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Form **990-PF**

Return of Private Foundation

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

Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements. 2009

Fore	calen	dar year 2009, or tax year beginning			, and e	ending			
G C	heck	all that apply: Initial return		Initial return of a fo	ormer public	charity	Final retur	n	
	_	Amended return		Address change			Name change		
Use	the l	RS Name of foundation					A Employer identificatio	n number	
	abel.								
Oth	erwis	-,			ION		42-140770	<u>1</u>	
	print		alivered	d to street address)		Room/suite	B Telephone number		
	r type	1300 WALINGI DON 30					515 237-83	388	
	Spec ructio	City or town, state, and ZIP code					C If exemption application is	pending, check here	
		DES MOINES, IA 50309					D 1. Foreign organization	ns, check here	
H_C	heck	type of organization: X Section 501(c)(3) ex	kempt	private foundation			Foreign organizations m check here and attach of	eeting the 85% test, computation	
	Se	ction 4947(a)(1) nonexempt charitable trust	Other	taxable private founda	ation		E If private foundation st	atus was terminated	
I Fa	ur ma	rket value of all assets at end of year J Account	ng me	ethod: X Cash	L Acc	rual	under section 507(b)(1		
•				specify)			F If the foundation is in a	60-month termination	
₽		437599. (Part I, colu	mn (d	d) must be on cash l	basis)	-	under section 507(b)(1	I)(B), check here	
Pa	irt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))		(a) Revenue and expenses per books		nvestment ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)	
	1	Contributions, gifts, grants, etc., received	\vdash				N/A	(cash basis only)	
	2	Check X if the foundation is not required to attach Sch B					N/A		
	3	Interest on savings and temporary cash investments		28277.		28277.		STATEMENT 1	
	4	Dividends and interest from securities		202771		202111		DIMI BMBNI I	
	1	Gross rents						 	
		Net rental income or (loss)		·-··					
_	١ ـ	Net gain or (loss) from sale of assets not on line 10			-			† 	
une	Ь	Gross sales price for all assets on line 6a		 .				-	
Revenue	7	Capital gain net income (from Part IV, line 2)				0.			
ď	8	Net short-term capital gain							
	9	Income modifications Gross sales less returns IRECEIVED				-			
	10a	Gross sales less returns and allowances	18						
	ь	Less Cost of goods sold	Ö			_			
	C	Gross profit or (loss) JUN 0 1 2010	100						
	11	Other income		312.		0.		STATEMENT 2	
	12	Total. Add lines 1 through 100 FN UT		28589.		28277.			
	13	Compensation of officers, directors, trustees, etc		0.		0.		0.	
	14	Other employee salaries and wages							
'n	15	Pension plans, employee benefits		<u>.</u> .					
enses	16a	Legal fees STMT 3		4747.		<u> </u>		4747.	
per	b	Accounting fees	<u> </u>			<u> </u>			
ΨŽ	₽ °	Other professional fees							
‡į¥6	E 7	Interest		24.0				<u> </u>	
ert.	18	Taxes STMT 4		312.		0.		0.	
į	19	Depreciation and depletion							
Ē	20	Occupancy	-						
Ħ	21	Travel, conferences, and meetings							
<u>,</u> [22	Printing and publications							
3	23	Other expenses	<u> </u>			-			
	24	Total operating and administrative		5059.		^		4747	
8	25	expenses. Add lines 13 through 23	 	13503.		0.		4747. 13503.	
SCAPERATED OF Administrative,	25	Contributions, gifts, grants paid Total expenses and disbursements.		13303.			-	13303.	
والصنا	20	Add lines 24 and 25		18562.		0.		18250.	
	27	Subtract line 26 from line 12:	\vdash	100020				10230.	
	i	Excess of revenue over expenses and disbursements		10027.					
	1 .	Net investment income (if negative enter -0-)	\vdash	20027		28277.		<u> </u>	
		Adjusted net income (if negative, enter -0-)				<u></u>	N/A		
9235 02-02	01	LHA For Privacy Act and Paperwork Reduction	Act N	lotice, see the instruct	tions.			Form 990-PF (2009)	

		U-PF (2009) NEAL AND BEA SMITH FAMI	LΥ			2-140//01 Page	: 2
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only		Beginning of year		nd of year	_
	•			(a) Book Value	(b) Book Value	(c) Fair Market Value	_
	1	Cash - non-interest-bearing		20176.	2292	8. 23928	•
		Savings and temporary cash investments					_
	3	Accounts receivable -	1				
		Less; allowance for doubtful accounts ▶	ļ				_
	4	Pledges receivable -					
		Less: allowance for doubtful accounts					
	5	Grants receivable					_
	6	Receivables due from officers, directors, trustees, and other		· - ·			_
		disqualified persons					
	7	Other notes and loans receivable		<u> </u>			-
	<i>'</i>	Less: allowance for doubtful accounts	1				
"	١,	Inventories for sale or use	 				_
ě	1 -	Prepaid expenses and deferred charges					-
Ass		Investments - U.S. and state government obligations	-				_
	1						_
	ĺ	Investments - corporate stock		427460	45511	4 271006	_
	1	Investments - corporate bonds STMT 5		437460.	45511	4. 371806	•
	11	Investments - land, buildings, and equipment basis	ł				
		Less accumulated depreciation	<u> </u>				_
t Assets or Fund Balances Liabilities	12	Investments - mortgage loans					_
	13	Investments - other STMT 6		51244.	4186	5. 41865	•
	14	Land, buildings, and equipment: basis	1				
		Less accumulated depreciation					_
	15	Other assets (describe	L.				
			ŀ				
	16	Total assets (to be completed by all filers)		508880.	51990	7. 437599	•
	17	Accounts payable and accrued expenses					
	18	Grants payable					
Ś	19	Deferred revenue					
iţie	20	Loans from officers, directors, trustees, and other disqualified persons					
ğ	21	Mortgages and other notes payable				 	
Ë		Other liabilities (describe	<u> </u>			 	
		- I administration (december)					
	23	Total liabilities (add lines 17 through 22)		0.		0.	
_	20	Foundations that follow SFAS 117, check here	<u> </u>			~ 	
		•					
S	24	and complete lines 24 through 26 and lines 30 and 31.				ĺ	
Š	1	Unrestricted				 	
ala	25	Temporarily restricted					
ВP	26	Permanently restricted	├				
Ë	1	Foundations that do not follow SFAS 117, check here	1				
<u></u>		and complete lines 27 through 31.					
\$	27	Capital stock, trust principal, or current funds	├	0.		0.	
SS	28	Paid-in or capital surplus, or land, bldg., and equipment fund	<u> </u>	43760.	4376		
ţ	29	Retained earnings, accumulated income, endowment, or other funds	<u> </u>	465120.	47614		
ž	30	Total net assets or fund balances	L	508880.	51990	<u>7.</u>	
	31	Total liabilities and net assets/fund balances	1	508880.	<u>51990</u>	<u>7. </u>	_
P	art	Analysis of Changes in Net Assets or Fund E	Bala	nces			
_				·	~-		_
1		net assets or fund balances at beginning of year - Part II, column (a), line	30				
		it agree with end-of-year figure reported on prior year's return)				1 508880	
		amount from Part I, line 27a				2 10027	_
		r increases not included in line 2 (itemize) CORRECTION	OF	OPENING BAN	W BALANCE	3 1000	
		lines 1, 2, and 3				4 519907	
		eases not included in line 2 (itemize)				5 0	
<u>6</u>	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olum	n (b), line 30		6 519907	
						Form 990-PF (2009))

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	AND BEA SMITH	FAMILY	FOUNDAT	SION 42-1407701			<u>7701 </u>	Page 3	
Part IV Capital Gains a	nd Losses for Tax on Ir	nvestment	Income						
(a) List and describ 2-story brick ware	e the kind(s) of property sold (e.g house; or common stock, 200 sh	ı., real estate, s. MLC Co.)		(b)	How acquired - Purchase - Donation	(c) Date (mo., o	acquired day, yr.)	(d) Dat (mo., d	
1a					-				
b NON	E								
<u>c</u>				ļ.,					
<u>d</u>	.= =:			<u> </u>					
e	- ·			<u>L</u> ,					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				Sain or (loss) s (f) minus (
a									
b									18
С									
d								_	
e		1	40/04/00						
Complete only for assets showing		1			·	(I) Gains ((Col. (h) gaın ı not less than	minus	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ֈ), ıf any				(from col. (h		
a									
b									
C									
d									
<u>e</u>		<u> </u>							
2 Capital gain net income or (net capi	tal loss) { If gain, also enter of the loss of the los	r ın Part I, line I- ın Part I, line	7 7	}	2				
Net short-term capital gain or (loss) If gain, also enter in Part I, line 8, co		nd (6):		٦					
If (loss), enter -0- in Part I, line 8	Julii (0).			 	3				
Part V Qualification Un	der Section 4940(e) for	Reduced	Tax on Net	Inv	estment Ir	come			
(For optional use by domestic private f	oundations subject to the section	4940(a) tax on	net investment in	come	e.)				
If another 40.40(-1)(0) and less there the	and black								
If section 4940(d)(2) applies, leave this	s part blank.								
Was the foundation liable for the section	on 4942 tax on the distributable an	nount of any ye	ear in the base per	riod?				Yes	X No
If "Yes," the foundation does not qualify									_
1 Enter the appropriate amount in ea	ch column for each year; see instr	uctions before	making any entri	es.					
(a) Base period years	(b)			(c)			Distrib	(d) ution ratio	
Calendar year (or tax year beginning	ın) Adjusted qualifying dis		Net value of no	nchar			(col. (b) divi	ded by col.	
2008		27614.			40800	-			<u>67681</u>
2007		15810.			46315				34135
2006		14765.			43782				33723
2005		12506.			42879				<u> 29166</u>
2004		14409.			41136	9.	1	.0	<u>35027</u>
								_	
2 Total of line 1, column (d)						2		.1	99732
3 Average distribution ratio for the 5-		on line 2 by 5,	or by the number	of ye	ars			•	20046
the foundation has been in existence	e if less than 5 years					3_		.0	<u> 39946</u>
4 Enter the net value of noncharitable	-use assets for 2009 from Part X,	line 5				4		38	3494.
								4	
5 Multiply line 4 by line 3						5		1	<u>5319.</u>
6 Enter 1% of net investment income	(1% of Part I, line 27b)					6			283.
7 Add lines 5 and 6						_		1	5602
O DIES C SAINI DUA						7	 	<u></u>	<u>5602.</u>
8 Enter qualifying distributions from I						8		1	8250.
If line 8 is equal to or greater than li See the Part VI instructions.	ne 7, check the box in Part VI, line	t 1b, and comp	lete that part usin	g a 19	% tax rate.				

	990-PF (2009) NEAL AND BEA SMITH FAMILY FOUNDATION 42-14 ort VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - section 4940(a), 4940(b), 4940(c), or 4948 - section 4940(a), 4940(b), 4940(b), 4940(c), or 4948 - section 4940(a), 4940(b),			Page 4
fu	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%		2	283.
	of Part I, line 27b			
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-)			0.
3	Add lines 1 and 2			283.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			283.
6	Credits/Payments:			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 312.			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld 6d 6d			
	Total credits and payments. Add lines 6a through 6d			<u>312.</u>
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			<u> 29.</u>
	Enter the amount of line 10 to be: Credited to 2010 estimated tax			<u>0.</u>
	rt VII-A Statements Regarding Activities			ING
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	<u> </u>	Yes	
	any political campaign?	1 <u>a</u>		X
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1 <u>b</u>	+	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	ŀ		
	distributed by the foundation in connection with the activities.			
	Did the foundation file Form 1120-POL for this year?	10	-	X
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0.			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			1
	managers. \$	۔ ا		-
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	-	X
9	If "Yes," attach a detailed description of the activities.			
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	١,		🕶
An	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	3 4a	+	X
	If "Yes," has it filed a tax return on Form 990-T for this year? N/A			A
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	4 <u>b</u>		X
J	If "Yes," attach the statement required by General Instruction T.		+	122
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			ŀ
Ŭ	By language in the governing instrument, or			1
	By state legislation that effectively amends the governing instrument so that no mandatory directions that 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?	7	X	
-	If "Yes," complete Part II, col. (c), and Part XV.	-	+	1
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	IA	-		
ь	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 General Instruction G? If "No," attach explanation	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar		1	
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		X
<u>10</u>	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X
		Form 99	_	

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orm 990-PF (2009) NEAL AND BEA SMITH FAMIL			<u>42-14077</u>	<u>'01 Pag</u>	ge 6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					
• (1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e)) ?	Ye	es 🗓 No		
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire				
any voter registration drive?		Ye	s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y6	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo	or			
the prevention of cruelty to children or animals?		Ye	s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unit	der the exceptions described i	n Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instru	•	· ·	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	•				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for		ned			
expenditure responsibility for the grant?		/A 🗀 Ye	s 🔲 No		
If "Yes," attach the statement required by Regulations section 53.494		,			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	• •				
a personal benefit contract?	· v prometrie en	☐ Va	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?	٠. ـــــ		6b 3	X
If "Yes" to 6b, file Form 8870.	ordenal bonom bontract		<u> </u>		<u> </u>
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	☐ Ye	s X No		
b If yes, did the foundation receive any proceeds or have any net income attribut	***			7b	
Information About Officers Directors Truct		nagers. Highly		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	—
Part VIII Paid Employees, and Contractors	,		•		
1 List all officers, directors, trustees, foundation managers and their	compensation.				_
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expens account, of	se_
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, of	ner IS
NEAL E. SMITH	PRES, TRES, DIR				_
300 WALNUT BOX 90] ' '				
DES MOINES, IA 50309	1.00	0.	0.	1 (0.
	VPRES, SEC, DIR		-		
300 WALNUT BOX 90	, , , , , , , , , , , , , , , , , , , ,				
DES MOINES, IA 50309	1.00	0.	0.	(0.
		:		<u>`</u>	
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average	4-3 Company	(d) Contributions to employee benefit plans	(e) Expens account, of	3e
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account, on	ier S
NONE			· - · · ·		_
				-	_
	-				
					_
			· - · · · · · · ·		_
Total number of other employees paid over \$50,000					0

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Total. Add lines 1 through 3

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P	art X Minimum Investment Return (All domestic foundations must complete this part Foreign	foundations, see	instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	367282.
b	Average of monthly cash balances	1b	22052.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	389334.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	0.	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	389334.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	5840.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	383494.
6	Minimum investment return. Enter 5% of line 5	6	19175.
Ρ	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundation foreign organizations check here in and do not complete this part.)	ns and certain	
1	Minimum investment return from Part X, line 6	1	19175.
2a	Tax on investment income for 2009 from Part VI, line 5	3.	
b	Income tax for 2009. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	283.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	18892.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	18892.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	18892.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	18250.
þ	Program-related investments - total from Part IX-B	1b	0.
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	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	18250.
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	5	283.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	17967.
	Note: The amount on line 6 will be used in Port V. column (h), in subsequent years when coloulating whether the founds	tion qualified for the	controp

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,		Toda's prior to 2000	2000	2009
line 7			İ	18892.
2 Undistributed income, if any, as of the end of 2009				10092.
a Enter amount for 2008 only			20003.	
b Total for prior years:			20003.	
g rotario prio yearo.		0.		
3 Excess distributions carryover, if any, to 2009:	-			
a From 2004				
b From 2005				
c From 2006				
d From 2007				
e From 2008				
f Total of lines 3a through e	0.		İ	
4 Qualifying distributions for 2009 from				-
Part XII, line 4: ►\$ 18250.				
a Applied to 2008, but not more than line 2a			18250.	
b Applied to undistributed income of prior			102301	-
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		0.		
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount	•			0.
e Remaining amount distributed out of corpus	0.			<u> </u>
5 Excess distributions carryover applied to 2009	ő.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously		0		
assessed d Subtract line 6c from line 6b. Taxable		0.		
		0.		
amount - see instructions e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see instr.			1753.	
f Undistributed income for 2009. Subtract			1755.	
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				18892.
7 Amounts treated as distributions out of				10072.
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009				
T 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.				Form QQ0-PF (2000)

Form 990-PF (2009) NEAL AN Part XIV Private Operating F	D BEA SMITH				107701 Page
				N/A	
1 ·a If the foundation has received a ruling of					
foundation, and the ruling is effective for	•	-		14040()(0) == []	040()/5)
b Check box to indicate whether the found		ig foundation described I		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2009	(b) 2008	Prior 3 years (c) 2007	(d) 2006	(a) Tabal
income from Part I or the minimum	(a) 2009	(0) 2006	(6) 2007	(0) 2006	(e) Total
investment return from Part X for					
each year listed			<u> </u>		
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed		ļ			
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
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)					
(3) Largest amount of support from				+	
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundatio	n had \$5,000 or m	ore in assets
at any time during t					
1 Information Regarding Foundatio	n Managers:				
a List any managers of the foundation whyear (but only if they have contributed in			tributions received by th	e foundation before the clo	ose of any tax
SEE STATEMENT 7	ποτο τημη φο,σσο). (σσο σ	oction 507 (d)(2).)			
b List any managers of the foundation who ther entity) of which the foundation has			(or an equally large por	tion of the ownership of a p	partnership or
NONE	• • • • • • • • • • • • • • • • • • • •				
2 Information Regarding Contributi	ion Grant Gift Loan	Scholarship etc. P	rograme:		·-
Check here 🕨 🗶 if the foundation o	nly makes contributions	to preselected charitable	organizations and does		
the foundation makes gifts, grants, etc.	·	·		Complete items 2a, 0, c, an	u u.
a The name, address, and telephone num	der of the person to who	m applications snould be	e addressed:		
b The form in which applications should b	e submitted and informa	tion and materials they s	should include:		
c Any submission deadlines;					
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields	, kınds of ınstitutions. or	other factors:	
			,-		
923801 02.02.10	· · · · · · · · · · · · · · · · · · ·				Farm 000 PE (0000

3 · Grants and Contributions Paid During the Year or Approved for Future Payment						
. Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount		
Name and address (home or business)	or substantial contributor	recipient	Contribution			
a Paid during the year	OI SUUSIAIILIAI COINTIDULOI	recipient				
SEE STATEMENT 8				40500		
Total b Approved for future payment NONE Total 923611 02-02-10			► 3a ► 3b	0. 000 PE (2000)		
923611 02-02-10			Fo	orm 990-PF (2009)		

Part XVI-A. Analysis of Income-Producing Activities

	I Ingolate 4	NICIDACE INCOME	T = 3.55		
nter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code	741104111	code	Amount	Tunction income
a	-		-	+	
b	l l			·-·	
d		<u></u>			
e	i .				
f					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash					
investments			14	28277.	
Dividends and interest from securities					
Net rental income or (loss) from real estate:					
a Debt-financed property	-				
b Not debt-financed property Net rental income or (loss) from personal			+	- · · - · - · -	
property					
Other investment income			+ +		
Gain or (loss) from sales of assets other		····			
than inventory					
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue:					
a <u>TAX REFUND</u>			01	312.	
b	_				
c					
d					
Colored Add solvers (b) (d) and (s)			. -	20500	
P. Subtotal. Add columns (b), (d), and (e) B. Total. Add line 12, columns (b), (d), and (e)			<u> </u>	28589.	0 28589
see worksheet in line 13 instructions to verify calculations.)				13	
Part XVI-B Relationship of Activities		nplishment of	Exempt P	urposes	
ine No. Explain below how each activity for which inc	come is reported in	column (e) of Part XV	I-A contributed	d importantly to the accomp	olishment of
the foundation's exempt purposes (other that	in by providing fund	s for such purposes).	<u> </u>		
		 -			
	 -				
					
	······································				
	· ·	···-			
		··			
			 _		
					
23621				· · · · · · · · · · · · · · · · · · ·	Corm QQD_PF (2000

	<u>ait A</u>	Exempt Organ	izations	and transactions at	nd Helationships With Nonch	aritable	9	
1	Did tl		rectly engage in any of the follow	wing with any other organization	described in section 501(c) of	\neg	Yes	No
·)(3) organizations) or in section		• •		. 03	-140
,			ation to a noncharitable exempt					1
	(1)	• =				1a(1)		х
		Other assets				1a(2)		X
ı		transactions:				10(2)		
	(1) 3	Sales of assets to a noncharital	ble exempt organization			1b(1)		Х
			ncharitable exempt organization	1		1b(2)		X
		Rental of facilities, equipment,	. •			1b(3)		X
	(4)	Reimbursement arrangements				1b(4)		Х
	(5) l	oans or loan guarantees				1b(5)		X
	(6) F	Performance of services or me	mbership or fundraising solicita	ations		1b(6)		X
(Shari	ing of facilities, equipment, ma	ılıng lists, other assets, or paid e	employees		1c		Х
(I If the	answer to any of the above is	"Yes," complete the following so	chedule. Column (b) should alw	ays show the fair market value of the goods	, other ass	ets,	
	or se	rvices given by the reporting fo	oundation. If the foundation reco	eived less than fair market value	in any transaction or sharing arrangement	, show in		
		, ' 	other assets, or services receive					
(a)	Line no	(b) Amount involved		ble exempt organization	(d) Description of transfers, transactions, an	d sharing an	rangeme	nts
			N/A	1				
								
				· · · · · · · · · · · · · · · · · · ·				
				·	<u></u>			
_								
_	-							
_	.							
-	lo the	foundation directly or indirect	the offiliated with or related to a		<u></u>			
26			tly affiliated with, or related to, o r than section 501(c)(3)) or in si		ations described	<u> </u>	[To	٦
,		s," complete the following sch		ection 5217		L Yes	LA	No
_	<u>, 11 10</u>	(a) Name of org		(b) Type of organization	(c) Description of relation	ishin		
		N/A		(S) type of organization	(b) Booking the in the control	-		
	-							
			· · · · · · · · · · · · · · · · · · ·		·			
	_	·						
					nts, and to the best of my knowledge and belief, it	s true, corre	ct,	
	and cor		r than taxpayer or fiduciary) is based	on all information of which preparer h	as any knowledge			
		Nul E	Smilk	15/23/10	President			
ere	S	gnature of officer or trustee		Date	Title			
Sign Here	, ^	Preparer's	1 /// 1/	Da		arer's identify	/ing num	ber
Sig	Paid Preparer's Use Only	signature	12 J (//	<u></u>	Sol/() Self- employed ► □			
	Paid spare	I min 2 manue (m. Anni 2	ASTER LAW FIRM	I, P.C.	EIN ►			
	Pre Us	if self-employed).	WALNUT, SUITE					
			MOINES, IA 503	09	Phone no. (515		<u>3 – 3</u>	
					f	orm 990	-PF (2009)

FORM 990-PF INTEREST ON SAV	INGS AND TEM	PORARY CASH	INVESTMENTS	STATEMENT	1
SOURCE				AMOUNT	
US BANCORP US BANK NA			_	2788	81. 96.
TOTAL TO FORM 990-PF, PART I	, LINE 3, CC	LUMN A	=	282'	77.
FORM 990-PF	OTHER I	NCOME		STATEMENT	2
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCOI	
TAX REFUND		312.	0.		
TOTAL TO FORM 990-PF, PART I	, LINE 11 =	312.	0.		
FORM 990-PF	LEGAL	, FEES		STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITAI PURPOSI	
LEGAL FEES	4747.	0	•	47	47.
TO FM 990-PF, PG 1, LN 16A	4747.	0	•	474	47.
FORM 990-PF	KAT	ES		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME		
SECTION 4940 TAX ON INVESTMENT INCOME	312.	0	•		0.

	CORPO	RATE BONDS	-	STATEMENT	
DESCRIPTION			BOOK VALUE	FAIR MARKE VALUE	т
BAC CAPITAL TRUST II		•	48999.	400	50.
BANK OF AMERICA CORP PFD 1	L2/15/33		49901.	444	
CORP BACKED TRUST CERTS			50003.	443	
FINL SECURITY ASSUR HLGS			49996.	320	70.
FORD MOTOR CO NOTE			51125.	441	88.
GENERAL ELECTRIC CAP			50064.	462	74.
GENERAL MOTORS			47346.	93	84.
WELLS FARGO CAP TRUST IV			107680.	1110	00.
TOTAL TO FORM 990-PF, PART	r II, LINE 1	.0C	455114.	3718	06.
		=			
FORM 990-PF	OTHER	INVESTMENTS		STATEMENT	ε
FORM 990-PF DESCRIPTION	OTHER	INVESTMENTS VALUATION METHOD	BOOK VALUE	STATEMENT FAIR MARKE	
DESCRIPTION	OTHER	VALUATION	BOOK VALUE	FAIR MARKE	т
		VALUATION METHOD FMV		FAIR MARKE VALUE	т 65.

NAME OF MANAGER

NEAL E. SMITH BEATRIX H. SMITH FORM 990-PF

STATEMENT

	DURING THE YEAR		
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT
ALL FAITHS FOOD BANK 717 CATTLEMEN ROAD SARASOTA, FL 34232		501(C)(3) PUBLIC	500.
ALTOONA UNITED METHODIST CHURCH 602 5TH AVENUE SW ALTOONA, IA 50009			1040.
CENTRAL PLACE 8325 NE UNIVERSITY AVENUE PLEASANT HILL, IA 50327	NONE CHARITABLE PURPOSES	501(C)(3) PUBLIC	300.
DRAKE UNIVERSITY 2507 UNIVERSITY AVENUE DES MOINES, IA 50311	NONE CHARITABLE PURPOSES	501(C)(3) PUBLIC	1700.
DRAKE UNIVERSITY ADULT LITERACY CENTER 1213 25TH STREET DES MOINES, IA 50311	CHARITABLE PURPOSES	501(C)(3) PUBLIC	1000.
WALNUT CREEK CHURCH 900 64TH STREET WINDSOR HEIGHTS, IA 50312	NONE CHARITABLE PURPOSES	501(C)(3) PUBLIC	100.
OAK POINTE CHURCH 50200 W. TEN MILE ROAD NOVI, MI 48374	NONE CHARITABLE PURPOSES	501(C)(3) PUBLIC	200.
LEUKEMIA & LYMPHOMA SOCIETY 8033 UNIVERSITY BLVD CLIVE, IA 50325	NONE CHARITABLE PURPOSES	501(C)(3) PUBLIC	200.

GRANTS AND CONTRIBUTIONS

NEAL AND BEA SMITH FAMILY FOUND	ATION		42-1407701
HOPE MINISTRIES - BETHEL MISSIONS PO BOX 862 DES MOINES, IA 50304	NONE CHARITABLE PURPOSES	501(C)(3) PUBLIC	500.
IOWA CHRISTIAN ACADEMY 2501 VINE STREET WEST DES MOINES, IA 50265	NONE CHARITABLE PURPOSES	501(C)(3) PUBLIC	500.
ISBA PUBLIC SERVICE PROJECT 521 E. LOCUST DES MOINES, IA 50309	NONE CHARITABLE PURPOSES	501(C)(3) PUBLIC	100.
IOWA LEGAL AID 1111 9TH STREET DES MOINES, IA 50314	NONE CHARITABLE PURPOSES	501(C)(3) PUBLIC	750.
IOWA NATURAL HERITAGE FOUNDATION 505 5TH AVENUE SUITE 444 DES MOINES, IA 50309	NONE CHARITABLE PURPOSES	501(C)(3) PUBLIC	750.
GRINNELL COLLEGE 733 BROAD STREET GRINNELL, IA 50112	NONE CHARITABLE PURPOSES	501(C)(3) PUBLIC	163.
JIMMY CARTER CENTER 300 NORTH BOND STREET PLAINS, GA 31780	NONE CHARITABLE PURPOSES	501(C)(3) PUBLIC	1000.
IOWA STATE UNIVERSITY 420 BEACH AVENUE AMES, IA 50011	NONE CHARITABLE PURPOSES	501(C)(3) PUBLIC	100.
PEKIN DOLLARS FOR SCHOLARS BIRCH AVENUE PACKWOOD, IA 52580	NONE CHARITABLE PURPOSES	501(C)(3) PUBLIC	100.
ALTOONA LUTHERAN CHURCH 1701 8TH STREET SW ALTOONA, IA 50009	NONE CHARITABLE PURPOSES	501(C)(3) PUBLIC	1500.

NEAL AND BEA SMITH FAMILY FOUND	ATION		42-1407701
SALVATION ARMY 940 LONDON AVENUE SUITE 1800 MARYSVILLE, OH 43040	NONE CHARITABLE PURPOSES	501(C)(3) PUBLIC	500.
SOUTHEAST POLK COMMUNITY SCHOOL DISTRICT 8379 NE UNIVERSITY AVENUE PLEASANT HILL, IA 50327	NONE CHARITABLE PURPOSES	501(C)(3) PUBLIC	1000.
DES MOINES ART CENTER 4700 GRAND AVENUE DES MOINES, IA 50312	NONE CHARITABLE PURPOSES	501(C)(3) PUBLIC	500.
CARING HANDS FOOD PANTRY 717 CATTLEMEN ROAD SARASOTA, FL 34232	NONE CHARITABLE PURPOSES	501(C)(3) PUBLIC	500.
FREESTORE 702 EAST 4TH STREET DES MOINES, IA 50309	NONE CHARITABLE PURPOSES	501(C)(3) PUBLIC	500.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A		13503.

Form **8868**

(Rev. April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return

OMB No. 1545-1709

Form 8868 (Rev. 4-2009)

	ou are filing for an Automatic 3-Month Extension, complete only Part I and check this box ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	form).		▶ X
	ot complete Part II unless you have already been granted an automatic 3-month extension on a previously fi		rm 8868	
Pai	Automatic 3-Month Extension of Time. Only submit original (no copies needed).			
	poration required to file Form 990-T and requesting an automatic 6-month extension - check this box and con only	nplete		▶ □
	her corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request al income tax retums.	n exten	sion of time	
noted (not a you n	ronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electron automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or construction the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic files gov/efile and click on e-file for Chanties & Nonprofits.	cally if	(1) you wan ated Form 9	t the additional 90-T Instead.
Type print	or Name of Exempt Organization	Emp	loyer identif	ication number
) III	NEAL AND BEA SMITH FAMILY FOUNDATION	4	2-1407	701
File by due da filing ye	Number, street, and room or suite no If a P.O box, see instructions.	-	- 	<u></u>
eturn nstruc	566			
Chec	k type of return to be filed (file a separate application for each return):			
	Form 990 Form 990-T (corporation) Form 4 Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 55 Form 990-EZ Form 990-T (trust other than above) Form 66 Form 990-PF Form 1041-A Form 86	227 069		
Te If t	NEAL E. SMITH the books are in the care of ▶ 300 WALNUT BOX 90 - DES MOINES, IA 5030 the books are in the care of ▶ 515-237-8388 FAX No. ▶ the organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If the . If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all	ıs is fo		roup, check this
1	I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitary AUGUST 15, 2010 , to file the exempt organization return for the organization named as is for the organization's return for: X calendar year 2009 or		The extension	on
	tax year beginning, and ending	<u>.</u>	_	
2	If this tax year is for less than 12 months, check reason		Change in a	ccounting period
3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	283.
b	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	- 54		203.
	tax payments made Include any prior year overpayment allowed as a credit.	3b	\$	312.
С	Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System)			
	See instructions.	3c_	\$	0.
Caut	ion. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453.FO and Form	9979.	=O for navm	ant instructions

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

Form **8868**

(Rev April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

Form 8868 (Rev. 4-2009)

 If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of 	this form)	▶ 🗓
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previous	sly filed Fo	orm 8868.
Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).		
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and Part I only	complete	▶ □
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to reque to file income tax returns.	st an exter	nsion of time
Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extended below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electron automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite of you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electron www.irs.gov/efile and click on e-file for Chanties & Nonprofits.	tronically r or consolid	f (1) you want the additional ated Form 990-T. Instead.
Type or Name of Exempt Organization	Emp	oloyer identification number
NEAL AND BEA SMITH FAMILY FOUNDATION	4	12-1407701
Number, street, and room or suite no. If a P O box, see instructions 300 WALNUT BOX 90		
eturn See instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions DES MOINES, IA 50309		
Check type of return to be filed (file a separate application for each return):		
Form 990-EZ Form 990-T (trust other than above)	m 4720 m 5227 m 6069 m 8870	
NEAL E. SMITH The books are in the care of ▶ 300 WALNUT BOX 90 - DES MOINES, IA 50 Telephone No. ▶ 515-237-8388 If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)		. ► □
oox ▶ ☐ . If it is for part of the group, check this box ▶ ☐ and attach a list with the names and EINs o		
I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time AUGUST 15, 2010 , to file the exempt organization return for the organization name is for the organization's return for: ■ X calendar year 2009 or ■ tax year beginning , and ending		The extension
AUGUST 15, 2010 , to file the exempt organization return for the organization name is for the organization's return for: X Calendar year 2009 Or		The extension Change in accounting period
AUGUST 15, 2010 , to file the exempt organization return for the organization name is for the organization's return for: X calendar year 2009 or tax year beginning , and ending	ed above.	Change in accounting period
AUGUST 15, 2010 , to file the exempt organization return for the organization name is for the organization's return for: ▶ X calendar year 2009 or ▶ 1 tax year beginning , and ending 2 If this tax year is for less than 12 months, check reason Initial return Final return 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions		Change in accounting period
AUGUST 15, 2010 , to file the exempt organization return for the organization name is for the organization's return for: ▶ X calendar year 2009 or ▶ 1 tax year beginning , and ending 2 If this tax year is for less than 12 months, check reason Initial return Final return 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	ed above.	Change in accounting period \$ 526
AUGUST 15, 2010 , to file the exempt organization return for the organization name is for the organization's return for: ▶ X calendar year 2009 or ▶ 1 tax year beginning , and ending 2 If this tax year is for less than 12 months, check reason Initial return Final return 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	above.	Change in accounting period \$ 526.

923831

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