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Form **990-PF**

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

OMB No 1545-0052

2009

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 For calendar year 2009, or tax year beginning . 2009, and ending Final return G Check all that apply. Initial return Initial Return of a former public charity Amended return Address change Name change Employer identification number Use the IRS label. ARLAN J VAN WYK FAMILY 42-1484434 Otherwise, FOUNDATION Telephone number (see the instructions) print HWY 60 S, PO BOX 389 SHELDON, IA 51201-0389 712-324-5316 or type. See Specific If exemption application is pending, check here Instructions 1 Foreign organizations, check here н Check type of organization: X Section 501(c)(3) exempt private foundation 2 Foreign organizations meeting the 85% test, check here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Ε If private foundation status was terminated Accounting method: X Cash Fair market value of all assets at end of year under section 507(b)(1)(A), check here. (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination under section 507(b)(1)(B), check here 57,892. (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) expenses per books income ıncome for charitable purposes (cash basis only) (see the instructions).) 168.780 Contributions, gifts, grants, etc, received (att sch) Ck ► If the foundn is not reg to att Sch B Interest on savings and temporary 745 745 745 cash investments Dividends and interest from securities 5a Gross rents **b** Net rental income or (loss) 6a Net gain/(loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10 a Gross sales less returns and allowances RECEIVED b Less Cost of goods sold c Gross profit/(loss) (att sch) V 17
11 Other income (attach schedule) 0 12 Total. Add lines 1 (th) (Qigh) (PAL | | 169,525 745 745 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) ADM-N-STRAT 475 SEE ST 1 **b** Accounting fees (attach sch) c Other prof fees (attach sch) OPERATING 17 Interest 18 Taxes (attach schedule)(see instr.) Depreciation (attach sch) and depletion ¥ Occupancy Travel, conferences, and meetings 21 22 Printing and publications EXPENSES 23 Other expenses (attach schedule) Total operating and administrative expenses. Add lines 13 through 23 24 475 Contributions, gifts, grants paid STMT 2 149,600 149,600 Total expenses and disbursements. 150,075 0. 0. 149,600. Add lines 24 and 25 Subtract line 26 from line 12: a Excess of revenue over expenses 19,450 and disbursements. 745 **b** Net investment income (if negative, enter -0-). 745

C Adjusted net income (if negative, enter -0-)

)~~\	m i	Bala'naa Chaata	Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		End of	i year	
<u>LETV?</u>	<u>w</u> j	Balance Sheets	(See instructions)	(a) Book Value	(b) Book Valu	e	(c) Fair I	Market Value
	1,	Cash - non-interest	-bearing					
	2		ary cash investments	38,442.	57,8	92.		57,892.
		Accounts receivable	-			احمد		
		Less: allowance for						
	А	Pledges receivable	►					
	_	Less: allowance for	doubtful accounts					<u>,</u>
	5	Grants receivable						
				 		\neg		
	6	disqualified persons (atta	cers, directors, trustees, and other ch schedule) (see the instructions).					
	7	Other notes and loans rec	eivable (attach sch).					
S		Less: allowance for	doubtful accounts -					
Š	8	Inventories for sale	or use			\longrightarrow		
ASSET	9	Prepaid expenses as	nd deferred charges					
Š	10 a	Investments – US obligations (attach s	and state government chedule)					
	ь	Investments — corporate	stock (attach schedule)					
	c	: Investments — corporate	bonds (attach schedule) .					
	11	Investments - land,	buildings, and					
		equipment basis			<u> </u>			
		Less: accumulated deprec (attach schedule)	iation . •					
	12	Investments - mort	gage loans					
	13	Investments - other	(attach schedule)					
	14	Land, buildings, and e	equipment basis.					
		Less: accumulated deprec (attach schedule)	nation					
	15	Other assets (descri						
	16	Total assets (to be see instructions. Als	completed by all filers – o, see page 1, item I)	38,442.	57,8	92.		57,892.
٦.	17	Accounts payable ar	nd accrued expenses					
Å	18	Grants payable						
В	19	Deferred revenue						20.0
ı,	20	Loans from officers, direc	tors, trustees, & other disqualified persons					
Ī	21	Mortgages and other note	s payable (attach schedule)					
T	22	Other liabilities (descri	ribe D				· .	
Ė			17.11			0.		
S	23		lines 17 through 22)	0.				
			llow SFAS 117, check here 24 through 26 and lines 30 and 31.	4		ļ		
		•	27 tillough 20 till illioo oo till on			- 1	٠.	
N F E U T N	24	Unrestricted						
TŅ	25	Temporarily restricte						1
A D	26	Permanently restrict		 	 	\dashv		
A B A L A N		and complete lines	o not follow SFAS 117, check here $ ightharpoonup$ 27 through 31.					
TA	27	Capital stock, trust j	orincipal, or current funds		·			
SN	28	Paid-in or capital surplus	, or land, building, and equipment fund					
o E	29	Retained earnings, accum	ulated income, endowment, or other funds	38,442.	57,8			
ŘŠ	30		fund balances (see the instructions)	38,442.	57,8	92.		
	31	(see the instructions		38,442.	57,8	92.		
Parl		Analysis of Chan	iges in Net Assets or Fund Balanc	es				
1	Total end-	I net assets or fund b of-year figure reporte	alances at beginning of year – Part II, coli d on prior year's return)	umn (a), line 30 (must ag	gree with	1		38,442.
2		r amount from Part I,	- · · · · · · · · · · · · · · · · · · ·			2		19,450.
		increases not included in li				3		-
		lines 1, 2, and 3.				4		57,892.
		ases not included in line 2	(Itemize)			5		•
			alances at end of year (line 4 minus line 5) - Part II, column (b). I	 ine 30	6		57,892.

	O-PF (2009) ARLAN J V				4	2-1484434	Page 3
Part IV		osses for Tax on Investment		(b) How aco	uired	(C) Date acquired	(d) Date sold
	2-story brick warehous	e the kind(s) of property sold (e.g., rese; or common stock, 200 shares ML	C Company)	P — Purch D — Dona	iase	(month, day, year)	(month, day, year)
1a N/	'A						
b							
С							
d							
е							
(6	e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other base plus expense of sa			(h) Gain or (e) plus (f) m	
a							
<u> </u>							
С							
<u>d</u>			·····				
<u>e</u>		<u> </u>					
	i) Fair Market Value as of 12/31/69	ing gain in column (h) and owned by (j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a) (I)	g tha	(I) Gains (Coli ain minus column (I an -0-) or Losses (fr	(), but not less
а							
ь							
С			 -				
<u>d</u>							
е	 	<u> </u>				Γ	
•	oital gain net income or (net	If (loss), ent	enter in Part I, line 7 der -0- in Part I, line 7	-	2		1
3 Net	short-term capital gain or (loss) as defined in sections 1222(5)	and (6):				
If ga	ain, also enter in Part I, line	e 8, column (c) (see the instructions)	If (loss), enter -0-	- 1	_		
	Part I, line 8	C-+ 4040(-) (D	d Tay on Nat Invaden		3	<u> </u>	
Part V		Section 4940(e) for Reduced				N/A	
(For optio	onal use by domestic private	e foundations subject to the section 4	1340(a) tax on het investine	stit income	,	N/ A	
If section	4940(d)(2) applies, leave t	his part blank.					
Mac tha f	foundation liable for the sec	tion 4942 tax on the distributable am	nount of any year in the has	se neriod?		∏Yes	□No
		ify under section 4940(e). Do not con		oc period		□,55	
		n each column for each year; see the		g any entr	ies.		
,	(a)	(b)	(c)			(d)	
	Base period years endar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use as	sets	(col	Distribution umn (b) divided	n ratio by column (c))
	2008				_		
	2007						<u></u>
	2006						
	2005		· · ·				
	2004					<u> </u>	
2 Tot	tal of line 1, column (d)				2		
3 Ave	erage distribution ratio for th	ne 5-year base period – divide the to	otal on line 2 by 5, or by the	,			
nun	mber of years the foundation	n has been in existence if less than 5	5 years	}	3	_	
4 Ent	ter the net value of nonchar	table-use assets for 2009 from Part	X, line 5	ŀ	4		· · · · · ·
	Itiply line 4 by line 3						
5 Mul	nuply line 4 by line 3				5		
		come (1% of Part I, line 27b)			5 6		
6 Ent	ter 1% of net investment inc						
6 Ent	ter 1% of net investment inc	come (1% of Part I, line 27b)			7		
6 Ent 7 Add 8 Ent	ter 1% of net investment inc d lines 5 and 6 ter qualifying distributions fr	come (1% of Part I, line 27b)	line 1b, and complete that	part using	6 7 8	6 tax rate See t	the

Form 990-PF (2009) ARLAN J VAN WYK FAMILY		<u> 1484434</u>			Page 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 494	8 – see	the instru	ctions)		
1 a Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.	7				
Date of ruling or determination letter: (attach copy of letter if necessary - see instr.)					
b Domestic foundations that meet the section 4940(e) requirements in Part V,	-	1			15.
check here ► and enter 1% of Part I, line 27b.	1			· ·	
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)	ال	.	•	•	- '
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable					
foundations only Others enter -0-)		2			0.
3 Add lines 1 and 2 .		3			15.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter	r -0-)	4			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5			15.
6 Credits/Payments.				,	
a 2009 estimated tax pmts and 2008 overpayment credited to 2009	829.			· &	
b Exempt foreign organizations — tax withheld at source 6b				_	
c Tax paid with application for extension of time to file (Form 8868).					٠ ١
d Backup withholding erroneously withheld					
7 Total credits and payments Add lines 6a through 6d		7			<u>829.</u>
8 Enter any penalty for underpayment of estimated tax. Check here. If Form 2220 is attached		8			
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed .	>	9			0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.	>	10		- 1	<u>814.</u>
11 Enter the amount of line 10 to be. Credited to 2010 estimated tax 50. Refunded		11			764 <u>.</u>
Part VII-A Statements Regarding Activities					
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or	dıd ıt		<u> </u>	Yes	No
participate or intervene in any political campaign?			1 a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?			1 в		X
If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any mate	ariale ni	ihlished			
or distributed by the foundation in connection with the activities.	zilais pu	ibiisiieu			لينإ
c Did the foundation file Form 1120-POL for this year?			1 c		X
d 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			
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax in	nposed		+		
foundation managers. >\$ 0.					
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
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	article	c			
of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the cha	nges		3	L	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		Х
b If 'Yes,' has it filed a tax return on Form 990-T for this year?			4b	N	/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		Х
If 'Yes,' attach the statement required by General Instruction T.					
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			-	٠.	
 ■ By language in the governing instrument, or 			ŀ		
 By state legislation that effectively amends the governing instrument so that no mandatory direction 	s that c	onflict	J	ــئــئــ	
with the state law remain in the governing instrument?	o that o		6	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV			7	Х	<u> </u>
8a Enter the states to which the foundation reports or with which it is registered (see the instructions) IA	-	<u> </u>		ĺ	
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>			8 b	X	ļ
	163.605	- 40404545	\vdash		\vdash
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942 for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,'	complet	e Part XIV	9		Х
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing					
and addresses			10		(2000)
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Part VII-B Statements Regarding Activit		n 4720 May Be Req	uired (co	ntınued)	
5a During the year did the foundation pay or incu(1) Carry on propaganda, or otherwise attempt	=	on (section 4945(e))?		Yes X]No
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	[_	No No		
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	L	Yes X	No
(4) Provide a grant to an organization other to in section 509(a)(1), (2), or (3), or section			. [Yes X]No
(5) Provide for any purpose other than religio educational purposes, or for the prevention	us, charitable, scientific in of cruelty to children	c, literary, or or animals?		Yes X] No
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53.4945 or ir (see instructions)?	the transactions fail to a current notice regar	qualify under the excep ding disaster assistance	tions		5b N/A
Organizations relying on a current notice rega	rding disaster assistan	ce check here		. ▶	
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	sibility for the grant?		N/A [Yes [] No
If 'Yes,' attach the statement required by Reg	ulations section 53 494	5-5(d).			
6a Did the foundation, during the year, receive at on a personal benefit contract?			. [No No
b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870.	iums, directly or indirec	tly, on a personal bene	fit contract:	•	6b X
7a At any time during the tax year, was the found	dation a party to a proh	ubited tax shelter transa	action? [Yes X	No S
b If yes, did the foundation receive any proceed			<u></u>		7b N/A
Part VIII Information About Officers, D				nly Paid I	Employees,
and Contractors			····etions\		
1 List all officers, directors, trustees, foundation	(b) Title and average			butions to	(e) Expense account,
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employe plans and	e benefit d deferred nsation	other allowances
ARLAN J VAN WYK	PRESIDENT	0.		0.	0.
2814 MEADOW PARK AVENUE HENDERSON, NV 89052	1.00				
DARLA ARENDS	TREASURER	0.		0.	0.
PO BOX 389	2.00				
SHELDON, IA 51201	22222				
DAVE VAN WYK PO BOX 389	DIRECTOR 1.00	0.		0.	0.
SHELDON, IA 51201			<u> </u>		
2 Compensation of five highest-paid employee	s (other than those in	l cluded on line 1 – see ir	<u>i</u> nstructions). If none. e	enter 'NONE.'
(a) Name and address of each employee	(b) Title and average	(c) Compensation	1	butions to	(e) Expense account,
paid more than \$50,000	hours per week devoted to position		plans and	e benefit d deferred nsation	other allowances
NONE				 -	
	<u> </u>				
				<u></u>	
T A1	<u></u>		L		
Total number of other employees paid over \$50,000	TEEA0306L (07/06/09			Form 990-PF (2009)
	,00000				, ,

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Form **990-PF** (2009)

3 Five highest-paid independent contractors for professional services — (see insenter 'NONE.'	tructions). If none,	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	· · · · · · · · · · · · · · · · · · ·	
	<u></u>	
Total number of others receiving over \$50,000 for professional services	•	
Partix-A Summary of Direct Charitable Activities		
ust the foundation's four largest direct charitable activities during the tax year. Include relevant statistical info organizations and other beneficiaries served, conferences convened, research papers produced, etc.	ormation such as the number of	Expenses
		Expenses
1 <u>N/A</u>	·	
2		
2		
3		
4		
		
RanklX:B: Summary of Program-Related Investments (see instruction		
Describe the two largest program-related investments made by the foundation during	the tax year on lines 1 and 2	Amount
1 <u>N/A</u>		
2		
All other program related investments. See instructions		
All other program-related investments See instructions.		

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Form 990-PF (2009) ARLAN J VAN WYK r'AMILY	42-1484434 Page
Part X Minimum Investment Return (All domestic foundations must complete this see instructions.)	is part. Foreign foundations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purpo a Average monthly fair market value of securities	oses:
b Average of monthly cash balances .	1b 48,167
c Fair market value of all other assets (see instructions)	. 1c
d Total (add lines 1a, b, and c)	1d 48,167
e 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 0
3 Subtract line 2 from line 1d .	3 48,167
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4 723
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line	4 5 47,444
6 Minimum investment return. Enter 5% of line 5	6 2,372
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) privand certain foreign organizations check here ► □ and do not comple	
1 Minimum investment return from Part X, line 6	. 1 2,372
2a Tax on investment income for 2009 from Part VI, line 5	15. 缓慢
b Income tax for 2009. (This does not include the tax from Part VI)	ुँ हैं हैं
c Add lines 2a and 2b	2c 15
3 Distributable amount before adjustments Subtract line 2c from line 1	3 2,357
4 Recoveries of amounts treated as qualifying distributions	4
5 Add lines 3 and 4	5 2,357
6 Deduction from distributable amount (see instructions)	6
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7 2,357
Part XII Qualifying Distributions (see Instructions)	
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26.	149,600
• • • • • • • • • • • • • • • • • • • •	1b
 b Program-related investments — total from Part IX-B. 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purp 	
	in the second se
3 Amounts set aside for specific charitable projects that satisfy the: a 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 4 149,600
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment incored Enter 1% of Part I, line 27b (see instructions)	5
6 Adjusted qualifying distributions. Subtract line 5 from line 4 .	6 149,600
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calc qualifies for the section 4940(e) reduction of tax in those years	ulating whether the foundation

Form 990-PF (2009)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
Distributable amount for 2009 from Part XI, line 7				2,357.
2 Undistributed income, if any, as of the end of 2009				2,337.
a Enter amount for 2008 only			0.	
b Total for prior years: 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2009.				
a From 2004 . 42,676. b From 2005 324,387.				
7 0005	Ť	, ·		
d From 2006 447,097.	,			
e From 2008 . 201, 457.				
f Total of lines 3a through e.	2,184,300.			{
4 Qualifying distributions for 2009 from Part				
XII, line 4 ► \$149,600.				
a Applied to 2008, but not more than line 2a			0.	
 Applied to undistributed income of prior years (Election required — see instructions) 		0.		
c Treated as distributions out of corpus (Election required — see instructions)	0.			
d Applied to 2009 distributable amount			1	2,357.
e Remaining amount distributed out of corpus	147,243.			
5 Excess distributions carryover applied to 2009	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
same amount must be shown in column (a) y				
6 Enter the net total of each column as				
indicated below:	2,331,543.			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	2,331,343.		-	
b Prior years' undistributed income Subtract line 4b from line 2b		_ 0.		
c Enter the amount of prior years' undistribut- ed income for which a notice of deficiency				
has been issued, or on which the section		_		
4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount — see instructions.		0.	•	
e Undistributed income for 2008. Subtract line 4a from			0	
line 2a. Taxable amount — see instructions .			0.	
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1. This amount must be		,		
distributed in 2010				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
·	<u> </u>			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	42,676.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	2,288,867.			
10 Analysis of line 9				
a Excess from 2005 324, 387.				
b Excess from 2006 447, 097.				,
c Excess from 2007 1,168,683.		1		
d Excess from 2008 . 201, 457 . e Excess from 2009 147, 243 .	1			
e Excess from 2009 147, 243.		L	<u> </u>	

Form 990-PF (2009) ARLAN J VAN WYK				42-1484434			
Part.XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A							
1a If the foundation has received a ruling or of is effective for 2009, enter the date of the	letermination lette ruling	er that it is a private	operating foundation	n, and the ruling			
b Check box to indicate whether the foundat	ion is a private op	erating foundation of	described in section	4942(j)(3) or	4942(j)(5)		
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years				
income from Part I or the minimum investment return from Part X for each year listed	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total		
b 85% of line 2a							
 Qualifying distributions from Part XII, line 4 for each year listed 							
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 Information assets at any time during the	(Complete this e vear – see i	s part only if the nstructions.)	organization ha	nd \$5,000 or mor	e in		
1 Information Regarding Foundation Manag							
a List any managers of the foundation who he close of any tax year (but only if they have ARLAN J VAN WYK	nave contributed n contributed more	nore than 2% of the than \$5,000) (See	total contributions resection 507(d)(2))	eceived by the found	dation before the		
b List any managers of the foundation who ca partnership or other entity) of which the NONE	own 10% or more foundation has a	of the stock of a cor 10% or greater inter	poration (or an equiest.	ally large portion of	the ownership of		
				···			
2 Information Regarding Contribution, Gran		-					
Check here \(\begin{align*}							
a The name, address, and telephone number	r of the person to	whom applications	should be addressed	d:			
	·						
b The form in which applications should be s	submitted and info	ormation and materia	als they should inclu	de:			
c Any submission deadlines							
d Any restrictions or limitations on awards, s	such as by geogra	phical areas, charita	able fields, kinds of	nstitutions, or other	factors:		

Recipient Name and address (home or business) a Paid during the year Total Approved for future payment	3 Grants and Contributions Paid During the Year or Approved for Future Payment								
a Paid during the year	Recipient	If recipient is an individual, show any relationship to any foundation manager or	Foundation status of		Amount				
Total ► 3a		substantial contributor	, ocipient						
		substantial contributor	recipient						
				<u> </u>					
	Total			► 3a					
Total . ▶ 3b				► 3b					

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.		Unrelate	ed business income	Excluded	by section 512, 513, or 514		
	_	am service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (see the instructions)
a							· · · · · · · · · · · · · · · · · · ·
b							
c d							
e f					 -		
	Fees	and contracts from government agencies					
-		pership dues and assessments					
		t on savings and temporary cash investments			14	745.	
4		ends and interest from securities				745.	·
-		ental income or (loss) from real estate:	, ,				
		financed property					
		ebt-financed property					
6		ital income or (loss) from personal property					
7		investment income					· · · · · · · · · · · · · · · · · · ·
8		(loss) from sales of assets other than inventory					
9		come or (loss) from special events					
10		profit or (loss) from sales of inventory					
11		revenue:					
							<u> </u>
h							
c			· -				
d				· · · · · · · · · · · · · · · · · · ·		· -	
e		, "				*	
		tal. Add columns (b), (d), and (e)				745.	
		Add line 12, columns (b), (d), and (e)	L	·		13	745.
		heet in the instructions for line 13 to verify ca	lculations)				
				! - ! - 	A D		
Pan	XVI-	B. Relationship of Activities to the	Accomp	isnment of Exemp	t Purpo)Ses 	
Lin	e No.	Explain below how each activity for which in accomplishment of the foundation's exempt	come is rep	orted in column (e) of F	art XVI-	A contributed important	ly to the
	▼	accomplishment of the foundation's exempt	purposes (o	ther than by providing f	unds for	such purposes). (See t	he instructions)
N	/A						
			_				
				· · · · · · · · · · · · · · · · · · ·			
			_				
							
		· · · · · · · · · · · · · · · · · · ·					
							
	-			· · · · · · · · · · · · · · · · · · ·	_		
					_		
			·		.		
	_				·		
	-						 -
				· · · · · · · · · · · · · · · · · · ·			
	_						
BAA		<u> </u>		A05001 07/05/00		<u>.</u>	Form 990-PF (2009)
BAA			IEE	A0502L 07/06/09			1 01111 330 FF (4003)

Form 990-PF (2009) ARLAN J VAN WYK FAMILY 42-1484434 Part XVII - Information Regarding Transfers To and Transactions and Relationships With Noncharitable

Exempt Organizations							
Did the organization directly or indirectly described in section 501(c) of the Code (crelating to political organizations?	engage in any of the following wit other than section 501(c)(3) organ	h any other organizatio izations) or in section s	n 527,	Yes	s No		
a Transfers from the reporting foundation to a noncharitable exempt organization of							
(1) Cash .				1a (1)	X		
(2) Other assets				1a (2)	X		
b Other transactions:					1 ×=		
(1) Sales of assets to a noncharitable ex-	empt organization			16(1)	Х		
(2) Purchases of assets from a noncharit	able exempt organization		•	1 b (2)	X		
(3) Rental of facilities, equipment, or other	er assets		•	1b (3)	X		
(4) Reimbursement arrangements				1b (4)	X		
(5) Loans or loan guarantees				1 b (5)	X		
(6) Performance of services or membersl	nip or fundraising solicitations			1 b (6)	X		
c Sharing of facilities, equipment, mailing li	sts, other assets, or paid employe	ees		1c	X		
d If the answer to any of the above is 'Yes, the goods, other assets, or services given any transaction or sharing arrangement, s	i by the reporting foundation. If th	e foundation received I	ess than fair marke	et value in	f		
<u> </u>	of noncharitable exempt organization	(d) Description of tran	sfers, transactions, and	sharing arrangem	ents		
N/A							
		-					
				 ,			
		-					
				 .			
							
	- 			 _			
		<u></u>	 	·			
	· · · · · · · · · · · · · · · · · · ·						
							
				 -			
							
			·				
 2a Is the foundation directly or indirectly affil described in section 501(c) of the Code (c) b If 'Yes,' complete the following schedule. 	liated with, or related to, one or mother than section 501(c)(3)) or in	nore tax-exempt organi section 527?	zations	Yes [X No		
(a) Name of organization	(b) Type of organization	(0) Description of rel	ationship			
N/A							
	<u> </u>						
Under penalties of perjury, I declare that I have examined to complete Declaration of preparer (other than taxpayer or fi	his return, including accompanying schedule: iduciary) is based on all information of which	s and statements, and to the be preparer has any knowledge			rect, and		
s Day a Wend	·	11/12/10	► TREASURER	<u> </u>			
G Signature of officer or trustee		Date	Title				
Preparer's signature		Date 3.23-10	Check if Self-employed X X N/	arer's identifying n Signature in the i	umber nstrs)		
E parer's Firm's name (or WINTHER, STA)	VE & CO., LLP		EIN N/A				
Use yours if self employed). > 1316 W 18TH				-			
	51301-0175		Phone no ► (71	.2) 262-3	117		
BAA		<u> </u>	<u>-</u>	Form 990-P	F (2009)		

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

Maine of the organization ARLAN J VAI	N WYK FAMILY	Employer identification number
FOUNDATION		42-1484434
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	1
	4947(a)(1) nonexempt charitable trust not t	reated as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treate	ed as a private foundation
	501(c)(3) taxable private foundation	
	d by the General Rule or a Special Rule or (10) organization can check boxes for both the General F	Rule and a Special Rule. See instructions.
General Rule —		
X For an organization filing Form 9 contributor (Complete Parts I and	990, 990-EZ, or 990-PF that received, during the year, $5,00$ d II.)	00 or more (in money or property) from any one
Special Rules -		
509(a)(1)/170(b)(1)(A)(vi) and receiv	tion filing Form 990 or 990-EZ, that met the 33-1/3% supported from any one contributor, during the year, a contribution of the II, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and	greater of (1) \$5,000 or (2) 2% of the
aggregate contributions of more	10) organization filing Form 990 or 990-EZ, that received fro than \$1,000 for use exclusively for religious, charitable, sci or animals Complete Parts I, II, and III.	om any one contributor, during the year, lentific, literary, or educational purposes, or the
contributions for use exclusively this box is checked, enter here to	10) organization filing Form 990 or 990-EZ, that received from the for religious, charitable, etc., purposes, but these contributions that were received during the year for the parts unless the General Rule applies to this organizar	ons did not aggregate to more than \$1,000. If ran exclusively religious, charitable, etc.
	utions of \$5,000 or more during the year.	► \$
990-PF) but it must answer 'No' on I	covered by the General Rule and/or the Special Rules does Part IV, line 2 of their Form 990, or check the box on line Heet the filing requirements of Schedule B (Form 990, 990-E.	I of its Form 990-EZ, or on line 2 of its Form
BAA For Privacy Act and Paperwo for Form 990, 990EZ, or 990-PF.	rk Reduction Act Notice, see the Instructions	Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)	_ Pa	ige 1	of 1	of Part
lame of organization	"	Employe	er identification number	

ARLAN	J VAN WYK FAMILY		<u> </u>
Partl	Contributors (see instructions)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ARLAN J VAN WYK 2814 MEADOW PARK AVENUE HENDERSON, NV 89052	\$150,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	DAVE & GINA VAN WYK 720 23RD AVE SHELDON, IA 51201	\$10,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(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) Number	(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) Number	(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) Number	(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)

No. from Part I	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
	N/A		
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	<u> </u>		
		\$	
			4.5
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-			
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
			1
		\$	

BAA

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2009)

	3 (Form 990, 990-EZ, or 990-PF) (2009)		Page 1	of 1 of Part	Ш		
Name of organ	nization J VAN WYK FAMILY			Employer identification number 42-1484434			
	Exclusively religious, charitable, e	 tc. individual contribution	s to section 501(c		—		
	organizations aggregating more th	an \$1,000 for the year.(Co	mplete cols (a) through	(e) and the following line entr	у)		
	For organizations completing Part III, enter contributions of \$1,000 or less for the year.		arıtable, etc, see ınstructions)	►\$ N	/ <u>A</u>		
(a) No. from	(b)	(c)	D	(d)			
Part I	Purpose of gift	Use of gift	Des	cription of how gift is held			
	N/A						
					—		
		(e)					
	Transferee's name, addres	Transfer of gift s, and ZIP + 4	Relationship of	f transferor to transferee			
		<u> </u>					
					—		
(a)	(b)	(c)		(d)			
No. from Part I	Purpose of gift	Use of gift	Des	cription of how gift is held			
		······································					
		(e)					
	Transfer of gift Transferee's name, address, and ZIP + 4 Rela		Relationship o	lationship of transferor to transferee			
	Transieree's maine, address						
(a)	(b)	(c)		(d)			
No. from Part I	Purpose of gift	Use of gift	Des	cription of how gift is held			
<u> </u>		·					
	_			<u></u>			
		(e)					
	Transfer of gift		Dalatianahin a	f transferor to transferee			
	ransteree's name, addres	s, and ZIF + 4	Relationship o	i transferor to transferee			
				<u> </u>			
(a)	(b)	(c)		(d)			
No. from	Purpose of gift	Use of gift	Des	cription of how gift is held			
Part I							
							
		(5)			_		
	(e) Transfer of gift						
	Transferee's name, addres		Relationship o	f transferor to transferee			

2009

FIEDERAL STATEMENTS

ABCAN O WANTWAK SAMILY FOUNDATION

विधानिभी १२२०५

102 1/11. VIVIEVA

STATEMENT 1 FORM 990-PF, PART I, LINE 16B **ACCOUNTING FEES**

> (A) EXPENSES

(B) NET INVESTMENT

(C) ADJUSTED

(D) CHARITABLE PER BOOKS INCOME NET INCOME PURPOSES

0.

ACCOUNTING

47<u>5 .</u> TOTAL \$

475. \$ 0. \$ 0. \$

\$

STATEMENT 2 FORM 990-PF, PART I, LINE 25 **CONTRIBUTIONS, GIFTS, AND GRANTS**

CASH GRANTS AND ALLOCATIONS

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

DONEE'S NAME:

DONEE'S ADDRESS:

AMOUNT GIVEN:

CLASS OF ACTIVITY:

ASSISTING THE DISABLED HOPE HAVEN PO BOX 1098

ROCK VALLEY, IA 51247

NONE

501 (C) (3)

AMOUNT GIVEN:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

TRUCKSTOP CHAPEL MINISTRY

TRANSPORT FOR CHRIST

PO BOX 303

SCHOLARSHIP AND EQUIPMENT

NCC FOUNDATION 603 WEST PARK STREET SHELDON, IA 51201

NONE

501 (C) (3)

SPONSORSHIP OF CHILDREN

MISSION TO HAITI PO BOX 523157 MIAMI, FL 33152

NONE

501 (C) (3)

ASSISTING THE DISABLED

VILLAGE NORTHWEST UNLIMITED

330 VILLAGE CIRCLE SHELDON, IA 51201

NONE

501 (C) (3)

5,400.

11,500.

3,600.

SPONSOR RELAY FOR LIFE

AMERICAN CANCER ASSOCIATION-MIDWEST DIV

1138 PARSONS ROAD SALISBURY, MD 21801

NONE

501 (C) (3)

1,000.

10,000.

200S

FEDERAL STATEMENTS

WARLAND I NAV KAY ENMLY FOUNDATION.

(CLEME 2205

102 THE VIVIEW

5,000.

25,000.

100.

20,000.

5,000.

500.

500.

STATEMENT 2 (CONTINUED) FORM 990-PF, PART I, LINE 25 **CONTRIBUTIONS, GIFTS, AND GRANTS**

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: 501(C)(3)

AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: 501(C)(3)

AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: RELIGIOUS ORGANIZATION

AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
501 (C) (3)

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

DENVER, PA 17517

NONE

YOUTH MINISTRY OUTREACH

RISE MINISTRIES 1190 KAHLER COURT SHELDON, IA 51201

CATHOLIC GRADE SCHOOL ST PATRICKS SCHOOL

310 10TH STREET SHELDON, IA 51201 NONE

CHRISTIAN COLLEGE NORTHWESTERN COLLEGE

PO BOX 1996

ORANGE CITY, IA 51041

NONE

ORGANIZATIONAL STATUS OF DONEE: 501(C)(3)

FAMILY SUPPORT

IOWA FAMILY POLICY CENTER 1100 NORTH HICKORY, SUITE 105 PLEASANT HILL, IA 50324

ADOPTION, FOSTER CARE... BETHANY CHRISTIAN SERVICE

123 ALBANY AVE SE ORANGE CITY, IA 51041

NONE

HOME FOR PREGNANT TEENS

CHERISH HOUSE PO BOX 1003

OKOBOJI, IA 51355

NONE

501 (C) (3)

MISSIONARIES TO HAITI

HAITIAN AMERICAN FRIENDSHIP

PO BOX 3421

FORT MYERS, FL 33918

2009

FEDERAL STATEMENTS

WARDAY D WAY WAY FAMILY 13(0)(1)(0)(1)(0)(1)

A DE WALLEY

4,000.

15,000.

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GLENT 2205

STATEMENT 2 (CONTINUED) FORM 990-PF, PART I, LINE 25 **CONTRIBUTIONS, GIFTS, AND GRANTS**

RELATIONSHIP OF DONEE: NONE ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)

AMOUNT GIVEN:

HELP CHILD LITERACY MISSION TO INDIA PO BOX 141312 GRAND RAPIDS, MI 49514

NONE

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: PUBLIC CHARITY AMOUNT GIVEN:

CLASS OF ACTIVITY:

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S NAME: DONEE'S ADDRESS:

FAMS. OF DISABLED CHILD

AVERY FUND

627 2ND AVE SHELDON, IA 51201

NONE

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: PUBLIC CHARITY

AMOUNT GIVEN:

20,000.

DONEE'S ADDRESS:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

SUPPORT FOR MISSIONARY

CAMBODIAN GENERATIONS FOR CHRIST

CAMBUDIAN GL.... 862 W SCHLINGER AVE WT 53214 MILWAUKEE, WI 53214

NONE

RELATIONSHIP OF DONEE:

AMOUNT GIVEN:

ORGANIZATIONAL STATUS OF DONEE: RELIGIOUS ORGANIZATION

1,000.

2,500.

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

EMERGENCY SHELTER FAMILY CRISIS CENTER

P O BOX 1003

SIOUX CENTER, IA 51250

RELATIONSHIP OF DONEE: NONE ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)

CLASS OF ACTIVITY:

RELATIONSHIP OF DONEE:

DONEE'S NAME:

AMOUNT GIVEN:

DONEE'S ADDRESS:

FOSTER GRANDPARENTS 1510 14TH ST

ROCK VALLEY, IA 51247

SPONSORSHIP OF FR CONCERT

NONE

ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)

500.

CLASS OF ACTIVITY:

DONEE'S NAME:

AMOUNT GIVEN:

DONEE'S ADDRESS:

GLOBAL EVANGELISM GLOBAL EVANGELICAL TEAM

P O BOX 702411 TULSA, OK 74170 NONE

ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)

10,000.

CLASS OF ACTIVITY:

AMOUNT GIVEN:

DONEE'S NAME: DONEE'S ADDRESS:

RESEARCH AND SUPPORT

LEUKEMIA & LYMPHOMA SOCIETY - IA CHAPTER

8033 UNIVERSITY BLVD, SUITE A

DES MOINES, IA 50325

RELATIONSHIP OF DONEE:

RELATIONSHIP OF DONEE:

NONE

2009

FEDERAL STATEMENTS WINDAY DAWN LAWEN

GLENT 2205

KOLYOLIGE

162 VICTORION

STATEMENT 2 (CONTINUED) FORM 990-PF, PART I, LINE 25 **CONTRIBUTIONS, GIFTS, AND GRANTS**

ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)

AMOUNT GIVEN:

500.

\$

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

CHILD CARE

SHELDON COMMUNITY DAYCARE

1221 E 6TH STREET SHELDON, IA 51201

NONE

501 (C) (3)

1,000.

RELATIONSHIP OF DONEE:

CLASS OF ACTIVITY: DONEE'S NAME:

AMOUNT GIVEN:

DONEE'S ADDRESS:

BIBLE LEAGUE SPONSOR STEVE GREEN MINISTRIES

P O BOX 1646

FRANKLIN, TN 37065

NONE

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

7,500.

TOTAL \$ 149,600.