

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-PF**

Department of the Treasury

Return of Private Foundation

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

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

2009

OMB No 1545-0052

		venue Service Note. The foundation may i				
For	cale	ndar year 2009, or tax year beginning OCT	1, 2009		SEP 30, 2010	<u> </u>
G	Chec	call that apply Initial return	Initial return of a fo	rmer public charity	Final return	1
		Amended return	Address change	ge	Name change	
He	e the	Name of foundation			A Employer identification	number
	label					
	herwi		GES FOUNDATION	ON	42-1377160	
	print	11,		Room/suite	B Telephone number	
(r typ:	a. № O BOX 627			255-8081	
•	<u>-S</u> pe	City or town state and ZIP code		<u></u> -	C If exemption application is p	and a sheet have
inš	tructi	ons SIOUX CITY, IA 51102	-0627		D 1. Foreign organization	
S	Chack	type of organization X Section 501(c)(3) ex			Foreign organizations me check here and attach or	eeting the 85% test,
			Other taxable private founda	stron	}	
				Accrual	E If private foundation sta	tus was terminated
Ľ	ار الله ا	· —	~	L Acciual	under section 507(b)(1	•
d!	rom i	Part II, coi. (c), line 16) (Part I, colu.	her (specify)	hoorn)	F If the foundation is in a	
	\$,	Analysis of Poyonus and Expenses	<u> </u>		under section 507(b)(1	4.41
É	art 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	(c) Adjusted net	(d) Disbursements for chantable purposes
=	11 X 12 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	necessarily equal the amounts in column (a))	avhauses has nongs	income	Income	(cash basis only)
Z		Contributions, gifts, grants, etc , received			N/A	
氫	=2	Check X if the foundation is not required to attach Sch B		<u> </u>		
	€3	Interest on savings and temporary cash investments	1.	1.		STATEMENT 1
	4	Dividends and interest from securities	5,518.	5,518.		STATEMENT 2
	5a	Gross rents				
	b	Net rental income or (loss)				
a	6a	Net gain or (loss) from sale of assets not on line 10	404.			
Ž	b	Gross sales price for all assets on line 6a 22,033.				
Revenue	7	Capital gain net income (from Part IV, line 2)		404.		
ď	8	Net short-term capital gain				
	g	Income modifications				
	10a	Gross sales less returns and allowances		······································		
(5)	‡ ь	Less Cost of goods sold				
	ľ	Gross profit or (loss)				
12	11	Other income		······································		
0	12	Total. Add lines 1 through 11	5,923.	5,923.		,
ZA₩	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
		Other employee salaries and wages				· · ·
9	1	Denotes siene employee henefite				
Ses		Legal fees RECEIVEL)_0			
ens ens		Accounting fees	70			
×		Other professional food				
, 9	I	Other professional fees place 2 8 20 Interest				
ŧ	17	1				
stra	18	Taxes Depreciation and depletion OGDEN, I	192			· · · · · · · · · · · · · · · · · · ·
Ë	19	Depreciation and depletion OGDEN.				
Ę	20	Occupancy				
ΨÞ	21	Travel, conferences, and meetings				
an	22	Printing and publications				
ing	23	Other expenses STMT 3	2,098.	2,098.	*	2,098.
rat	24	Total operating and administrative				
حوديا المجاورة المجا	Ì	expenses. Add lines 13 through 23	2,098.	2,098.		2,098.
J	1	Contributions, gifts, grants paid	32,150.			32,150.
	26	Total expenses and disbursements.		_		
	<u> </u>	Add lines 24 and 25	34,248.	2,098.		34,248.
	27	Subtract line 26 from line 12				
	a	Excess of revenue over expenses and disbursements	<28,325.		<u> </u>	
	b	Net investment income (if negative, enter -0-)		3,825.		
		Adjusted net income (if negative, enter -0-)			N/A	
9235		· · · · · · · · · · · · · · · · · · ·				

Attached schedules and amounts in the description column should be for end-of-year amounts only 1	(a) Book Value 2,350. 8,983.	(b) Book Value 2,351. 2,286.	(c) Fair Market Value 2,351. 2,286.
2 Savings and temporary cash investments 3 Accounts receivable ► Less allowance for doubtful accounts ► 4 Pledges receivable ►		2,351. 2,286.	2,351.
3 Accounts receivable ► Less allowance for doubtful accounts ► 4 Pledges receivable ►	8,983.	2,286.	2 206
Less allowance for doubtful accounts ► 4 Pledges receivable ►	1	~ · · · · · · · · · · · · · · · · · · ·	2,200
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 STMT 4	179,357.	171,899.	169,148
c Investments - corporate bonds			
11 Investments - land, buildings, and equipment basis			······································
Less: accumulated depreciation	İ		
12 Investments - mortgage loans			
13 Investments - other STMT 5	185,000.	170,829.	214,403
14 Land, buildings, and equipment basis	103/000.	170,027.	214,403
Less accumulated depreciation	F	}	
· · · · · · · · · · · · · · · · · · ·			
15 Other assets (describe ►)			
16 Total assets (to be completed by all filers)	375,690.	347,365.	200 100
17 Accounts payable and accrued expenses	373,090.	347,303.	388,188
1 · · · · · · · · · · · · · · · · · · ·			
1 ' '			
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.	
Foundations that follow SFAS 117, check here			
and complete lines 24 through 26 and lines 30 and 31.	255 600		
24 Unrestricted	375,690.	347,365.	
25 Temporarily restricted			
26 Permanently restricted			
Foundations that do not follow SFAS 117, check here			
and complete lines 27 through 31.			
27 Capital stock, trust principal, or current funds			
28 Paid-in or capital surplus, or land, bldg , and equipment fund			
29 Retained earnings, accumulated income, endowment, or other funds			
30 Total net assets or fund balances	375,690.	347,365.	
31 Total liabilities and net assets/fund balances	375,690.	347,365.	
art III Analysis of Changes in Net Assets or Fund Ba	alances		
	· · · · · · · · · · · · · · · · · · ·		
Total net assets or fund balances at beginning of year - Part II, column (a), line 3	JU JU		275 (00
(must agree with end-of-year figure reported on prior year's return)		1	375,690. <28,325.
Enter amount from Part I, line 27a		2	<28,325
Other increases not included in line 2 (itemize)		3	0
Add lines 1, 2, and 3		4	347,365
			0.
Decreases not included in line 2 (itemize) Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, col		6	347,365.

DAVID AND BEVERLY FEIGES FOUNDATION 42-1377160 Page 3 Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase (c) Date acquired (a) List and describe the kind(s) of property sold (e.g., real estate, (d) Date sold (mo, day, yr.) (mo, day, yr.) 2-story brick warehouse, or common stock, 200 shs MLC Co) D - Donation 1a ASTON MONTAAG & CALDWELL P VARIOUS VARIOUS P h MANAGERS AMG FUNDS VARIOUS 11/17/09 INVESCO DISCIPLINED EQUITY FD P VARIOUS VARIOUS d CLASS ACTION PROCEEDS P VARIOUS VARIOUS e (g) Cost or other basis (f) Depreciation allowed (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 13,000. 11,333. 1,667. а 3,000. 2,838. 162. b 6,000 7,458. ,458.> C 33, 33. d е Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col (h) gain minus col (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col (i) Losses (from col (h)) (i) FMV as of 12/31/69 as of 12/31/69 over col (j), if any 1,667. а 162. b <1,458.> C 33. đ θ If gain, also enter in Part I, line 7 404. 2 Capital gain net income or (net capital loss) 2 If (loss), enter -0- in Part I, line 7 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) N/A If (loss), enter -0- in Part I, line 8 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 Yes X No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part Enter the appropriate amount in each column for each year, see instructions before making any entries (d)
Distribution ratio
(col (b) divided by col (c)) (a) Base period years (c) (b) Adjusted qualifying distributions Net value of noncharitable-use assets Calendar year (or tax year beginning in) 23,021 391,594. .058788 2008 34,170. 495,174. .069006 2007 19,767. 510,050. 2006 .038755 17,762. 491,052. 2005 .036171 177,294. 2004 24,924 .140580 .343300 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 .068660 3 35<u>6,105.</u> 4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5 4 24,450. 5 Multiply line 4 by line 3 5 38. Enter 1% of net investment income (1% of Part I, line 27b) 6 7 Add lines 5 and 6 7 24,488.

8

34,248.

See the Part VI instructions

8 Enter qualifying distributions from Part XII, line 4

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

		1/160		Page 4
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se	e instru	ctio	ns)
18	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔛 and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)			
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%			38.
	of Part I, line 27b			
	: All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			<u>o.</u>
3	Add lines 1 and 2			38.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	······		38.
6	Credits/Payments			
	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 20.			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868)			
	I Backup withholding erroneously withheld Tatal aroute and payments. Add lines for through fid.			20
_	Total credits and payments Add lines 6a through 6d Feter any page by for undersoyment of estimated tay. Check here I if Form 2220 is attached.	··· ·		<u> 20.</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			18.
9 10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	 -		10.
11				
7.7	art VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		X
	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.			
C	Did the foundation file Form 1120-POL for this year?	10_		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation \blacktriangleright \$ (2) On foundation managers \blacktriangleright \$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers > \$O.			
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, articles of incorporation, or			
_	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a tax return on Form 990-T for this year?	4a_		X
	If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year?			x
ð	If "Yes," attach the statement required by General Instruction T.	5		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
U	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?	6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	X	
•	If "Yes," complete Part II, col. (c), and Part XV.	*******		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) NONE			
		-		
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 SEE STATEMENT 6	8b		Х
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	9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X

10 X Form **990-PF** (2009)

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

Form **990-PF** (2009)

Part VIII Statements Regarding Activities for Which Form 4720 May Be Required (continued) 3 During the year did the foundation pay or mour any amount to (1) Carry on prospagands, or otherwise attempt to influence beginstein (section 4945(n))? (2) Influence the outcome of any speach public electron (see section 4945(n))? (3) Provide a grant to an animation other than a chantable, etc. organization described in section 596(a)(1), (2), or (3), or section 4940(q)(2)? (5) Provide for any purpose other than religious, chartable, scentific, literary, or educational purposas, or for the prevention of cruelty to children or animate? b If any answer is "vis" to 55(1)-(15), did any of the transactions fail to qualify under the exceptions described in Regulations section 33 4945 or in a current notice regarding desaster assistance check here the extension of the visit of the grant? If we have the the statement required by Regulations section 53.4945-5(n). 6a Dut the foundation, during the year, receive any finds, directly or indirectly, to pay preniums on a personal benefit contract? If we'se, "attent the statement required by Regulations section 53.4945-5(n). b Dut the foundation, during the year, pay premiums, directly or indirectly, to pay preniums on a personal benefit contract? If the statement required by Regulations section 53.4945-5(n). b Dut the foundation, during the year, receive any finds, cliricity or indirectly, to pay premiums on a personal benefit contract? If the statement medicine decreased by Regulations section 53.4945-5(n). b Dut the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If the statement has statement and the statement of t	Form 990-PF (2009) DAVID AND BEVERLY FEIGES			42-13//1	60	Page 6
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the volutione of any specific public election (see section 4935), of to carry on, directly or indirectly, any voter registration driver has a chantable, etc., organization described in section 599a[1(1), (2), or (3), or section 4940[0](2)? (3) Provide a grant to an organization other than a chantable, etc., organization described in section 599a[1(1), (2), or (3), or section 4940[0](2)? (5) Provide for any purpose other than religious, chartable, scientific, literary, or educational purposes, or for the prevention of cruelly to oritione or animals? 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 4946 or in 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? If "Yes," attach the statement required by Regulations section 53.4945-5(c). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes," attach the statement required by Regulations section 53.4945-5(c). 6b Did the foundation, during the year, as the foundation a party to a prohibited tax shelter transaction? Yes X No b If yes, did the foundation receive any proceeds or have any not more attributable to the transaction? Yes X No b If yes, did the foundation receive any proceeds or have any not more attributable to the transaction? 1 List all officers, directors, Trustees, Foundation managers, Highly Paid Employees, and Contractors 1 List all officers, directors, Trustees, Foundation managers, Highly Paid Employees, and Contractors 1 List all officers, directors, Trustees, Foundation managers, Paid the process of the party of the process of the proces		Form 4720 May Be F	Required (contin	ued)	······································	
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter (registration driver) (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an individual for travel, study, or other similar purposes? (5) Provide for any purpose other than religious, charitable, etc., organization described in section \$50(a)(1), (2), or (3), or section 4940(d)(2)? (6) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelly to children or animals? It if any answer is "Yes" to \$514\), did any of the transactions fall to qualify under the exceptions described in Regulations section \$53.4945 or in a current notice regarding disaster assistance check here If it the answer is "Yes" to qualification \$540\), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section \$53.4945-5(d). But the foundation, during the year, peave any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes," attach the statement required by Regulations section \$53.4945-5(d). But the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes," both, file Form \$870. The file of the foundation or exercise any proceeds or have any net income attributable to the transaction? 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 VICE-PRES DIR SIOUX CITY, IA 51111 O.00	• • •					
any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charidable, etc. organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charidable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? b If any answer is "Yes to 5a(1)-(5), old any of the transactions fall to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? N/A Yes No N/A Ye			_	s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes? (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)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? If any names "se's to 53 (1/5), old any of the transactions fall to qualify under the exceptions described in Regulations section \$3.4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current n	(2) Influence the outcome of any specific public election (see section 4955), or	or to carry on, directly or indire				
(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) ² (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), old any of the transactions fall to qualify under the exceptions described in Regulations section 5449-50 m a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here a title answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the staterment required by Regulations section 53.4945-5(d). Ba Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes" to 6b, file Form 8870. A Alay time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If It is all officers, directors, trustees, foundation managers, Highly Paid Employees, and Contractors (a) Name and address (b) Name and address (a) Name and address VICE-PRES DIR SIOUX CITY, IA 51111 O.00						
Solicity (1, 2), or (3), or section 4940(d)(2)? Solicity (2), or (3), or section 4940(d)(2)? Solicity (3), or section 4940(d)(2)? Solicity (3), or section 4940(d)(2)? Solicity (4), or solicity (5), or solicity (6), or			Ye	s X No		
(5) Prowde for any purpose other than religious, chartable, scientific, literary, or educational purposes, or for the prevention of cruelly to children or animals? b If any answers 'Ne's to 65 (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)? Organizations relying on a current notice regarding disaster assistance check here c If the answer is 'Ne's to question 53(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? N/A	•	n described in section		- T		
the prevention of cruelty to children or animals? It is any answer is "Yes" to \$61/1/(5), aid any of the transactions fail to qualify under the exceptions described in Regulations section \$3 4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here c if the answer is "Yes" to question \$64(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes" attach the statement required by Regulations section \$3.4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes" to 6b, file Form 8870. 7a At any time during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870. 7a At any time during the year, pay premiums, directly or indirectly, on a personal benefit contract? 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? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly 1 List all officers, directors, trustees, foundation managers and their compensation. (a) Name and address (b) Title, and average hours per week devoked for position and address (a) Name and address VICE—PRES DIR 2800 CLOVERLEAF COURT SIOUX CITY, IA 51111 0.00 0.0.0.0.0.0.0.0.0.0.0.0.0.0.	* * * * * * * * * * * * * * * * * * * *			es LX 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)? Organizations relying on a current notice regarding disaster assistance (see instructions)? If "Yes," attach the statement required by Regulations section 53.4945-5(d). Ba Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes," attach the statement required by Regulations section 53.4945-5(d). Ba Did the foundation, during the year, peraway funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes To 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction? If "Yes to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Information About Officers, Directors, Trustees, Foundation Managers, Highly Information About Officers, Directors, Trustees, Foundation Managers, Highly Information About	•	, or educational purposes, or t		□		
section 53 4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here of if the answer is "Se's to question 534, does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d). 8a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870. The At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 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 week devoted to position (c) Compensation (d) Compensation account, other allowances (e) Name and address VICE—PRES DIR 2800 CLOVERLEAF COURT SIOUX CITY, IA 51111 O.00 O	· · · · · · · · · · · · · · · · · · ·	d		es LAJ NO		
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? If "Yes," attach the statement required by Regulations section 53.4945-5(d). 8a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 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? 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 for position WILLIAM FEIGES PRES SEC DIR 31349 S RIDGE RD SIOUX CITY, IA 51108 0.00 0			n Regulations	NT / A		
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? 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? 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? 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? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly 1 List all officers, directors, trustees, foundation managers and their compensation. (a) Name and address Directors, Trustees, Foundation Managers, Highly 1 List all officers, directors, trustees, foundation managers and their compensation. (b) Iffix, and average hours per week devoted to position (if not paid, enter "0.) (c) Compensation (if not paid, enter "0.) (d) Compensation (if not paid, enter "0.) (d) Compensation (if not paid, enter "0.) (e) Expense "account, other allowances" (c) Compensation (c) Compens				N/A	<u> </u>	
expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d). Ba Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 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? If the foundation during the tax year, was the foundation and party to a prohibited tax shelter transaction? If the foundation receive any proceeds or have any net income attributable to the transaction? It is and a fire foundation about Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Information About Officers, Directors, Trustees, Foundation Managers, Highly Information About Officers, Directors, Trustees, Foundation Managers, Highly Information About Officers, Directors, Trustees, Foundation Manag			unad			
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? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 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? b If ves, did the foundation receive any proceeds or have any net income attributable to the transaction? Part VIII Plant 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 of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (b) Title, and average hours per week devoted to position of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (c) Compensation (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Cambuspos to contractors and address of each employee paid more than \$50,000 on the paid defined and address of each employee paid more than \$50,000 on the paid defined and address of each employee paid more than \$50,000 on the paid defined and address of each employee paid more than \$50,000 on the paid that the paid of the pai			. /	No		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 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? b if yes, did the foundation receive any proceeds or have any net income attributable to the transaction? 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 in the position of the p			.,	יא בי		
a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 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? b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? 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 to p						
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 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? If "Yes, did the foundation receive any proceeds or have any net income attributable to the transaction? 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 (a) Name and address (b) Title, and average hours per week devoted to postion of the highest-paid employees (other than those included on line 1). If none, enter "NONE." (b) Title, and average hours per week fevoled to postion of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (c) Compensation (d) Combutions to employee account, other allowances are count, other allowances of each employee paid more than \$50,000 (d) Compensation (d) Combutions to employee account, other allowances are count, other allowances of each employee paid more than \$50,000 (d) Compensation (d) Combutions to employee account, other allowances of each employee paid more than \$50,000 (e) Expense account, other and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoled to position of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Compensation (d) Combutions to employee account, other accou		pay promanio on		s X No		
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? b if yes, did the foundation receive any proceeds or have any net income attributable to the transaction? 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 (a) Name and address (b) Title, and average hours per week devoted for position (fit not paid, enter 0-) and other account, other allowances and their compensation. WILLIAM FEIGES PRES SEC DIR 31349 S RIDGE RD SIOUX CITY, IA 51108 0.00 0.00 0.0. DAVID FEIGES VICE-PRES DIR 2800 CLOVERLEAF COURT SIOUX CITY, IA 51111 0.00 0.00 0.0. 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 (c) Compensation (c) Compe	•	personal benefit contract?	,,		6h	x
Ta At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If if yes, did the foundation receive any proceeds or have any net income attributable to the transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 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-) (if not paid,				ļ		1
Diff yes, did the foundation receive any proceeds or have any net income attributable to the transaction? N/A 7b Part Viii	,	shelter transaction?	Ye	es X No		
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 (fill not paid, enter '0-) and officers allowances WILLIAM FEIGES 31349 S RIDGE RD SIOUX CITY, IA 51108 DAVID FEIGES 2800 CLOVERLEAF COURT SIOUX CITY, IA 51111 0.00 0.0				N/A	7b	1
(a) Name and address (b) Title, and average hours per week devoted (In not paid, enter -0-) (In	Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	У		
WILLIAM FEIGES 31349 S RIDGE RD SIOUX CITY, IA 51108 DAVID FEIGES 2800 CLOVERLEAF COURT SIOUX CITY, IA 51111 D.00 O.00 O.0. BEVERLY FEIGES TREAS DIR 2800 CLOVERLEAF COURT SIOUX CITY, IA 51111 O.00 O.0. O.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 dekired complexes account, other allowances	1 List all officers, directors, trustees, foundation managers and their	compensation.		-		
WILLIAM FEIGES 31349 S RIDGE RD SIOUX CITY, IA 51108 0.00 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0	(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred compensation	accour	nt, other
31349 S RIDGE RD SIOUX CITY, IA 51108 DAVID FEIGES 2800 CLOVERLEAF COURT SIOUX CITY, IA 51111 O.00 TREAS DIR 2800 CLOVERLEAF COURT SIOUX CITY, IA 51111 O.00	WILLIAM FEIGES		Sinci Cy	comparsation	4.101.	<u>u11003</u>
DAVID FEIGES 2800 CLOVERLEAF COURT SIOUX CITY, IA 51111 0.00 TREAS DIR 2800 CLOVERLEAF COURT SIOUX CITY, IA 51111 0.00 0.00 0.0.0.0. 2800 CLOVERLEAF COURT SIOUX CITY, IA 51111 0.00 0.00 0.0.0.0. (b) Title, and average hours per week devoted to position (c) Compensation (c) Compensation account, other allowances	31349 S RIDGE RD	1	1		İ	
2800 CLOVERLEAF COURT SIOUX CITY, IA 51111 0.00 TREAS DIR 2800 CLOVERLEAF COURT SIOUX CITY, IA 51111 0.00 0.00 0.0.0 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 hours per week devoted to position	SIOUX CITY, IA 51108	0.00	0.	0.		0.
SIOUX CITY, IA 51111 O.00 BEVERLY FEIGES TREAS DIR SIOUX CITY, IA 51111 O.00 O.	DAVID FEIGES	VICE-PRES DIR	1			
BEVERLY FEIGES 2800 CLOVERLEAF COURT SIOUX CITY, IA 51111 0.00 0.00 0.00 0.00 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 devoted to position]				
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) Combutions to employee benefit plans and determed compensation and determed compensation allowances			0.	0.		0.
SIOUX CITY, IA 51111 O.00 O.00 O.00 O.00 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 deterred complexes and deterred compensation allowances		TREAS DIR				
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 deterred compensation allowances						
(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 deterred complexes and deterred compensation allowances	SIOUX CITY, IA 51111	0.00	0.	0.		0.
(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 deterred complexes and deterred compensation allowances		-				
(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 deterred complexes and deterred compensation allowances		-				
(a) Name and address of each employee paid more than \$50,000 hours per week devoted to position (c) Compensation employee benefit plans and deterred compensation employee benefit plans and deterred compensation allowances	2 Compensation of five highest-paid employees (other than those inc	cluded 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	employee benefit plans and deferred	ассоці	nt, other
	NONE	do rotos to position		Compensation	41104	1003
		1				
		1				
		4		1		
				ļ		
		-				
Total number of other employees paid over \$50,000	Total number of other employees paid over \$50,000	<u> </u>	l .			

Form **990-PF** (2009)

All other program-related investments. See instructions

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, s	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average monthly fair market value of securities	1a	353,542.
b	Average of monthly cash balances	1b	353,542. 7,986.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	361,528.
е	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	361,528.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	5,423.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	356,105.
6	Minimum investment return. Enter 5% of line 5	6	17,805.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part)	nd certain	
1	Minimum investment return from Part X, line 6	1	17,805.
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009 (This does not include the tax from Part VI) 2b		
C	Add lines 2a and 2b	20	38.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	17,767.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	17,767.
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	17,767.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		24.040
	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	34,248.
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		
а	Suitability test (prior IRS approval required)	3a	
þ	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	34,248.
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	38.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	34,210.
	Note. The amount on line 6 will be used in Part V. column (h) in subsequent years when calculating whether the foundation.	aualifiaa far	the coetion

Form **990-PF** (2009)

4940(e) reduction of tax in those years

	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2008	2008	2009
1 Distributable amount for 2009 from Part XI, line 7				17,767.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years			,	.,
		0.		
3 Excess distributions carryover, if any, to 2009				
a From 2004 4,449.				
b From 2005 17,762.				
c From 2006 19,767.				
d From 2007 34,170.				
e From 2008 23,021.	22.5			
f Total of lines 3a through e	99,169.			
4 Qualifying distributions for 2009 from				
Part XII, line 4 ► \$ 34,248.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	34,248.			
(Election reduited - See instructions)	34,240.		· · · · · · · · · · · · · · · · · · ·	0.
d Applied to 2009 distributable amount	0.			
e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2009	17,767.		· · · · · · · · · · · · · · · · · · ·	17,767.
(If an amount appears in column (d), the same amount must be shown in column (a))	2.,,,			2,,,,,,,,,
6 Enter the net total of each column as indicated below:		International		
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	115,650.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		·····
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2008 Subtract line				······································
4a from line 2a Taxable amount - see ınstr.			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		i	1	
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004	_			
not applied on line 5 or line 7	0.			·····
9 Excess distributions carryover to 2010.	115 650			
Subtract lines 7 and 8 from line 6a	115,650.			
O Analysis of line 9 a Excess from 2005 4,444.	1			
10 767				
b Excess from 2006 c Excess from 2007 34,170.	1			
d Excess from 2008 23,021.	1			
e Excess from 2009 34, 248.		***		

e Excess from 2009

		ND BEVERLY			42-13	77160 Page 10
F	Part XIV Private Operating F	oundations (see in	structions and Part VI	I-A, question 9)	N/A	
1	1 a If the foundation has received a ruling o	r determination letter tha	t it is a private operating			
	foundation, and the ruling is effective fo	r 2009, enter the date of	the ruling	•		
	b Check box to indicate whether the found	dation is a private operatii	ng foundation described	in section	4942(j)(3) or 49	942(j)(5)
2	2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
	Investment return from Part X for					
	each year listed					
	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					
3						
	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		<u> </u>			
P	Part XV Supplementary Info			if the foundation	n had \$5,000 or m	ore in assets
_	at any time during t		instructions.)			
1		=	Aban 00/ af the Aatal and	A	Anna data an tarka a tarka a ta	
	a List any managers of the foundation wh year (but only if they have contributed n			tributions received by the	e toundation before the cic	se of any tax
NΙ	ONE	(000)				
_	b List any managers of the foundation wh			(or an equally large port	on of the ownership of a p	eartnership or
M	other entity) of which the foundation has ONE	Sa 10 /0 OI GIEGIEI IIIGIE	Ji			
2	 	ion Grant Gift Loon	Scholarship ato B	rograme:		
۲.	Check here X if the foundation of the foundation makes gifts, grants, etc.	only makes contributions	to preselected charitable	organizations and does	not accept unsolicited req	uests for funds If
	a The name, address, and telephone num	<u>-</u>			,, -, -, -, -, -, -, -, -, -, -, -, -	
		our or and paroon to time	αρμισατίστο στισαίο στ			
_	b The form in which applications should b	pe submitted and informa	tion and materials they s	should include		
_	c Any submission deadlines		·			
	d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields	, kinds of institutions, or	other factors	

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y	ear 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	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
SEE STATEMENT 8				
Total	<u></u>		<u>▶ 3a</u>	32,150.
NONE	,			
Total			▶ 3b	0.

Part XVI-A	Analy	vsis of	Income-	-Producing	Activities
* *** * *** **** **** **** ***	Aliai	7313 01	WICOLLIE.	-Frouucing	MCHAING2

Enter gross amounts unless otherwise indicated	Unrelated	business income		led by section 512, 513, or 514	(e)
•	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue	Business code	Amount	sion code	Amount	function income
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					1.
4 Dividends and interest from securities					1. 5,518.
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					<u> </u>
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					404.
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a	_				
b					
C					
d	I I				
e					
2 Subtotal Add columns (b), (d), and (e)).	0.	5,923. 5,923.
3 Total. Add line 12, columns (b), (d), and (e)				13	5,923.
(See worksheet in line 13 instructions to verify calculations)				

Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes)

3, 4, FUNDS PROVIDED ENABLE THE FOUNDATION TO SUPPORT VARIOUS WORTHWHILE

8 CHARITIES.

Form	1 990-PF (2	:009\ DAVID	. AND BEVERLY	FEIGES FOUND	· · ·	42-137	7160	Do	~~ 10
	rt XVII		egarding Transfers	To and Transaction				<u>ra</u>	ge 13
1	Did the or	ganızatıon directly or indi	rectly engage in any of the t	ollowing with any other organ	ization described in sec	tion 501(c) of		Yes	No
	the Code (other than section 501(c))(3) organizations) or in sec	ction 527, relating to political o	rganizations?				
a		from the reporting found:	ation to a noncharitable exe	mpt organization of					
	(1) Cash						1a(1)		<u>X</u>
	(2) Other						1a(2)		X
b	Other tran								
		of assets to a noncharital					1b(1)		<u>X</u>
			ncharitable exempt organiz	ation			1b(2)		X
		I of facilities, equipment,					1b(3)		X
	• •	oursement arrangements					1b(4)		X
	• •	s or loan guarantees	mbership or fundraising so	licitations			1b(5)		$\frac{\mathbf{x}}{\mathbf{x}}$
c	, ,		iling lists, other assets, or p				1b(6) 1c		<u>X</u>
	•		•	ng schedule. Column (b) shoul	ld always show the fair	market value of the goods		etc	
	or services	s given by the reporting fo	oundation If the foundation	received less than fair market				013,	
		(b) Amount involved	other assets, or services re	aritable exempt organization	(4) 5				
(4)	ne no	(b) Amount involved		/A	(u) Descriptio	n of transfers, transactions, and	sharing an	angeme	nts
	-			/ A					
	-					<u></u>			
			. 1		*				
						<u></u>		·	
									
									
						•	_		
	Is the four	dation directly or indirect	lv affiliated with, or related	to, one or more tax-exempt or	ganizations described				

	in section 50 (c) of the code (other than section 50 (c)(3)) of in sec	Yes	LA_IN	
	b If "Yes," complete the following schedule			
	(a) Name of organization	(b) Type of organization	(c) Description of relationship	
	N/A			
_				
				
	Linder penalties of parting I declarating I have examined this return, including acc	component achadulas and atatements	and to the best of my translation and ball to be	
	Under penalties of perjury, I declare that I have examined this return, including acc and complete Declaration of prepaler (other han tappayer or fiduciary) is based o			

ere	and con		orepader (other man taxpaye	this return, including accomp	information of which prep			belief, it is true, correct,
Rign	er's nly	Preparer's signature	(A)	The eft		Date 10 19 10	Check if self-employed	Preparer's identifying number
	Paid Prepare Use On	Firm's name (or yours if self-employed),	STERLING, P.O. BOX	DELPERDANG	& CO. P.	C.	EIN ►	
		address, and ZIP code	SIOUX CIT	Y, IA 51102	-0627		Phone no	712-255-8081
								- 000 5

FORM 990-PF INTEREST ON SAV	INGS AN	ID TEM	PORARY CA	SH IN	IVESTMENTS	STATEMENT	1
SOURCE						AMOUNT	
FIRST AMERICAN BANK							1.
TOTAL TO FORM 990-PF, PART I	, LINE	3, CO	LUMN A				1.
FORM 990-PF DIVIDEN	DS AND	INTER	EST FROM	SECUF	RITIES	STATEMENT	2
SOURCE		GROSS	AMOUNT		TAL GAINS	COLUMN (A AMOUNT)
ATLANTIC TRUST	_		5,518.		0.	5,5	18.
TOTAL TO FM 990-PF, PART I,	LN 4 =		5,518.		0.	5,5	18.
FORM 990-PF	TO	HER E	XPENSES			STATEMENT	3
DESCRIPTION	(A EXPEN PER E	ISES	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
MISCELLANEOUS EXPENSE	2	2,098.	2,	098.		2,0	98.
TO FORM 990-PF, PG 1, LN 23	2	2,098.	2,	098.		2,0	98.
FORM 990-PF	990-PF CORPORATE STOCK		STATEMENT	<u> </u>			
				PO(OK VALUE	FAIR MARKE VALUE	T
DESCRIPTION				ьос	on valion	VIECE.	
DESCRIPTION INVESCO DISCIPLINED EQUITY FOR THE STATE OF THE SERVICE OF THE SERVI					81,786. 90,113.	72,1 97,0	

FORM 990-PF O	THER INVESTMENTS		STATEMENT 5
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
MANAGERS AMG FDS-TIMESSQUARE	COST	59,162.	68,763.
ASTON MONTAG & CALDWELL GTH FUND	COST	63,667.	73,464.
HARBOR FD INTL FD INST	COST	24,000.	32,665.
LAZARD EMERGING MKTS PRTFOLIO	COST	12,000.	18,913.
MATTHEWS PACIFIC TIGER FUND	COST	12,000.	20,598.
TOTAL TO FORM 990-PF, PART II, L	JINE 13	170,829.	214,403.
	,		
FORM 990-PF EXPLANATION CONCE	RNING PART VII-A,	LINE 8B	STATEMENT 6

EXPLANATION

NOT REQUIRED

FORM 990-PF

ELECTION UNDER REGULATIONS SECTION 53.4942(A)-3(D)(2) TO TREAT EXCESS QUALIFYING DISTRIBUTIONS AS DISTRIBUTIONS OUT OF CORPUS

STATEMENT

THE TAXPAYER IS ELECTING UNDER TREASURY REGULATION 53.4942(A)-3(D)(2) TO TREAT DISTRIBUTIONS IN THE AMOUNT OF \$34,248 AS DISTRIBUTIONS OUT OF CORPUS.

	AND CONTRIBUTIONS DURING THE YEAR	STATI	EMENT 8
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
ACLU 125 BROAD ST., 18TH FL NEW YORK, NY 1004	NONE CHARITY	PUBLIC	250.
AMERICAN TECHNION SOCIETY 55 EAST 59TH STREET NEW YORK, NY 10022	NONE CHARITY	PUBLIC	1,500.
BOYS CLUB OF SIOUX CITY 823 PEARL ST SIOUX CITY, IA 51101	NONE CHARITY	PUBLIC	1,000.
BRANDEIS UNIVERSITY PARENT'S FUND P O BOX 549110 MAIL STOP 122 WALTHAM, MA 02454	NONE CHARITY	PUBLIC	1,000.
CONGREGATION BETH SHALOM 815 38 ST SIOUX CITY, IA 51104	NONE CHARITY	PUBLIC	14,000.
CONGREGATION OR SHALOM 21 HAWTHORN PARKWAY VERNON HILLS, IL 60061	NONE CHARITY	PUBLIC	2,400.
IOWA PUBLIC TELEVISION 6450 CORPORATE DRIVE JOHNSTON, IA 50131	NONE CHARITY	PUBLIC	1,000.
JUVENILE DIABETES RESEARCH FOUNDATION 500 N. DEARBORN, SUITE 305 CHICAGO, IL 60610	NONE CHARITY	PUBLIC	1,000.

DAVID AND BEVERLY FEIGES FOUNDA	TION	• .	42-1377160
KWIT 4647 STONE AVE SIOUX CITY, IA 51106	NONE CHARITY	PUBLIC	1,000.
LAMB ARTS, LTD 417 MARKET ST SIOUX CITY, IA 51103	NONE CHARITY	PUBLIC	2,000.
HADASSAH MEDICAL ORGANIZATION 50 W. 58TH ST NEW YORK, NY 10019	NONE CHARITY	PUBLIC	1,000.
S.E.A.R.C.H. 1811 NW 51ST ST. HANGR 42D FT LAUDERDALE, FL 33309	NONE CHARITY	PUBLIC	1,500.
SIMON WIESENTHAL CENTER 1399 SOUTH ROXBURY DR LOS ANGELOS, CA 90035	CHARITY	PUBLIC	250.
SOUTHERN POVERTY LAW CENTER P O BOX 548 MONTGOMERY, AL 36177	NONE CHARITY	PUBLIC	250.
TEL AVIV UNIVERSITY - SACKLER MEDICAL SCHOOL P O BOX 39655 TEL AVIV, ISRAEL, ISRAEL 61396	NONE CHARITY	PUBLIC	1,500.
UNITED WAY 701 STEUBEN ST., P O BOX 204 SIOUX CITY, IA 51101	NONE CHARITY	PUBLIC	1,000.
AMERICAN RED CROSS 4200 WAR EAGLE DRIVE SIOUX CITY, IA 51109	NONE CHARITY	PUBLIC	1,000.
THE WILLISTON NORTHAMPTON SCHOOL 19 PAYSON AVE EASTHAMPTON, MA 01027	NONE CHARITY	PUBLIC	500.
TOTAL TO FORM 990-PF, PART XV, LI	32,150.		