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NINED APR 0 7 2010

Form 990-PF

Department of the Treasury Internal Revenue Service

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

2009

Fδ	cal	endar year 2009, or tax year beginning	, 20	009, and e	nding		, 20
G	Chec		return of a forme	·	-	Final retu	ırn
			ddress change	Nar	ne cha		
Us		e IRS Name of foundation				oyer identification nu	mber
^	labe					343474	
U	u lei v prii	Adminer and street (or 1 or box number in main is not delivered	d to street address)	Room/suite		hone number (see page	10 of the instructions)
	or ty	pe. P.O. BOX /12			515-	345-2788	<u>_</u>
Se	e Sp	ecific City or town, state, and ZIP code			C If exe	mption application is pend	ıng, check here 🕨 🔲
		tions. DES MOINES IA 50306-0712			D 1. Fo	reign organizations, che	eck here ▶ 🗌
H (k type of organization X Section 501(c)(3) exemp			2. For	reign organizations mee eck here and attach coi	ting the 85% test,
Ш	Sect	ion 4947(a)(1) nonexempt charitable trust		oundation	I	vate foundation status	
		narket value of all assets at end J Accounting meth		Accrual	under	section 507(b)(1)(A), o	theck here . ▶
0	yea	r (from Part II, col. (c), ☐ Other (specif 6) ► \$ 7.459.279 (Part I, column (d) m	ý) _{, ,} , , , , , , , , , , , , , , , , ,		F If the	foundation is in a 60-m	onth termination
			ust de on cash dasis	s <i>)</i>	under	section 507(b)(1)(B), o	
Pa	irt l	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and	(b) Net inve	estment	(c) Adjusted net	(d) Disbursements for charitable
		the amounts in column (a) (see page 11 of the instructions)	expenses per books	incom	ne	ıncome	purposes (cash basis only)
			169 001	, ,			(Casil basis Olly)
	1	Contributions, gifts, grants, etc., received (attach schedule)	168,001	"	· <u>\$</u> .		
	2	Check ► ☐ If the foundation is not required to attach Sch. B	14,749	1	4,749	14,749	
	3	Interest on savings and temporary cash investments	80,542		0,542	80,542	
	4	Dividends and interest from securities	60,542	- 0	0,542	00,542	
	1	Gross rents	· · · · · · · · · · · · · · · · · · ·				
m		Net rental income or (loss)	158,223	-			
Revenue		Net gain or (loss) from sale of assets not on line 10 Gross sales pince for all assets on line 6a 163,158	150,225				
ē	_			15	8,223	<u>-</u>	
Se .	7	Capital gain net income (from Part IV, line 2)	V-1	<u> </u>	0,223	158,223	
_	8	Net short-term capital gain		22001	.	130,223	
	9	Income modifications	The second of the second	233414.3	·		
		Gross sales less returns and allowances	AF	*			
	l .	Less: Cost of goods sold	0				
	11	Gross profit or (loss) (attach schedule) Other income (attach schedule)					
	12	Total. Add lines 1 through 11	421,515	25	3,514	253,514	
	13	Componentian of officers directors trustees etc	2,250		2,250	2,250	
Expenses	14	Other employee salaries and wages TIPED					
eu	15	Pension plans, employee benefits EIVED					
×							
_	b	Accounting fees (attack) schedule) 0 5 2010. Of Other professional fees (attack) schedule)					
≗	C	Accounting fees (attack schedule)					
Į.	17						
isi	18	Taxes (attach schedule) (see page 4 of the instructions)	4,500				
Ξ	19	Depreciation (attach schedule) and depletion					
ᅙ	20	Occupancy					
9	21	Travel, conferences, and meetings					
a	22	Printing and publications	(00		600	600	
Operating and Administrative	23	Other expenses (attach schedule)	600		600	000	
atiı	24	Total operating and administrative expenses.	7,350		2,850	2,850	0
ě		Add lines 13 through 23	951,506		2,030	2,630	951,506
Q	25	Contributions, gifts, grants paid	951,300	<u> </u>	2,850	2,850	951,506
_	26	Total expenses and disbursements. Add lines 24 and 25	938,830	F	2,000	2,030	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	27	Subtract line 26 from line 12:	(537,341)				
		Excess of revenue over expenses and disbursements	(337,371		0,664		
		Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)	A 3	2.5	5,55 r	250,664	
	·	rajasta net modine (n negative, enter -o-)	L	L			

Da	rt II	Attached schedules and amounts in the description column	Beginning of year	End	of year
Ρa	rt III	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	1
	1	Cash—non-interest-bearing	8,004,730	1,157,630	1,157,636
٠	2	Savings and temporary cash investments			
	3	Accounts receivable ▶	Ny 773		
		Less. allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable		 	<u></u>
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 15 of the instructions)			
	7	Other notes and loans receivable (attach schedule)			
ets		Less allowance for doubtful accounts ▶			
Assets		Inventories for sale or use			
٠,		Prepaid expenses and deferred charges			
		Investments—U.S and state government obligations (attach schedule)			
		Investments—corporate stock (attach schedule)			
		Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis			
	40	Less. accumulated depreciation (attach schedule)			
ı		Investments—mortgage loans		6,146,687	6,301,643
		Land, buildings, and equipment. basis			1 3,5 5 1,5 1
		Less accumulated depreciation (attach schedule)			1
	15	Other assets (describe ▶)	0		
		Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item I)	8,004,730	7,304,323	7,459,279
		Accounts payable and accrued expenses			
- 1	18 19	Grants payable			
:≘∣		Deferred revenue			
Liabilities		Loans from officers, directors, trustees, and other disqualified persons			
[말.		Mortgages and other notes payable (attach schedule)			_
	22	Other liabilities (describe ►)			
_		Total liabilities (add lines 17 through 22)	0	(4
es		Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.	0.004.500	7.204.20	
일	24	Unrestricted	8,004,730	7,304,323	2
ब	25	Temporarily restricted	-		-{-
<u> </u>		Permanently restricted			4
Fund Balances		Foundations that do not follow SFAS 117, check here ▶ ☐ and complete lines 27 through 31.			
ō		Capital stock, trust principal, or current funds			┪
ध्र		Paid-in or capital surplus, or land, bldg., and equipment fund			-
	30	Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see page 17 of the	0.004.730	7.204.222	
ఠ		instructions)	8,004,730	7,304,323	ή
		Total liabilities and net assets/fund balances (see page 17 of the instructions)	8,004,730	7,304,323	
	rt III	Analysis of Changes in Net Assets or Fund Balanc			
		net assets or fund balances at beginning of year-Part II, column			8,004,730
		, , , , , , , , , , , , , , , , , , , ,		1 -	(537,341)
		amount from Part I, line 27a		1 2	(337,371)
		, , ,	•••••		7,467,389
4 /	Add I	ines 1, 2, and 3	donated assets of	er tax basis 5	163,066
ა I	Decire Total	net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b)), line 30 6	7,304,323

b 71,478 c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) FMV as of 12/31/69 (ii) FMV as of 12/31/69 (ii) FMV as of 12/31/69 (iii) FMV as of 12/31/69 (iii) FMV as of 12/31/69 (iii) FMV as of 12/31/69 (iv) Excess of col (i) col (h) gain minus col (k), but not less than -0-) (col (h), if any) 2 Capital gain net income or (net capital loss) (if gain, also enter in Part I, line 7 ff (loss), enter -0- in Part I, line 7 ff (loss), enter -0- in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). (if (loss), enter -0- in Part I, line 8 column (c) (see pages 13 and 17 of the instructions). (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? 1 Enter the appropriate amount in each column for each year; see page 18 of the instructions before making any entries. (a) (b) (c) (b) (c) (c) (c) (c) (d) (d) (d) (d	
b 10,555 shares of Prestige Brand Holdings Inc c d d e (e) Gross sales proce (f) Deprecation allowed (or allowable) (or allowable) (or allowable) (g) Cost or other basis (h) Gain or (loss) (e) plus (f) minus (g) a 91,680 b 71,478 2,322 c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) FMV as of 12/31/69 (ii) FMV as of 12/31/69 (iii) Adjusted basis (iv) Excess of col (i) over col (i), if any) 2 Capital gain net income or (net capital loss) (if gain, also enter in Part I, line 7 if (loss), enter -0- in Part I, line 7 if (loss), enter -0- in Part I, line 7 if (loss), enter -0- in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? State (los) (color los) (color (los) (d) (color (los) (col	
c d e (e) Gross sales proce (f) Depreciation allowed (g) Cost or other basis plus expense of sale (h) Carn or (loss) (e) plus (f) minus (g) a 91,680 2,613 b 71,478 2,322 c d 2,322 c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (l) Carn or (loss) (h) plus (h) minus (g) a Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (li) Gains (Col (h) gain minus (g) a Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (li) Gains (Col (h) gain minus (g) a Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (li) Gains (Col (h) gain minus (g) a Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (li) Gains (Col (h) gain minus (g) a Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (li) Gains (Col (h) gain minus (g) a Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (li) Gains (Col (h) gain minus (g) a Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (li) Gains (Col (h) gain minus (g) a Complete only for assets showing gain in column for operiod (li) and column for local (li) owner ool (li) divided for (li) divided lip column for operiod (li) figure in for foundation does not qualify under section 4940(a) (a) tax on net investment income.) b Complete this part. 4 Enter the appropriate amount in each column for each year; see page 18 of the instructions before making any entries (li) and the section 4940(a) (li) divided lip column for local (li) divided lip column for local (li) divided lip column for local (li) divided lip column for lip column	009
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(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) plus (f) minus (g) a 91,680 b 71,478 2,322 c d 2,322 c d d 2,322 c d d 2,322 c d d d d d d d d d d d d d d d d d d	
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b 71,478 c d d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) FMV as of 12/31/69 (ii) FMV as of 12/31/69 (iii) Gains (Col. (h) gain minure col. (k), but not less than -0-1 (col. (h), dainy) 2 Capital gain net income or (net capital loss) (if gain, also enter in Part I, line 7 (f (loss), enter -0- in Part I, line 7 (loss), enter -0- in Part I, line 8 (column (c) (see pages 13 and 17 of the instructions).) (if (loss), enter -0- in Part I, line 8 (column (c) (see pages 13 and 17 of the instructions).) 2 Tart V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part. 1 Enter the appropriate amount in each column for each year; see page 18 of the instructions before making any entries. (a) Calendar year for tax year beginning in) Adjusted qualifying distributions (b) Adjusted qualifying distributions (c) (c) Net value of noncharitable-use assets (d) Distribution ratio (col. (b) divided by col. (col. (col. (b) divided by col. (col. (col. (b) divided by col. (col. (col. (b) divided by col. (col. (col. (col. (b) divided by col. (col. (col. (col. (col. (col. (col. (b) divided by col. (col. (col. (col. (col. (col. (co	
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b c d d e	
b c d d e	
d e 2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 ff (loss), enter -0- in Part I, line 7 ff (loss), enter -0- in Part I, line 7 ff (loss), enter -0- in Part I, line 7 ff (loss), enter -0- in Part I, line 8 ff gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8 ff (loss), enter -0- in Part I, line 8 ff (loss), enter -0- in Part I, line 8 ff (loss), enter -0- in Part I, line 8 ff (loss), enter -0- in Part I, line 8 ff (loss), enter -0- in Part I, line 8 ff (loss), enter -0- in Part I, line 8 ff (loss), enter -0- in Part I, line 8 ff (loss), enter -0- in Part I, line 8 ff (loss), enter -0- in Part I, line 7 ff (loss), enter -0- in Part I, line 7 ff (loss), enter -0- in Part I, line 7 ff (loss), enter -0- in Part I, line 7 ff (loss), enter -0- in Part I, line 7 ff (loss), enter -0- in Part I, line 7 ff (loss), enter -0- in Part I, line 7 ff (loss), enter -0- in Part I, line 7 ff (loss), enter -0- in Part I, line 7 ff (loss), enter -0- in Part I, line 7 ff (loss), enter -0- in Part I, line 7 ff (loss), enter -0- in Part I, line 7 ff (loss), enter -0- in Part I, line 7 ff (loss), enter -0- in Part I, line 7 ff (loss), enter -0- in Part I, line 7 ff (loss), enter -0- in Part I, line 7 ff (loss), enter -0- in Part I, line 7 ff (loss), enter -0- in Part I, line 7 ff (loss), enter -0- in Part I, line 7 ff (loss), enter -0- in Part I, line 8 ff (loss), enter -0- in Part I, line 8 ff (loss), enter -0- in Part I, line 8 ff (loss), enter -0- in Part I, line 8 ff (loss), enter -0- in Part I, line 8 ff (loss), enter -0- in Part I, line 8 ff (loss), enter -0- in Part I, line 8 ff (loss), enter -0- in Part I, line 8 ff (loss), enter -0- in Part I, line 8 ff (loss), enter -0- in Part I, line 8 ff (loss), enter -0- in Part I, line 8 ff (loss), enter -0- in Part I, line 8 ff (loss), enter -0- in Part I, line 8 ff (loss), en	
2 Capital gain net income or (net capital loss)	
2 Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7 ft (loss), enter -0- in Part I, line 7 ft (loss), enter -0- in Part I, line 7 ft (loss), enter -0- in Part I, line 7 ft (loss), enter -0- in Part I, line 8 ft (loss), enter -0- in Part I, line 8 ft (loss), enter -0- in Part I, line 8 ft (loss), enter -0- in Part I, line 8 ft (loss), enter -0- in Part I, line 8 ft (loss), enter -0- in Part I, line 8 ft (loss), enter -0- in Part I, line 8 ft (loss), enter -0- in Part I, line 8 ft (loss), enter -0- in Part I, line 8 ft (loss), enter -0- in Part I, line 8 ft (loss), enter -0- in Part I, line 8 ft (loss), enter -0- in Part I, line 8 ft (loss), enter -0- in Part I, line 8 ft (loss), enter -0- in Part I, line 7 ft (loss), enter -0- in Part I, line 8 ft (loss), enter	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8	
If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8	58,223
Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part. 1 Enter the appropriate amount in each column for each year; see page 18 of the instructions before making any entries. Adjusted qualifying distributions Net value of noncharitable-use assets Distribution ratio (col (b) divided by col (col (col (b) divided by col (col (col (b) divided by col (col (col (col (col (b) divided by col (col (col (col (col (col (col (col	
(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part. 1 Enter the appropriate amount in each column for each year; see page 18 of the instructions before making any entries. (a) Base penod years Calendar year (or tax year beginning in) Adjusted qualifying distributions Adjusted qualifying distributions Net value of noncharitable-use assets (col (b) divided by col (col (b)	
If section 4940(d)(2) applies, leave this part blank. Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part. 1 Enter the appropriate amount in each column for each year; see page 18 of the instructions before making any entries. (a) (b) (c) (c) (c) (c) (d) (col) (b) divided by col) (col) (col) (col) (b) divided by col) (col) (co	
1 Enter the appropriate amount in each column for each year; see page 18 of the instructions before making any entries. (a) (b) (b) (c) (c) (c) (c) (d) (d) (d) (D) (col (b) divided by col (col (b)	⊠ No
(a) Base penod years Calendar year (or tax year beginning in) Adjusted qualifying distributions 899,126 899,126 8,001,783 2007 966,782 8,468,213 2006 897,190 4,825,530 2005 1,001,029 1,979,862	
Base penod years Adjusted qualifying distributions Net value of noncharitable-use assets Distribution ratio (col (b) divided by col (col (b) d	·
2007 966,782 8,468,213 2006 897,190 4,825,530 2005 1,001,029 1,979,862	
2006 897,190 4,825,530 0 2005 1,001,029 1,979,862 0	0.1124
2005 1,001,029 1,979,862	0.1142
2003	0.1859
2004 760,244 1,971,302	0.5056
I I	0.3857
2 Total of line 1, column (d)	1.3038
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the	.2608
number of years the foundation has been in existence if less than 5 years	
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	89,858
5 Multiply line 4 by line 3	27,275
6 Enter 1% of net investment income (1% of Part I, line 27b)	2,507
	29,782
7 Add lines 5 and 6	51,506
8 Enter qualifying distributions from Part XII, line 4	

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of	the in	struc	tions)			
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter			5,013			
, p	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1% of Part I, line 27b						
С	c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b)						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)						
3	Add lines 1 and 2		5	,013			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) . 4			- 010			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			,013			
6	Credits/Payments 2008 overpayment credited to 2009 6a 10,250						
	2009 estimated tax payments and 2000 overpayment credited to 2009			ŀ			
	Exempt foreign organizations—tax withheld at source 6b						
	Tax paid with application for extension of time to file (Form 8868) Backup withholding erropeously withhold						
_	backup withholding choncodary withhold		10	,250			
7	Total deutis and payments. Add lines of through od			<u>,250</u>			
8 9	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . 10		5	,237			
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax ► 5,237 Refunded ► 11			0			
Par	t VII-A Statements Regarding Activities						
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes				
	participate or intervene in any political campaign?	1a		X			
b	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)?						
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.						
	Did the foundation file Form 1120-POL for this year?	1c		X			
d	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$						
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2		X			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X			
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		X			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or						
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		v	لـــــا			
	conflict with the state law remain in the governing instrument?	6	X				
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7					
	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) ► Iowa						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G? If "No," attach explanation</i>	8b	X				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)	į į		<u> </u>			
	or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page 27)? If "Yes," complete Part XIV	9		<u>X</u>			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X			

Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			3.5
	August 17, 2008?	12	37	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address 515.345	220	·	
14	The books are in care of ▶ Ron Herman Telephone no. ▶ 515-345	-2/80	3	
	The books are in care of ▶ Ron Herman Located at ▶ 717 Mulberry Street Telephone no. ▶ 515-345 ZIP+4 ▶ 50309-3	5/2		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here			▶ ⊔
Par	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15 t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
rai			Yes	No
.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	 	163	
та	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . LJ Yes X No (5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" If			
	the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
þ	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations	1b	N/a	\
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?		- " -	
_	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2009?			
	If "Yes," list the years ▶ 20, 20, 20			.
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	2b	N/a	\
_	to all years listed, answer "No" and attach statement—see page 20 of the instructions)			
	▶ 20 , 20 , 20 , 20			Ì
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or			1
_	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse			
	of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	3b		
	foundation had excess business holdings in 2009.)	4a	-+	X
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	70		
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b		$\overline{\mathbf{X}}$
	chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009;	70		 -

P	aa	e	Е

Pa	art VII-B Statements Regarding Activities	s for V	Which Forn	n 4720	May Be	Requi	red (cor	tinued))		
5a	During the year did the foundation pay or incur	any an	nount to:								
	(1) Carry on propaganda, or otherwise attempt to	o influe	nce legislatio	n (secti	ion 4945(e))? .	☐ Yes	🛚 No			
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?											
	(3) Provide a grant to an individual for travel, st	udy, or									
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions)											
(5) Provide for any purpose other than religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? . Yes No											
b	If any answer is "Yes" to 5a(1)-(5), did any of the	transa	ctions fail to	qualify i	under the e	xception	ns describ	oed in	-	N T/	
	Regulations section 53 4945 or in a current notice	-	•						5b	N/A	<u> </u>
	Organizations relying on a current notice regard	-						▶□		ĺ	
С	If the answer is "Yes" to question 5a(4), does the because it maintained expenditure responsibility	for the	grant?				☐ Yes	□ No			
_	If "Yes," attach the statement required by Regul			-	-						
	Did the foundation, during the year, receive any to on a personal benefit contract?						☐ Yes	🛚 No	6b		X
	Did the foundation, during the year, pay premiums If "Yes" to 6b, file Form 8870.								00		$\frac{\Lambda}{}$
	At any time during the tax year, was the foundation a If yes, did the foundation receive any proceeds or								7b	N/A	
	irt VIII Information About Officers, Dire										
	and Contractors		-								
1	List all officers, directors, trustees, foundation										
(a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (If not paid, enter employee benefit plans and deferred compensation other allowed to position (d) Contributions to employee benefit plans and deferred compensation											
Ple	ease see attached listing										
			<u> </u>							_	
						:					
2	Compensation of five highest-paid employee If none, enter "NONE."	s (oth	er than thos	e inclu	ded on lin	e 1—s	ee page	23 of th	ne insti	ructio	ns).
	(a) Name and address of each employee paid more than \$50	,000	(b) Title, and a hours per v devoted to po	veek	(c) Comper	nsation	(d) Contrib employee plans and compen	benefit deferred	(e) Exper	nse acc	
NC	ONE					_		_			
			-	_							
					-						
				·							
T - ^	al number of other emplayees and over \$50.00	<u> </u>	L		L		<u></u>			-T	
Ot	al number of other employees paid over \$50,000	. _	<u> </u>		· · · ·	<u> </u>	<u>· · ·</u>	F	orm 990)-PF	 (2009)

Form 990	-PF (2009)		Page 7
Part \	Information About Officers, Directors, Trustees, Fo and Contractors (continued)	undation Managers, Highly Pa	id Employees,
3 Fiv	e highest-paid independent contractors for professional services (s	ee page 23 of the instructions). If n	one, enter "NONE.
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONI			
		-	
		-	
Total n	umber of others receiving over \$50,000 for professional services .	<u> </u>	<u> ▶</u>
Part I	X-A Summary of Direct Charitable Activities		
	foundation's four largest direct chantable activities during the tax year. Include relevanizations and other beneficianes served, conferences convened, research papers produ		Expenses
1 NO	NE		
2			
3			-
·			
4			
Dort I	V.B. Summany of Brogram Bolated Investments (see page	o 22 of the instructions)	1
	X-B Summary of Program-Related Investments (see page the two largest program-related investments made by the foundation during the tax y		Amount
1			
•			
2			
All othe	r program-related investments See page 24 of the instructions		
3			

Total. Add lines 1 through 3

0

Par	Minimum Investment Return (All domestic foundations must complete this part. see page 24 of the instructions.)	Foreign	foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
•	purposes:	1a	2,561,120
a b	Average monthly fair market value of securities	1b	4,941,274
C	Average of monthly cash balances	1c	<u> </u>
d	Total (add lines 1a, b, and c)	1d	7,502,394
e	Reduction claimed for blockage or other factors reported on lines 1a and , ,		
-	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	7,502,394
4	Cash deemed held for charitable activities. Enter 1½% of line 3 (for greater amount, see page 25		
7	of the instructions)	4	112,536
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	7,389,858
6	Minimum investment return. Enter 5% of line 5	6	369,493
Par	t XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) part foundations and certain foreign organizations check here ▶ ☐ and do not complete this part		perating
1	Minimum investment return from Part X, line 6	1	369,493
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009. (This does not include the tax from Part VI.)	1	
C	Add lines 2a and 2b	2c	5,013
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	364,480
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	364,480
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	364,480
Par	t XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		051 506
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	951,506
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	_3a	
b	Cash distribution test (attach the required schedule)	3b	051 506
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	951,506
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	051.506
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	951,506
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years	whethe	er the foundation

Pai	rt XIII Undistributed Income (see pag	e 26 of the instruction	ons)		
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years pnor to 2008	(c) 2008	(d) 2009
	line 7			··· · · · · · · · · · · · · · · · · ·	364,480
2	Undistributed income, if any, as of the end of 200	A STATE A	· · · · · · · · · · · · · · · · · · ·	-	
a	Enter amount for 2008 only		132	389,887	
b	Total for prior years 20 07 ,20		0	, :	·
3	Excess distributions carryover, if any, to 2009		, ,		<u> </u>
	From 2004	89			
a	From 2005				
D	777 (36			
C	550.0	57			
a	500.2				
e	110/11 2000	3,438,540			
. T	Total of lines 3a through e		<u> </u>		· · · · · · · · · · · · · · · · · ·
4	Qualifying distributions for 2009 from Part XI	II,			
	line 4. ▶ \$ 951,506	*		389,887	
а	Applied to 2008, but not more than line 2a	A CONTRACT OF STATE		505,007	
b	Applied to undistributed income of prior years (Election required—see page 26 of the instructions)	n de la			
C	Treated as distributions out of corpus (Electio	n	ļ		
	required—see page 26 of the instructions) .	0.574			264 490
d	• • • • • • • • • • • • • • • • • • • •	107 120			364,480
е	Remaining amount distributed out of corpus	197,139			
5	Excess distributions carryover applied to 2009		-,	_	
	(If an amount appears in column (d), the sar amount must be shown in column (a).)	ne 🖟 🗀 .			
6	Enter the net total of each column a indicated below:	£ .			
а	Corpus Add lines 3f, 4c, and 4e. Subtract line	₅ 3,635,679			
b			0		
С	Enter the amount of prior years' undistribute income for which a notice of deficiency has bee issued, or on which the section 4942(a) tax has	n 🗟 🗝			
d	been previously assessed	le .			
	amount—see page 27 of the instructions		0		
е	Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount—see page				
	27 of the instructions	, c 1'*		0	
ε	Undistributed income for 2009. Subtract line	e 11			
ľ	4d and 5 from line 1. This amount must b				
	distributed in 2010	e 🚬			0
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of thinstructions)				
8	Excess distributions carryover from 2004 no	ot			
•	applied on line 5 or line 7 (see page 27 of the instructions)				
9	Excess distributions carryover to 201 Subtract lines 7 and 8 from line 6a	o . 2,958,790			
10	Analysis of line 9				
а	Excess from 2005 915,72			İ	, 1
b	Excess from 2006			}	
C	Excess from 2007 559,05		-	İ	
	Excess from 2008				
e	Excess from 2009 197,13	39		Ì	

Par	t XIV Private Operating Foun	dations (see pa	ge 27 of the inst	ructions and Pai	t VII-A, question	າ 9)		
1a	1a If the foundation has received a ruling or determination letter that it is a private operating							
foundation, and the ruling is effective for 2009, enter the date of the ruling \dots \blacktriangleright N/A b Check box to indicate whether the foundation is a private operating foundation described in section $4942(j)(3)$ or \square								
	Enter the lesser of the adjusted net	Tax year	operating foundation	Prior 3 years	on <u> </u>	3) or <u>4942(j)(5)</u>		
	income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total		
	investment return from Part X for each year listed	(4) 2000	(5) 2000	(0) 2007	(4) 2000	0		
ь	85% of line 2a	0	0	0	0	0		
С	Qualifying distributions from Part XII,							
	line 4 for each year listed					0		
d	Amounts included in line 2c not used directly for active conduct of exempt activities					0		
ө	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	0	0	0	0	0		
3	Complete 3a, b, or c for the alternative test relied upon							
а	"Assets" alternative test—enter					0		
	(1) Value of all assets					0		
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0		
b	"Endowment" alternative test-enter 3/3 of							
	minimum investment return shown in Part X, line 6 for each year listed					0		
С	"Support" alternative test—enter							
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section					0		
	512(a)(5)), or royalties)							
	(2) Support from general public and 5 or more exempt							
	organizations as provided in section 4942(j)(3)(B)(iii)					0		
	(3) Largest amount of support from an exempt organization					0		
	(4) Gross investment income					0		
Par	t XV Supplementary Informat	ion (Complete t	this part only if	the foundation	had \$5,000 or	more in assets		
	at any time during the y							
1 a	Information Regarding Foundation List any managers of the foundation before the close of any tax year (bu	who have contribu	ted more than 2% contributed more	of the total contribethan \$5,000). (Se	utions received by e section 507(d)(2	the foundation 2).)		
Non	<u>ie</u>							
	List any managers of the foundation ownership of a partnership or other	who own 10% or entity) of which th	more of the stock e foundation has a	of a corporation (a 10% or greater i	or an equally larg nterest	e portion of the		
Non	_	0 1 0 5 1	0.1.1					
2	Information Regarding Contribution			=		lana ant cocont		
	Check here ▶ ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.							
а	The name, address, and telephone	number of the per	son to whom appl	ications should be	addressed.			
Bob	Morlan PO Box 712 I	Des Moines, IA	50309-3872	515-345-7	601			
b	The form in which applications shou	ld be submitted a	nd information and	I materials they sh	ould include:			
The	following information should	be provided: 1.	intended use o	f funds 2. verifi	ication of IRS	501(c)(3)status		
Non								
	Any restrictions or limitations on av factors:	-		as, charitable field	ds, kinds of institu	utions, or other		
Gen	erally only Iowa based charital	ole organization	ns are funded.					

Part XV Supplementary Information 3 Grants and Contributions Paid Du	(continued) Iring the Year or Appro	ved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation		Amount
Name and address (home or busine	any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	-			
See attached schedule				
				951,506
Total		· · · ·		951,506
b Approved for future payment				
None				
				0

Enter	gross amounts unless otherwise indicated.	Unrelated busi	ness income	Excluded by section	n 512, 513, or 514	(e)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of
	ogram service revenue		· — —			the instructions)
a b			·			
c		 				
d						
е				·		
f						
g	Fees and contracts from government agencies					
2 Me	embership dues and assessments					
3 Inte	erest on savings and temporary cash investments	<u> </u>				14,749
	vidends and interest from securities		wai			80,542
	t rental income or (loss) from real estate:		gradus assures .			
	Debt-financed property					
	Not debt-financed property					·
	t rental income or (loss) from personal property					-
	ner investment income	 				· <u></u>
	n or (loss) from sales of assets other than inventory t income or (loss) from special events					
	oss profit or (loss) from sales of inventory					•
	ner revenue. a					
b						
C						-
đ					- · · · · ·	
е		7 - 4 C - 4 C				05.001
2 Sul	btotal. Add columns (b), (d), and (e)	高 级为2000	0		0	95,291
	tal. Add line 12, columns (b), (d), and (e)				13	95,291
	vorksheet in line 13 instructions on page 28 to XVI-B Relationship of Activities to the			nt Burnaga		
Line	No. Explain below how each activity for wh	ich income is rep	orted in colum	n (e) of Part XV	I-A contributed	importantly to
▼	the accomplishment of the foundation' page 28 of the instructions)	s exempt purpose	s (other than	by providing fur	nds for such pu	rposes) (See
3 & 4		as a tool in sa	reguarding	tne assets nee	eded to carry	out the
	purpose of the Foundation.			· ········	····	
	1					
						
						

Pa	rt XV		n Regarding rganizations	Transfers To and	Trans	actions	and Re	elationshi	ps With	Non	char	itable
1	in se orga	ection 501(c) of thinizations?	ne Code (other that	y engage in any of the n section 501(c)(3) org	ganizatio	ns) or in s	ection 52				Yes	No
é	Tran (1) (_	n to a noncharitable ex		_				1a(1)		X
	(2)	Other assets .								1a(2)	. – .	X
ŧ		er transactions:								45/43		\mathbf{X}
				exempt organization						1b(1) 1b(2)		$\frac{\Lambda}{X}$
				aritable exempt organi						1b(2)		$\frac{X}{X}$
	٠,,			ther assets						1b(4)		X
		oans or loan gu	-							1b(5)		X
		_		rship or fundraising so						1b(6)		X
(• •			lists, other assets, or						1c		X
	value value	e of the goods, o	ther assets, or sen on or sharing arrar	es," complete the follo vices given by the rep- ngement, show in colu- ichantable exempt organizat	orting for mn (d) th	undation. ne value o	If the four f the good	dation rece	eived less sets, or se	than fa	recei	rket ved.
(a) L	ille lio	(b) Amount involved	(c) Name or non	criantable exempt organizat	1011	(u) Descrip	don or dans	ers, transacti	ons, and sna	ing and	ingerne	
			<u> </u>									
										-		
		-										
			—									
	+											
	-							<u> </u>				
							_					
	desc	ribed in section	ectly or indirectly a 501(c) of the Code following schedul	affiliated with, or relat e (other than section 5 le.	ed to, o 501(c)(3)	ne or moi) or in se	re tax-exection 527	empt organ ?	izations	☐ Ye	s 🗆	No
		(a) Name of or	ganızatıon	(b) Type of org	anization			(c) Descript	on of relation	ship		
												
_	11-4		I dealers that I have a	amined this return, including		nung sched	ules and sta	tements and	to the hest of	my kno	wledge	e and
	belief,	it is true, correct, and	complete Declaration	of preparer (other than taxp	ayer or fidu	3/31/20	sed on all int	formation of w	nicri preparei	has any	knowl	edge
ē	Sign	nature of officer or tru	stee			Date	<u> </u>	Title		-		
Sign Here	Preparer's Use Only				Date		Check if self-emple	oyed ▶ 🗌	Preparer's number (s page 30 c	ee Sig	natur	e on ions)
U)	Pai epai se C	Preparer's signature			<u> </u>							
	۾ ڇ	Firm's name (or you self-employed), ac						EIN ►		_		
		and ZIP code						Phone no				

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2009

Name of the organization Employer identification number **EMC INSURANCE FOUNDATION** 42-1343474 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule 🔯 For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33%% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, chantable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

	1		1		
Page	1	of	1	of	Part

Name of organization EMC INSURANCE FOUNDATION

Employer identification number 42-1343474

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	Employers Mutual Casualty Company 717 Mulberry Street Des Moines, IA 50309-3872	\$ 168,001	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZiP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Employer identification number 42-1343474

Part II Noncash Property (see instructions)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	11,875 shares of Prestige Brand Holdings Inc	\$ 92,744	8/13/2009
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	10,555 shares of Prestige Brand Holdings Inc	\$ 75,257	10/12/2009
(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
		\$	

EMC Insurance Foundation Form 990-PF, Part I Year Ended December 31, 2009

FEIN - 42-1343474

Line 18 - Taxes

<u>Date Paid</u>	<u>Description</u>	<u>1A</u>	<u>nount</u>
4/9/2009	1st Quarter Estimate	\$	-
6/4/2009	2nd Quarter Estimate	\$	-
9/8/2009	3rd Quarter Estimate	\$	2,250
12/11/2009	4th Quarter Estimate	\$	2,250
	Total taxes paid	\$	4,500

Line 23 - Other Expenses

<u>Description</u>	<u>A</u> (<u>mount</u>
Bank Fees	\$	600
Total other expenses	\$	600

EMC Insurance Foundation Form 990-PF, Part II, Line 10 Year Ended December 31, 2009

FEIN - 42-1343474

			End of Year
	Beg of Year	End of Year	Fair Market
Line 13 Investments - other	Book Value	Book Value	<u>Value</u>
Vanguard Total Stock Market Index Fund	0	962,734	1,076,020
Dodge & Cox Income Fund	0	740,565	753,353
Pimco Low Duration Fund	0	1,777,354	1,812,584
Pimco Total Return Fund	0	740,565	733,771
Vanguard Long-Term Bond Index	0	370,283	367,738
Vanguard Short-Term Bond Index	0	1,555,186	1,558,177
	0	6,146,687	6,301,643

EMC Insurance Foundation Form 990 PF, Part VIII List of Officers Year Ended December 31, 2009 ID #42-1343474

1

N. 1411	Tr'u	Hours per		Contributions to Employee	Expense
Name and Address Bruce G. Kelley 717 Mulberry Street Des Moines, IA 50309	<u>Title</u> President/CEO	<u>Week</u> 0-5	Compensation -0-	Benefit Plans -0-	Account -0-
John C. Burgeson 717 Mulberry Street Des Moines, IA 50309	Vice President	0-5	-0-	-0-	-0-
Robert Morlan 717 Mulberry Street Des Moines, IA 50309	Executive Director	Approx 20	-0-	-0-	-0-
Ronald D. Herman 717 Mulberry Street Des Moines, IA 50309	Treasurer	0-5	-0-	-0-	-0-
Richard Hoffmann 717 Mulberry Street Des Moines, IA 50309	Secretary	0-5	-0-	-0-	-0-
David J. Fisher Onthank Company PO Box 1462 Des Moines, IA 50306	Director	0-5	\$ 750	-0-	-0-
Fredrick Schiek 4615 67th St Urbandale, IA 50322	Director	0-5	\$ 750	-0-	-0-
John H. Kelley MD 2038 Thatch Palm Dr Boca Raton, FL 33432	Director	0-5	\$ 750	-0-	-0-

EMC Insurance Foundation Form 990-PF, Part XV

Contributions paid during the Year

Year ended December 31, 2009	Is Recipient An	Foundation Status of	Purpose of	
Name and Address	Individual	Recipient	Contribution	Amount
Appalachian State University Foundation Inc. Boone, NC	NO	See Note A	See Note B	3,000
AICPCU Malvern, PA	NO	See Note A	See Note B	5,000
AIB College of Business Des Moines, IA	NO	See Note A	See Note B	13,500
ALS Association, Iowa Chapter Des Moines, IA	NO	See Note A	See Note B	2,500
American Cancer Society Des Moines, IA	NO	See Note A	See Note B	4,400
American Diabetes Association Des Moines, IA	NO	See Note A	See Note B	1,600
American Heart Association Des Moines, IA	NO	See Note A	See Note B	3,150
Anawim Housing Des Moines, IA	NO	See Note A	See Note B	2,500
Anthony Elementary Anthony, KS	NO	See Note A	See Note B	500
Argonia Elementary School Argonia, KS	NO	See Note A	See Note B	500
Audubon Elementary School Audubon, IA	NO	See Note A	See Note B	500
Ballet Des Moines Des Moines, IA	NO	See Note A	See Note B	2,000
Belle Plain Elementary Belle Plain, KS	NO	See Note A	See Note B	500

EMC Insurance Foundation
Form 990-PF, Part XV
Contributions paid during the Year
Vear ended December 31, 2009

Year ended December 31, 2009	Is Recipient	Foundation	Purpose	
Name and Address	An Individual	Status of Recipient	of Contribution	Amount
Better Business Bureau	NO	See	See	2,500
Des Moines, IA	140	Note A	Note B	2,500
DI 1 D 1 7	210	0	0	12.500
Blank Park Zoo	NO	See	See	12,500
Des Moines, IA		Note A	Note B	
Care Packages for Troops in Iraq	NO	See	See	(685)
Des Moines, IA		Note A	Note B	
Central Decatur North Elementary	NO	See	See	500
Leon, IA		Note A	Note B	
Control Florentess, LISD 462	NO	Coo	See	500
Central Elementary - USD 462	NO	See Note A	Note B	300
Burden, KS		Note A	Note B	
ChildServe	NO	See	See	2,000
Des Moines, IA		Note A	Note B	
Children & Families of Iowa	NO	See	See	5,000
Des Moines, IA		Note A	Note B	,
Children's Miracle Network	NO	See	See	125
Des Moines, IA		Note A	Note B	
Civic Center of Greater Des Moines	NO	See	See	13,000
Des Moines, IA		Note A	Note B	
Cystic Fibrosis Foundation	NO	See	See	2,485
Edina, MN	110	Note A	Note B	_,
,				
DMACC Foundation	NO	See	See	10,000
Ankeny, IA		Note A	Note B	
DMARC Food Pantry	NO	See	See	1,246
Des Moines, IA		Note A	Note B	
Des Moines Arts Festival	NO	See	See	1,000
Des Moines, IA	110	Note A	Note B	1,000
Dec 141011100, 11 t		- · · · · · · ·	-	

Des Moines, IA

FEIN: 42-1343474

Note A

Note B

Contributions paid during the Year				
Year ended December 31, 2009	Is Recipient	Foundation	Purpose	
	An	Status of	of	
Name and Address	Individual	Recipient	Contribution	Amount
Des Moines Pastoral Counseling Center	NO	See	See	10,000
Des Moines, IA		Note A	Note B	•
Des Moines Symphony	NO	See	See	30,000
Des Moines, IA		Note A	Note B	
Des Moines University	NO	See	See	1,000
Des Moines, IA		Note A	Note B	•
Drake University	NO	See	See	202,590
Des Moines, IA		Note A	Note B	
		_	~	•
Employee & Family Resources	NO	See	See	2,600
Des Moines, IA		Note A	Note B	
Farm Cafee Last A.W. 1	NO	Coo	Caa	250
Farm Safety Just 4 Kids	NO	See	See Note B	230
Des Moines, IA		Note A	Note B	
Food Ministry at Assumption of the BVM Parish	NO	See	See	175
Providence, RI	140	Note A	Note B	173
Tovidence, Ri		Note 11	Note B	
GMG Elementary School	NO	See	See	500
Green Mountain, IA		Note A	Note B	
George Washington Carver Comm School	NO	See	See	500
Des Moines, IA		Note A	Note B	
·				
Girl Scouts of Moingona Council	NO	See	See	5,000
Des Moines, IA		Note A	Note B	
Goodwill Industries	NO	See	See	2,000
Wichita, KS		Note A	Note B	
		_		42.224
Greater Des Moines Comm Foundation	NO	See	See	43,334
Des Moines, IA		Note A	Note B	
	NO	G.	0	250
Greater Des Moines Kiwanis Foundation	NO	See	See	250

Year ended December 31, 2009	Is Recipient An	Foundation Status of	Purpose of	
Name and Address	Individual	Recipient	Contribution	Amount
Griffith Insurance Education Foundation Worthington, OH	NO	See Note A	See Note B	500
Hope Ministries Des Moines, IA	NO	See Note A	See Note B	10,000
Horizon Elementary School Johnston, IA	NO	See Note A	See Note B	500
Hospice of Central Iowa Des Moines, IA	NO	See Note A	See Note B	5,000
I-35 Elementary School Truro, IA	NO	See Note A	See Note B	500
I-Car Education Foundation Hoffman Estates, IL	NO	See Note A	See Note B	100
Iowa College Foundation Des Moines, IA	NO	See Note A	See Note B	14,000
Iowa Dept of Economic Dev Foundation Des Moines, IA	NO	See Note A	See Note B	500
Iowa Health Foundation Des Moines, IA	NO	See Note A	See Note B	10,000
Iowa Homeless Youth Center Des Moines, IA	NO	See Note A	See Note B	100
Iowa Insurance Hall of Fame Des Moines, IA	NO	See Note A	See Note B	250
Iowa National Heritage Foundation Des Moines, IA	NO	See Note A	See Note B	250
Iowa School Board Foundation Des Moines, IA	NO	See Note A	See Note B	50,000

EMC Insurance Foundation Form 990-PF, Part XV

Contributions paid during the Year

Year ended December 31, 2009	Is Recipient	Foundation	Purpose	
Name and Address	An Individual	Status of Recipient	of Contribution	Amount
Iowa State University	NO	See	See	7,000
Ames, IA		Note A	Note B	·
Junior Achievement	NO	See	See	9,000
Des Moines, IA		Note A	Note B	
Juvenile Diabetes Research Foundation	NO	See	See	6,250
Des Moines, IA		Note A	Note B	
Latino Resources - Heritage Festival	NO	See	See	250
Des Moines, IA		Note A	Note B	
Leukemia/Lymphoma Society	NO	See	See	1,000
Iowa City, IA		Note A	Note B	
Living History Farms	NO	See	See	16,000
Des Moines, IA		Note A	Note B	
Loman Education Foundation	NO	See	See	500
Malvern, PA		Note A	Note B	
McKinley Intermediate Elementary	NO	See	See	500
Abilene, KS		Note A	Note B	
Macksville Grade School	NO	See	See	500
Macksville, KS		Note A	Note B	
Mardi Gras Benefit	NO	See	See	600
Des Moines, IA		Note A	Note B	
Meals from the Heartland	NO	See	See	500
Clive, IA		Note A	Note B	
Medcenter One Foundation	NO	See	See	4,500
Bismarck, ND		Note A	Note B	
Meskwaki Settlement School	NO	See	See	500
Tama, IA		Note A	Note B	

EMC Insurance Foundation Form 990-PF, Part XV

Contributions paid during the Year

Year, ended December 31, 2009	Is Recipient	Foundation	Purpose	
	An	Status of	of	
Name and Address	Individual	Recipient	Contribution	Amount
Missouri Valley Family YMCA	NO	See	See	3,000
Bismarck, ND		Note A	Note B	
Morris Scholarship Fund Inc.	NO	See	See	5,000
Des Moines, IA		Note A	Note B	
Murray Elementary School	NO	See	See	500
Murray, IA	NO	Note A	Note B	300
Widitay, IA		Note A	Note B	
Music Under the Stars	NO	See	See	500
Des Moines, IA		Note A	Note B	
,				
NAACP of Des Moines	NO	See	See	250
Des Moines, IA		Note A	Note B	
National Council on Youth Leadership	NO	See	See	500
Des Moines, IA		Note A	Note B	
N D' ' ' OLL	NO	G	0	1 000
New Directions Shelter	NO	See	See Note B	1,000
Des Moines, IA		Note A	Note B	
On with Life Foundation	NO	See	See	2,500
Ankeny, IA	110	Note A	Note B	,
Polk County Housing Trust Fund	NO	See	See	5,000
Des Moines, IA		Note A	Note B	
Prairie City Elementary School	NO	See	See	500
Prairie City, IA		Note A	Note B	
0.1.11	NO	See	See	2,800
Quakerdale	NO	Note A	Note B	2,000
Marshalltown, IA		Note A	Note B	
RL Wright Elementary School	NO	See	See	500
Sedgwick, KS	1.0	Note A	Note B	
ougnien, ito		000 .	.	
Rotary Club of Northwest DM Foundation	NO	See	See	1,000
Des Moines, IA		Note A	Note B	
•				

Year, ended December 31, 2009	Is Recipient An	Foundation Status of	Purpose of	
Name and Address	Individual	Recipient	Contribution	Amount
Salisbury House Foundation	NO	See	See	27,450
Des Moines, IA		Note A	Note B	
Science Center of Iowa	NO	See	See	20,000
Des Moines, IA		Note A	Note B	
St. Baldrick's Foundation	NO	See	See	1,000
Des Moines, IA		Note A	Note B	
South Hutchinson Elementary	NO	See	See	500
South Hutchinson, KS		Note A	Note B	
Stepstone	NO	See	See	2,000
Wichita, KS		Note A	Note B	
Summer Music	NO	See	See	300
Des Moines, IA		Note A	Note B	
Top Learning Center	NO	See	See	500
Wichita, KS		Note A	Note B	
United Way	NO	See	See	311,716
Various		Note A	Note B	
University of Iowa Foundation	NO	See	See	7,070
Iowa City, IA		Note A	Note B	
Variety Club of Iowa	NO	See	See	10,000
Des Moines, IA		Note A	Note B	
Vocal Arts Ensemble of Greater Des Moines	NO	See	See	250
Des Moines, IA		Note A	Note B	
WASBO Foundation	NO	See	See	3,000
Madison, WI		Note A	Note B	
Washington Legal Foundation	NO	See	See	500
Washington, DC		Note A	Note B	

FEIN: 42-1343474

Year ended December 31, 2009	Is Recipient An	Foundation Status of	Purpose of	
Name and Address	Individual	Recipient	Contribution	Amount
World Food Prize	NO	See	See	1,000
Des Moines, IA		Note A	Note B	
YMCA of Greater Des Moines	NO	See	See	2,850
Des Moines, IA		Note A	Note B	
Young Professionals Iowa Conference	NO	See	See	500
Des Moines, IA		Note A	Note B	
Youth Emergency Services & Shelter	NO	See	See	3,000
Des Moines, IA		Note A	Note B	
Youth Homes of Mid-America	NO	See	See	10,000
Des Moines, IA		Note A	Note B	
				051 506

951,506

Note A - All organizations are either listed in the Cumulative List of Organizations, as published by the Internal Revenue Service, or we have obtained a copy of their Section 501(c)(3) letter. It is not known whether or not these organizations are Foundations.

Note B - All contributions are made either for the general support or for a capital fund drive of the respective organization.