can DO NOT file this application unents (showing state filing certi-	a application, your organizing document contains in check the boxes in both lines 1 and 2, your or antil you have amended your organizing docu ification if you are a corporation or an LLC) with	ganız ment your	ing doo . Subm applica	ument sit your ation.	
1	Section 501(c)(3) requires that your organizing document state your exempt purpose(s), such as charitable, religious, educational, and/or scientific purposes. Check the box to confirm that your organizing document meets this requirement. Describe specifically where your organizing document meets this requirement, such as a reference to a particular article or section in your organizing document. Refer to the instructions for exempt purpose language. Location of Purpose Clause (Page, Article, and Paragraph):						
	Section 501(c)(3) requires that upon dissolution of your organization, your remaining assets must be used exclusively for exempt purposes, such as charitable, religious, educational, and/or scientific purposes. Check the box on line 2a to confirm that your organizing document meets this requirement by express provision for the distribution of assets upon dissolution. If you rely on state law for your dissolution provision, do not check the box on line 2a and go to line 2c.						
	b If you checked the box on line 2a, specify the location of your dissolution clause (Page, Article, and Paragraph). Do not complete line 2c if you checked box 2a. ** ** ** ** ** ** ** ** ** ** ** ** **						71
	2c See the instructions for information about the operation of state law in your particular state. Check this box if you rely on operation of state law for your dissolution provision and indicate the state: Missouri						
		on of Your Activities					
this app	Information in response to other pulication for supporting details. You talk to this parrative. Remember that	arts of this application, you ma may also attach representative at if this application is approved	ties in a narrative. If you believe that you have a by summarize that information here and refer to the ecopies of newsletters, brochures, or similar door d, it will be open for public inspection. Therefore the instructions for information that must be included.	he sp cume , you	nts for nts for r narrat	oarts o suppoi ive	t the ting
Pa	Compensation and	Other Financial Arrange dependent Contractors	ements With Your Officers, Directors,	Tru	stees	,	
1:	List the names, titles, and maili total annual compensation, or other position. Use actual floure	ng addresses of all of your of proposed compensation, for ses, if available. Enter "none" if	ficers, directors, and trustees. For each person all services to the organization, whether as an ino compensation is or will be paid. If addition tion on what to include as compensation.	office	er, emp	loyee,	or d,
Name		Title	Mailing address	Compensation amount (annual actual or estimate			
Isaac M. Wilder		Director	1235 W.70th Terrace Kansas City, MO. 64113	nor		none	
			,				