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## Return of Private Foundation

OMB No 1545-0052

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

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 JUL 1, 2009, and ending JUN 30, 2010

G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity ☐ Final return  
☐ Amended return ☐ Address change ☐ Name changeUse the IRS  
label.  
Otherwise,  
print  
or type.  
See Specific  
Instructions.

Name of foundation

P L &amp; STEPHEN L WEST FAMILY FOUNDATION

Number and street (or P O box number if mail is not delivered to street address)

8 STEPHEN L WEST 1212 FIFTH STREET

Room/suite

City or town, state, and ZIP code

CORALVILLE, IA 52241

A Employer identification number

33-1006158

B Telephone number

319-351-2000

C If exemption application is pending, check here ☐D 1. Foreign organizations, check here ☐2. Foreign organizations meeting the 85% test,  
check here and attach computation ☐E If private foundation status was terminated  
under section 507(b)(1)(A), check here ☐F If the foundation is in a 60-month termination  
under section 507(b)(1)(B), check here ☐H Check type of organization: ☒ Section 501(c)(3) exempt private foundation  
☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundationI Fair market value of all assets at end of year  
(from Part II, col. (c), line 16)

\$ 489,312. (Part I, column (d) must be on cash basis.)

J Accounting method: ☒ Cash ☐ Accrual  
☐ Other (specify)

## Part 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(b) Net investment  
income(c) Adjusted net  
income(d) Disbursements  
for charitable purposes  
(cash basis only)

Revenue

1 Contributions, gifts, grants, etc., received

50,000.

N/A

2 Check ☐ if the foundation is not required to attach Sch. B3 Interest on savings and temporary  
cash investments

4 Dividends and interest from securities

11,003.

11,003.

5a Gross rents

b Net rental income or (loss)

6a Net gain or (loss) from sale of assets not on line 10

8,622.

b Gross sales price for all  
assets on line 6a

171,743.

7 Capital gain net income (from Part IV, line 2)

8,622.

8 Net short-term capital gain

9 Income modifications

10a Gross sales less returns  
and allowances

b Less Cost of goods sold

c Gross profit or (loss)

11 Other income

12 Total. Add lines 1 through 11

69,625.

19,625.

13 Compensation of officers, directors, trustees, etc

0.

0.

0.

14 Other employee salaries and wages

15 Pension plans, employee benefits

16a Legal fees

b Accounting fees

STMT 1

1,235.

618.

617.

c Other professional fees

STMT 2

3,670.

3,670.

0.

17 Interest

18 Taxes

19 Depreciation and depletion

20 Occupancy

21 Travel, conferences, and meetings

22 Printing and publications

23 Other expenses

24 Total operating and administrative  
expenses. Add lines 13 through 23

4,905.

4,288.

617.

25 Contributions, gifts, grants paid

8,514.

8,514.

26 Total expenses and disbursements.  
Add lines 24 and 25

13,419.

4,288.

9,131.

27 Subtract line 26 from line 12:

a Excess of revenue over expenses and disbursements

56,206.

b Net investment income (if negative, enter -0-)

15,337.

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

N/A

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**Part II Balance Sheets**

Attached schedules and amounts in the description column should be for end-of-year amounts only

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	1 Cash - non-interest-bearing	<3,280.>	27,564.	27,564.
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	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 ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
<b>Liabilities</b>	11 Investments - land, buildings, and equipment basis ▶			
	Less accumulated depreciation ▶			
	12 Investments - mortgage loans			
	13 Investments - other STMT 3	408,181.	461,748.	461,748.
	14 Land, buildings, and equipment: basis ▶			
	Less accumulated depreciation ▶			
	15 Other assets (describe ▶)			
	16 Total assets (to be completed by all filers)	404,901.	489,312.	489,312.
	17 Accounts payable and accrued expenses			
	18 Grants payable			
<b>Net Assets or Fund Balances</b>	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶)			
	23 Total liabilities (add lines 17 through 22)	0.	0.	
<b>Net Assets or Fund Balances</b>	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/>			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/>			
	27 Capital stock, trust principal, or current funds	0.	0.	
	28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
	29 Retained earnings, accumulated income, endowment, or other funds	404,901.	489,312.	
30 Total net assets or fund balances	404,901.	489,312.		
31 Total liabilities and net assets/fund balances	404,901.	489,312.		

**Part III Analysis of Changes in Net Assets or Fund Balances**

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	404,901.
2 Enter amount from Part I, line 27a	2	56,206.
3 Other increases not included in line 2 (itemize) ▶ UNREALIZED LOSS ON INVESTMENTS	3	28,205.
4 Add lines 1, 2, and 3	4	489,312.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	489,312.

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a ST SECURITIES (SEE ATTACHED)	P	VARIOUS	VARIOUS
b LT SECURITIES (SEE ATTACHED)	P	VARIOUS	VARIOUS
c LT CAPITAL GAIN DISTRIBUTIONS	P	VARIOUS	VARIOUS
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 32,686.		29,362.	3,324.
b 138,777.		133,759.	5,018.
c 280.			280.
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			3,324.
b			5,018.
c			280.
d			
e			

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 }	2	8,622.
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). If (loss), enter -0- in Part I, line 8	}	3	N/A

**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 ☐ No

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 instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2008			
2007			
2006			
2005			
2004			

2 Total of line 1, column (d)	2
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4
5 Multiply line 4 by line 3	5
6 Enter 1% of net investment income (1% of Part I, line 27b)	6
7 Add lines 5 and 6	7
8 Enter qualifying distributions from Part XII, line 4	8

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)		1	307.
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% 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	0.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		3	307.
3 Add lines 1 and 2		4	0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		5	307.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			
6 Credits/Payments:			
a 2009 estimated tax payments and 2008 overpayment credited to 2009	6a	105.	
b Exempt foreign organizations - tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7	105.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> 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	202.	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		
11 Enter the amount of line 10 to be: Credited to 2010 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11		

**Part VII-A Statements Regarding Activities**

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see 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.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input type="checkbox"/> \$ 0. (2) On foundation managers. <input type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ 0.		
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.		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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		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 conflict with the state law remain in the governing instrument?	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.	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> IA		
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 General Instruction G? If "No," attach explanation	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 year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

**Part 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 instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>N/A</u>	13	X	
14	The books are in care of ► <u>STEPHEN L WEST</u> Telephone no. ► <u>319-351-2000</u> Located at ► <u>1212 FIFTH STREET, CORALVILLE, IA</u> ZIP+4 ► <u>52241</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year	15		N/A

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
<b>1a</b> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(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.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b> If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? <u>N/A</u> Organizations relying on a current notice regarding disaster assistance check here ► <input type="checkbox"/>	1b	
<b>c</b> 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
<b>2</b> 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)):		
<b>a</b> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► _____		
<b>b</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) to all years listed, answer "No" and attach statement - see instructions.) <u>N/A</u>	2b	
<b>c</b> If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ► _____		
<b>3a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b> If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or 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 foundation had excess business holdings in 2009) <u>N/A</u>	3b	
<b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
<b>b</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	X

Form 990-PF (2009)

**Part VII-B** Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda; or otherwise attempt to influence legislation (section 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?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(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)?

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, 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 transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

N/A

5b

Organizations relying on a current notice regarding disaster assistance check here

☒

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

X

If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ANDREW S WEST 1212 FIFTH STREET CORALVILLE, IA 52241	DIRECTOR 1.00	0.	0.	0.
STEPHEN L WEST 1212 FIFTH STREET CORALVILLE, IA 52241	PRESIDENT 1.00	0.	0.	0.
ROBIN WALENTA 1212 FIFTH STREET CORALVILLE, IA 52241	DIRECTOR 1.00	0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

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

Total number of other employees paid over \$50,000

0

Form 990-PF (2009)

**Part VIII****Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** (continued)**3** Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services

0

**Part IX-A****Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 NOT APPLICABLE	
	0.
2	
3	
4	

**Part IX-B****Summary of Program-Related Investments**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	0.

Form 990-PF (2009)



**Part 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:		
a	Average monthly fair market value of securities	1a	462,243.
b	Average of monthly cash balances	1b	
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	462,243.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	462,243.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	6,934.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	455,309.
6	Minimum investment return. Enter 5% of line 5	6	22,765.

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	22,765.
2a	Tax on investment income for 2009 from Part VI, line 5	2a	307.
b	Income tax for 2009. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	307.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	22,458.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	22,458.
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	22,458.

**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	1a	9,131.
b	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:		
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	9,131.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	9,131.

**Note.** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 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
<b>1</b> Distributable amount for 2009 from Part XI, line 7				22,458.
<b>2</b> Undistributed income, if any, as of the end of 2009				
<b>a</b> Enter amount for 2008 only			0.	
<b>b</b> Total for prior years:		0.		
<b>3</b> Excess distributions carryover, if any, to 2009:				
<b>a</b> From 2004				
<b>b</b> From 2005	5,514.			
<b>c</b> From 2006	14,411.			
<b>d</b> From 2007	11,247.			
<b>e</b> From 2008	13,820.			
<b>f</b> Total of lines 3a through e	44,992.			
<b>4</b> Qualifying distributions for 2009 from Part XII, line 4: ▶ \$ 9,131.				
<b>a</b> Applied to 2008, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior years (Election required - see instructions)		0.		
<b>c</b> Treated as distributions out of corpus (Election required - see instructions)	0.			
<b>d</b> Applied to 2009 distributable amount				9,131.
<b>e</b> Remaining amount distributed out of corpus	0.			
<b>5</b> Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	13,327.			13,327.
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	31,665.			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b		0.		
<b>c</b> 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 assessed		0.		
<b>d</b> Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
<b>e</b> Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
<b>f</b> Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010				0.
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
<b>8</b> Excess distributions carryover from 2004 not applied on line 5 or line 7	0.			
<b>9</b> Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	31,665.			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2005				
<b>b</b> Excess from 2006	6,598.			
<b>c</b> Excess from 2007	11,247.			
<b>d</b> Excess from 2008	13,820.			
<b>e</b> Excess from 2009				

N/A

- 1 a** 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

- b**
- Check box to indicate whether the foundation is a private operating foundation described in section
- ☐
- 4942(j)(3) or
- ☐
- 4942(j)(5)

- 2 a** Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed
- b** 85% of line 2a
- c** 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)(ii)
    - (3) Largest amount of support from an exempt organization
    - (4) Gross investment income

[illegible]

**Part XV** **Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see the instructions.)**

### 1 Information Regarding Foundation Managers:

- a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

STEPHEN L WEST

- b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

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 instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

- a The name, address, and telephone number of the person to whom applications should be addressed:**

N/A

- b The form in which applications should be submitted and information and materials they should include:**

N/A

- c Any submission deadlines:**

N/A

- d. Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

N/A

**Part XV** Supplementary Information (continued)**3** Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> Paid during the year KRISTINA KOCH	NONE	N/A	MUSIC THERAPY LESSONS	1,189.
NOAH BRENTLINGER	NONE	N/A	MUSIC THERAPY LESSONS	325.
RIVERSIDE THEATRE	NONE	PUBLIC	GENERAL OPERATING FUND	1,000.
MUSIC FOR ALL	NONE	PUBLIC	GENERAL OPERATING FUND	1,000.
UNIVERSITY OF IOWA FOUNDATION	NONE	PUBLIC	GENERAL OPERATING FUND	3,000.
UNIVERSITY OF IOWA	NONE	PUBLIC	6 INDIVIDUALS FOR EDUCATIONAL PERFORMANCES	2,000.
<b>Total</b>			<b>3a</b>	<b>8,514.</b>
<b>b</b> Approved for future payment  NONE				
<b>Total</b>			<b>3b</b>	<b>0.</b>



## Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

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

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) Sales of assets to a noncharitable exempt organization**

1b(1)	X
-------	---

**(2) Purchases of assets from a noncharitable exempt organization**

1b(2)	X
-------	---

(3) Rental of facilities, equipment, or other assets

1b(3)		X
-------	--	---

#### (4) Reimbursement arrangements

1b(4)	X
-------	---

**(5) Loans or loan guarantees**

1b(5)		X
-------	--	---

(6) Performance of services or membership or fundraising solicitations

1b(6)		X
-------	--	---

**c** Sharing of facilities, equipment, mailing lists, other assets, or paid employees

1c		X
----	--	---

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

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

☐ Yes ☒ No

**b** If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.

**Sign Here**

Signature of officer or trustee

Date \_\_\_\_\_

→ **Title**

Preparer's  
signature \_\_\_\_\_

Date
------

☐ Check if self-employed

Preparer's identifying number	
-------------------------------	--

Firm's name (or yours, if self-employed),  
address, and ZIP code

RSM MCGLADREY, INC.

125 S DUBUQUE ST

IOWA CITY, IA 52240-4077

EIN ▶ 41-1944416

Phone no. 319-354-1500

**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

P L &amp; STEPHEN L WEST FAMILY FOUNDATION

33-1006158

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

- ☒ 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 1/3% 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, charitable, 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 during the year. ▶ \$ \_\_\_\_\_

**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).

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions  
for Form 990, 990-EZ, or 990-PF.

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

Name of organization	Employer identification number
P L & STEPHEN L WEST FAMILY FOUNDATION	33-1006158

**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	WEST MUSIC COMPANY, INC 1212 FIFTH STREET CORALVILLE, IA 52241	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)



Name of organization

Employer identification number

P L &amp; STEPHEN L WEST FAMILY FOUNDATION

33-1006158

**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
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Name of organization

Employer identification number

**P L & STEPHEN L WEST FAMILY FOUNDATION****33-1006158****Part III**

Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once. See instructions.) ▶ \$

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
1	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>
	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>
	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>		<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	
<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>		<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	
2	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>
	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>
	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>		<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	
<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>		<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	
3	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>
	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>
	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>		<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	
<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>		<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	
4	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>
	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>
	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>		<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	
<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>		<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>	

FORM 990-PF	ACCOUNTING FEES	STATEMENT	1
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING EXPENSE	1,235.	618.		617.
TO FORM 990-PF, PG 1, LN 16B	1,235.	618.		617.

FORM 990-PF	OTHER PROFESSIONAL FEES	STATEMENT	2
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TRUST FEES	3,670.	3,670.		0.
TO FORM 990-PF, PG 1, LN 16C	3,670.	3,670.		0.

FORM 990-PF	OTHER INVESTMENTS	STATEMENT	3
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DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
ISB&T TRUST ACCOUNT-MUTUAL FUNDS	FMV	461,748.	461,748.
TOTAL TO FORM 990-PF, PART II, LINE 13		461,748.	461,748.

PREPARED FOR ACCOUNT # 23 00 9323 0 03 - STEPHEN L & P L WEST FAMILY CHARITABLE TRUST  
PROCESS DATE 10/20/2010

## TAX LEDGER

ACCOUNT SITUUS = IA  
TAX ID# = 331006158  
STATE TAX ID# =

PAGE 1  
ACCOUNT SITUUS = IA  
TAX ID# = 331006158  
STATE TAX ID# =

FOR THE PERIOD 07/01/2009 TO 06/30/2010

## SECTION A - CAPITAL GAINS &amp; LOSSES

## SHORT TERM SALES &amp; MATURITIES

SHARES/PAR	SECURITY	REG	ACQUIRED	SOLD	CAPITAL PROCEEDS TO INCOME CASH PRINCIPAL CASH	COST BASIS	SHORT TERM GAIN OR LOSS
24.7930	AMERICAN MUT FD INC CLASS F2 COM (027681824)	3	01/20/10	04/27/10	598.00	-582.88	15.12
40.1910	ARTISAN SMALL CAP VALUE FUND (04314HS01)	3	07/20/09	08/18/09	506.00	-469.03	36.97
38.1840	ARTISAN SMALL CAP VALUE FUND (04314HS01)	3	07/20/09	10/09/09	530.00	-445.61	84.39
32.2400	ARTISAN SMALL CAP VALUE FUND (04314HS01)	3	07/20/09	01/20/10	472.00	-376.24	95.76
313.4580	BLACKROCK LG CAP VAL (09250J817)	3	10/20/08	07/02/09	3517.00	-3861.80	-344.80*
37.5710	BLACKROCK LG CAP VAL (09250J817)	3	10/20/08	08/18/09	461.00	-462.87	-1.87
157.6980	BLACKROCK LG CAP VAL (09250J817)	3	10/20/08	10/09/09	2110.00	-1942.84	167.16
34.7870	BLACKROCK LG CAP VAL (09250J817)	3	03/25/09	01/20/10	483.19	-367.00	116.19
1170.5620	BLACKROCK LG CAP VAL (09250J817)	3	06/09/09	01/20/10	16259.11	-13719.00	2540.11
101.1840	FEDERATED INSTL TR HI YIELD BD (31420B300)	1	03/25/09	07/02/09	855.00	-735.61	119.39
13.1370	FEDERATED INSTL TR HI YIELD BD (31420B300)	1	03/25/09	08/18/09	116.00	-95.51	20.49
9.0340	FEDERATED INSTL TR HI YIELD BD (31420B300)	1	03/25/09	01/20/10	87.00	-65.68	21.32
474.9570	FEDERATED MDT SER MDT SMLCP VL I (31421R726)	1	03/25/09	07/20/09	3125.21	-2769.00	356.21
380.5560	FEDERATED MDT SER MDT SMLCP VL I (31421R726)	1	06/09/09	07/20/09	2504.06	-2466.00	38.06
43.3780	PUTNAM EQUITY INCOME FD NEW CL Y (746745405)	3	01/20/10	04/27/10	619.00	-606.42	12.58
44.8400	VANGUARD INTERMEDIATE TERM INVESTMENT GRADE FD (922031810)	3	06/09/09	04/27/10	443.92	-396.39	47.53

Total Short Term Gain

32,686.49 29,361.88 3324.61

ACCOUNT SITUS = IA  
 TAX ID# = 331006158  
 STATE TAX ID# =

PROCESS DATE 10/20/2010

FOR THE PERIOD 07/01/2009 TO 06/30/2010

## SECTION A - CAPITAL GAINS &amp; LOSSES

SHARES/PAR	SECURITY	LONG TERM SALES & MATURITIES		CAPITAL PROCEEDS TO		COST BASIS	LONG TERM GAIN OR LOSS
		REG	DATE	ACQUIRED	SOLD		
61.5480	BLACKROCK FDS II	3	06/25/08	07/02/09		978.00	
	SML GRW EQ INS	(091928101)					
19.8940	BLACKROCK FDS II	3	06/25/08	10/09/09		374.00	
	SML GRW EQ INS	(091928101)					
36.2140	BLACKROCK FDS II	3	06/25/08	01/20/10		725.00	
	SML GRW EQ INS	(091928101)					
2956.7110	BLACKROCK LG CAP VAL	3	10/20/08	01/20/10		41068.71	
		(09250J817)					
347.0000	BLACKROCK LG CAP VAL	3	11/07/08	01/20/10		4819.83	
		(09250J817)					
381.2440	BLACKROCK LG CAP VAL	3	12/17/08	01/20/10		5295.48	
		(09250J817)					
36.5920	DODGE & COX INTERNATIONAL FUND	3	12/30/04	07/02/09		917.00	
		(256206103)					
16.9620	DODGE & COX INTERNATIONAL FUND	3	12/30/04	08/18/09		482.91	
		(256206103)					

PREPARED FOR ACCOUNT # 23 00 9323 0 03 - STEPHEN L &amp; P L WEST FAMILY CHARITABLE TRUST

ACCOUNT SITUS = IA

TAX ID# = 331006158

PROCESS DATE 10/20/2010

STATE TAX ID# =

FOR THE PERIOD 07/01/2009 TO 06/30/2010

## SECTION A - CAPITAL GAINS &amp; LOSSES

## LONG TERM SALES &amp; MATURITIES

SHARES/PAR	SECURITY	REG	DATE	ACQUIRED	SOLD	CAPITAL PROCEEDS TO	COST BASIS	LONG TERM
						INCOME CASH PRINCIPAL CASH		GAIN OR LOSS
1.1270	DODGE & COX INTERNATIONAL FUND (256206103)	3	01/24/05	08/18/09	32.09	83.83	-33.81	-1.72
2.6060	DODGE & COX INTERNATIONAL FUND (256206103)	3	01/24/05	10/09/09			-78.19	5.64
34.2610	DODGE & COX INTERNATIONAL FUND (256206103)	3	04/06/05	10/09/09		1102.17	-1068.94	33.23
0.7050	DODGE & COX INTERNATIONAL FUND (256206103)	3	04/06/05	04/27/10		23.00	-22.00	1.00
928.8190	FEDERATED INSTL TR HI YIELD BD (31420B300)	1	03/25/09	04/27/10		9121.00	-6752.51	2368.49
102.5890	FEDERATED MDT SER MDT SMLCP VL I (31421R726)	1	08/18/06	07/02/09		634.00	-1107.96	-473.96*
378.7460	FEDERATED MDT SER MDT SMLCP VL I (31421R726)	1	08/18/06	07/20/09		2492.15	-4090.46	-1598.31
56.3650	FEDERATED MDT SER MDT SMLCP VL I (31421R726)	1	04/03/07	07/20/09		370.88	-673.00	-302.12
210.6210	FEDERATED MDT SER MDT SMLCP VL I (31421R726)	1	04/26/07	07/20/09		1385.89	-2578.00	-1192.11
50.7660	FEDERATED MDT SER MDT SMLCP VL I (31421R726)	1	11/19/07	07/20/09		334.04	-563.00	-228.96
104.4890	FEDERATED MDT SER MDT SMLCP VL I (31421R726)	1	01/17/08	07/20/09		687.54	-1001.00	-313.46
35.2130	FEDERATED MDT SER MDT SMLCP VL I (31421R726)	1	04/21/08	07/20/09		231.70	-381.00	-149.30
185.2610	FEDERATED MORTGAGE FUND IS (31428Q887)	1	01/17/08	07/02/09		1810.00	-1852.61	-42.61*
28.2130	FEDERATED TOTAL RETURN GOVT BOND FUND IS (31429A105)	1	04/26/07	07/02/09		318.52	-299.34	19.18
320.9460	FEDERATED TOTAL RETURN GOVT BOND FUND IS (31429A105)	1	11/19/07	07/02/09		3623.48	-3498.31	125.17
18.2560	GOLDMAN SACHS MID CAP VALUE TRUST (38141W398)	3	03/10/03	07/02/09		414.42	-382.46	31.96

PREPARED FOR ACCOUNT # 23 00 9323 0 03 - STEPHEN L &amp; P L WEST FAMILY CHARITABLE TRUST

ACCOUNT SITUS = IA

TAX ID# = 331006158

PROCESS DATE 10/20/2010

STATE TAX ID# =

FOR THE PERIOD 07/01/2009 TO 06/30/2010

## SECTION A - CAPITAL GAINS &amp; LOSSES

## LONG TERM SALES &amp; MATURITIES

SHARES/PAR	SECURITY	REG	ACQUIRED DATE	SOLD DATE	CAPITAL PROCEEDS TO INCOME CASH PRINCIPAL CASH	COST BASIS	LONG TERM GAIN OR LOSS
6.7190	GOLDMAN SACHS MID CAP TRUST (38141W398)	3	05/07/03	07/02/09	152.52	-155.00	-2.48*
11.0720	GOLDMAN SACHS MID CAP TRUST (38141W398)	3	09/25/03	07/02/09	251.34	-281.00	-29.66*
13.6440	GOLDMAN SACHS MID CAP TRUST (38141W398)	3	01/06/04	07/02/09	309.72	-394.72	-85.00*
32.2460	GOLDMAN SACHS MID CAP TRUST (38141W398)	3	01/06/04	08/18/09	830.00	-932.87	-102.87
39.8870	GOLDMAN SACHS MID CAP TRUST (38141W398)	3	01/06/04	10/09/09	1134.00	-1153.93	-19.93
6.7570	GOLDMAN SACHS MID CAP TRUST (38141W398)	3	01/06/04	01/20/10	202.91	-195.48	7.43
1.3930	GOLDMAN SACHS MID CAP TRUST (38141W398)	3	01/26/04	01/20/10	41.53	-41.00	0.53
14.1710	GOLDMAN SACHS MID CAP TRUST (38141W398)	3	12/28/04	01/20/10	425.56	-474.87	-49.31
12.6270	GOLDMAN SACHS MID CAP TRUST (38141W398)	3	12/28/04	04/27/10	413.91	-423.13	-9.22*
25.4450	GOLDMAN SACHS MID CAP TRUST (38141W398)	3	04/06/05	04/27/10	834.09	-876.08	-41.99*
195.3360	GROWTH FD AMER INC CL F2 SHS (399874825)	3	09/25/03	07/02/09	4397.00	-4322.86	74.14
25.9710	GROWTH FD AMER INC CL F2 SHS (399874825)	3	09/25/03	08/18/09	635.00	-574.75	60.25
72.5530	GROWTH FD AMER INC CL F2 SHS (399874825)	3	09/25/03	10/09/09	1916.85	-1605.63	311.22
15.1080	GROWTH FD AMER INC CL F2 SHS (399874825)	3	01/06/04	10/09/09	399.15	-376.82	22.33
191.4380	GROWTH FD AMER INC CL F2 SHS (399874825)	3	01/06/04	01/20/10	5299.00	-4774.79	524.21
27.1990	GROWTH FD AMER INC CL F2 SHS (399874825)	3	01/06/04	04/27/10	777.35	-678.39	98.96

PREPARED FOR ACCOUNT # 23 00 9323 0 03 - STEPHEN L &amp; P L WEST FAMILY CHARITABLE TRUST

PROCESS DATE 10/20/2010

ACCOUNT SITUS = IA  
TAX ID# = 331006158  
STATE TAX ID# =

FOR THE PERIOD 07/01/2009 TO 06/30/2010

## SECTION A - CAPITAL GAINS &amp; LOSSES

## LONG TERM SALES &amp; MATURITIES

SHARES/PAR	SECURITY	REG	ACQUIRED DATE	SOLD DATE	CAPITAL PROCEEDS TO INCOME CASH PRINCIPAL CASH	COST BASIS	LONG TERM GAIN OR LOSS
5.8310	GROWTH FD AMER INC CL F2 SHS	3 (399874825)	01/26/04	04/27/10	166.65	-157.86	8.79
83.1030	MUNDER SER TR	3	04/21/08	07/02/09	1500.00	-2390.04	-890.04*
27.8860	MDCAP COR GR Y	3 (626124242)	04/21/08	08/18/09	558.00	-802.00	-244.00
43.0990	MDCAP COR GR Y	3 (626124242)	04/21/08	10/09/09	943.00	-1239.53	-296.53
42.9800	MDCAP COR GR Y	3 (626124242)	04/21/08	01/20/10	998.00	-1236.10	-238.10
15.6150	OPPENHEIMER DEVELOPING MARKETS FUND - Y	3 (683974505)	04/05/06	07/02/09	337.00	-648.02	-311.02*
6.4760	OPPENHEIMER DEVELOPING MARKETS FUND - Y	3 (683974505)	04/05/06	08/18/09	154.00	-268.76	-114.76
16.1830	OPPENHEIMER DEVELOPING MARKETS FUND - Y	3 (683974505)	04/05/06	10/09/09	435.00	-671.60	-236.60
10.2320	OPPENHEIMER DEVELOPING MARKETS FUND - Y	3 (683974505)	04/05/06	01/20/10	295.00	-424.62	-129.62
412.6510	VANGUARD INTERMEDIATE TERM	3 (922031810)	04/26/07	07/02/09	3751.00	-4019.22	-268.22*
16.6490	VANGUARD INTERMEDIATE TERM	3 (922031810)	04/26/07	08/18/09	157.00	-162.16	-5.16
279.7090	VANGUARD INTERMEDIATE TERM	3 (922031810)	04/26/07	04/27/10	2769.12	-2724.36	44.76
61.1450	VANGUARD INTERMEDIATE TERM	3 (922031810)	01/17/08	04/27/10	605.34	-609.00	-3.66*
2519.4580	VANGUARD INTERMEDIATE TERM	3 (922031810)	03/25/09	04/27/10	24942.62	-21365.00	3577.62
188.5860	VANGUARD SHORT TERM	3 (922031836)	01/17/08	07/02/09	1933.00	-2029.18	-96.18*
80.5790	VANGUARD INFLATION PROTECTED	3 (922031869)	11/19/07	07/02/09	975.00	-1007.24	-32.24*



SECTION A - CAPITAL GAINS & LOSSES

LONG TERM SALES & MATURITIES			CAPITAL PROCEEDS TO		LONG TERM
SHARES/PAR	SECURITY	DATE	INCOME CASH	PRINCIPAL CASH	GAIN OR LOSS
232.5880	VANGUARD INFLATION PROTECTED (922031869)	11/19/07	10/09/09	2912.00	4.66
TOTAL LONG TERM SALES & MATURITIES			138777.30	133759.71	5017.59

**Application for Extension of Time To File an  
Exempt Organization Return**

OMB No. 1545-1709

▶ File a separate application for each return

- 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 previously filed Form 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 complete Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

**Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on e-file for Charities & Nonprofits

Type or print	Name of Exempt Organization	Employer identification number
	<b>P L &amp; STEPHEN L WEST FAMILY FOUNDATION</b>	<b>33-1006158</b>
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P.O. box, see instructions.	
	<b>% STEPHEN L WEST 1212 FIFTH STREET</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	<b>CORALVILLE, IA 52241</b>	

Check type of return to be filed (file a separate application for each return)

- |   |   |                                    |
|---|---|------------------------------------|
| <input type="checkbox"/> Form 990               | <input type="checkbox"/> Form 990-T (corporation)                 | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL            | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ            | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 6069 |
| <input checked="" type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A                              | <input type="checkbox"/> Form 8870 |

**STEPHEN L WEST**

- The books are in the care of ▶ **1212 FIFTH STREET - CORALVILLE, IA 52241**

Telephone No ▶ **319-351-2000**

FAX No. ▶

- 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) \_\_\_\_\_ If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover.

- 1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **FEBRUARY 15, 2011**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

▶ ☐ calendar year \_\_\_\_\_ or▶ ☒ tax year beginning **JUL 1, 2009**, and ending **JUN 30, 2010**.

- 2 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

<b>3a</b> 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>3a</b>	\$	<b>0.</b>
<b>b</b> If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$	<b>105.</b>
<b>c Balance Due.</b> 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.	<b>3c</b>	\$	<b>0.</b>

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions**LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.**Form **8868** (Rev. 4-2009)