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

OMB No 1545-0052

2010

Department of the Treasury Internal Revenue Service

Internal Revenue Service

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

For calendar year 2010, or tax year beginning 02/03/10, and ending 12/31/10

_				turn of a former pub		$\Box$	[	Final return	<del></del>
-	Nan	ne of fo	Amended return Add	ress change		Name		oyer identification num	ber
-			EN PRIVATE FOUNDATION, INC.	,Т			B Telep	hone number (see page 1 3-263-6589	0 of the instructions)
_	4 (	or tow	nd street (or P O box number if mail is not delivered to street address WOODCREST LANE  n, state, and ZIP code  ATINE IA 52761			om/suite	C If exe	mption application is pend preign organizations, check preign organizations meeting	k here
- F 1	S Fa en	ection	ype of organization X Section 501(c)(3) exempt private 4947(a)(1) nonexempt charitable trust Other taxable ket value of all assets at ear (from Part II, col. (c),	Re private foundation	ı Accrı	nal	E If priv section	% test, check here and at ate foundation status was on 507(b)(1)(A), check here foundation is in a 60-month section 507(b)(1)(B), che	terminated under
-	Pa	rt 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) (see page 11 of the instructions))	(a) Revenue and expenses per books		(b) Net in	vestment	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
-		1 2	Contributions, gifts, grants, etc , received (attach schedule) Check ▶ ☐ if the foundation is <b>not</b> required to attach Sch B	400,0	00				
		3 4 5a	Interest on savings and temporary cash investments Dividends and interest from securities Gross rents	2,9	73		2,973		
	Revenue	b 6a b	Net rental income or (loss)  Net gain or (loss) from sale of assets not on line 10  Gross sales price for all assets on line 6a						
	ž	7 8 9	Capital gain net income (from Part IV, line 2)  Net short-term capital gain Income modifications				0	0	
		10a b	Gross sales less returns & allowances Less Cost of goods sold Cross systil as (loss) (ettach achadula)				-		
_		с 11 12	Gross profit or (loss) (attach schedule) Other income (attach schedule) Total. Add lines 1 through 11	402,9	73		2,973	0	
-	xbenses	13 14 15	Compensation of officers, directors, trustees, etc Other employee salaries and wages Pension plans, employee benefits		0				
	Ú)	16a b c	Legal fees (attach schedule) Accounting fees (attach schedule) Other professional fees (attach schedule)			-	D	CEIVED	1
APR (	Operating and Administrative	17 18	Interest Taxes (attach schedule) (see page 14 of the instructions)				<u>က</u>	AR 2 9 2011	
SCALLIED	i Admi	19 20 21	Depreciation (attach schedule) and depletion Occupancy Travel, conferences, and meetings					SDEN, UT	
SC	ting and	22 23 24	Printing and publications  Other expenses (att sch.)  Total operating and administrative expenses.						
	Operat	25	Add lines 13 through 23 Contributions, gifts, grants paid		0		0	0	0
-		26 27 a	Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements	402,9			·		
		b	Net investment income (if negative, enter -0-)  Adjusted net income (if negative, enter -0-)				2,973	0	

<u>F</u>	orm 990	O-PF (2010) JENSEN PRIVATE FOUNDATION, INC.	27-39459	<u> </u>	Page 2
,	Part I	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End	of year
_		should be lot end-or-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	\		
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶	-		
	<u> </u>	Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
	İ	Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see page 15 of the			
	ĺ	Instructions)			
	7	Other notes and loans receivable (att. schedule)	_	-	
		Less allowance for doubtful accounts ▶ 0			
ş	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ą	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) SEE STMT 1		402,97	3 402,973
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach sch.)			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation (attach sch.) ▶			-
	15	Other assets (describe ► )		· ·-	-
	16	Total assets (to be completed by all filers—see the			1
		Instructions Also, see page 1, item l)	o	402,97	402,973
_	17	Accounts payable and accrued expenses	<del> </del>		
	18	Grants payable		<del></del>	
<u>e</u>	19	Deferred revenue		· <del>······</del> ···	†
Ξ	20	Loans from officers, directors, trustees, and other disqualified persons			7
Liabilities	21	Mortgages and other notes payable (attach schedule)			-
I	22	Other liabilities (describe ▶ )			1
	23	Total liabilities (add lines 17 through 22)	0		5
_		Foundations that follow SFAS 117, check here	<u> </u>		7
s		and complete lines 24 through 26 and lines 30 and 31.			
S	24	Unrestricted			
ㅁ	25	Temporarily restricted			1
ga	26	Permanently restricted			+
0		Foundations that do not follow SFAS 117, check here ▶ X			†
들		and complete lines 27 through 31.			1
4	27	Capital stock, trust principal, or current funds			
0	28				-
Net Assets or Fund Balances	29	Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds		402,97	<del>-</del>
SS	30			402,31.	4
۲	30	Total net assets or fund balances (see page 17 of the	o	402,973	3
ž	24	Instructions) Total liabilities and not appeta/fund balances (see page 17)	<del></del>	402,51.	Ť
_	31	Total liabilities and net assets/fund balances (see page 17		402 07	
_	Dart II	of the instructions)	<u> </u>	402,97	2
_	Part I			·····	T
1		net assets or fund balances at beginning of year—Part II, column (a), line 30 (must	agree with		
_		of-year figure reported on prior year's return)		1	400 073
		amount from Part I, line 27a		2	402,973
3	utner	rincreases not included in line 2 (itemize)		3	ı

5

402,973

402,973

4 Add lines 1, 2, and 3

5 Decreases not included in line 2 (itemize) ▶

6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

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

7

8

7 Add lines 5 and 6

8 Enter qualifying distributions from Part XII, line 4

Part VI instructions on page 18

_	1990-PF (2010) JENSEN PRIVATE FOUNDATION, INC. 27-3943904			age 4
Pa	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions	)		
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)			
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check			59
	here ▶ ☐ and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of			
	Part I, line 12, col (b)			_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
3	Add lines 1 and 2			<u>59</u>
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-			59
6	Credits/Payments			
а	2010 estimated tax payments and 2009 overpayment credited to 2010			
b	Exempt foreign organizations—tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			59
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2011 estimated tax ▶ Refunded ▶ 11			
Pa	art VII-A Statements Regarding Activities		_	т——
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	<u> </u>	Yes	No
	participate or intervene in any political campaign?	1a	ļ	X
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
	of the 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	i		
С	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers  \$		-	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	<u> </u>	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		1	
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
ь -	if "Yes," has it filed a tax return on Form 990-T for this year?		-	7
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	<del> </del>	X
_	If "Yes," attach the statement required by General Instruction T		ļ	ļ
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or  By the transfer of the first state of t		ļ	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		x	
7	conflict with the state law remain in the governing instrument?	7	X	<del>                                     </del>
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		<u> </u>	<del>                                     </del>
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) ► IA		1	
<b>L</b>				1
Ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	01-	x	
9	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b_	A	<del> </del>
3	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 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page			
	27)? If "Yes," complete Part XIV	9		x
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	-	1	<del>  *</del>
	pomos and addresses	40	v	

Form **990-PF** (2010)

Form 990-PF (2010)

		PRIVATE FOUNDATION, INC.		3945904			Pag	ge <b>6</b>
_Pa	art VII-B Statements	Regarding Activities for Which Form 4	1720 May Be Re	quired (contin	ued)			
5a	During the year did the found	ation pay or incur any amount to				ł		
	(1) Carry on propaganda, or	otherwise attempt to influence legislation (section 49	945(e))?	<u> </u>	'es X No	i I	j	
	(2) Influence the outcome of	any specific public election (see section 4955), or to	carry on,					
	directly or indirectly, any	voter registration drive?		<u> </u>	′es 🗓 No	i l		
	(3) Provide a grant to an indi	ividual for travel, study, or other similar purposes?		<u> </u>	es X No			
	(4) Provide a grant to an orga	anization other than a charitable, etc., organization of	escribed in					
	section 509(a)(1), (2), or	(3), or section 4940(d)(2)? (see page 22 of the instru	ictions)	[ \ \	'es X No			
	(5) Provide for any purpose of	other than religious, chantable, scientific, literary, or	educational			l I		
	purposes, or for the preve	ention of cruelty to children or animals?		\	'es X No			
b	If any answer is "Yes" to 5a(1	I)-(5), did any of the transactions fail to qualify unde	r the exceptions des	cribed in		i l		
	Regulations section 53 4945	or in a current notice regarding disaster assistance (	see page 22 of the ir	nstructions)?	N/A	5b		
	Organizations relying on a cu	irrent notice regarding disaster assistance check her	е		▶ □	i l		
С		stion 5a(4), does the foundation claim exemption from						
	because it maintained expend	diture responsibility for the grant?		N/A 🗌	'es No			
	If "Yes," attach the statement	required by Regulations section 53 4945-5(d)			_	i l	-	
6a	Did the foundation, during the	e year, receive any funds, directly or indirectly, to pay	premiums			1		
	on a personal benefit contrac	t?		\	es X No			
ь	•	e year, pay premiums, directly or indirectly, on a pers	onal benefit contract	2		6b		X_
	If "Yes" to 6b, file Form 8870							
7a		ar, was the foundation a party to a prohibited tax she	Iter transaction?		es X No	i l		
	, , ,	eive any proceeds or have any net income attributab		7	N/A	7b		
		About Officers, Directors, Trustees, Fo			aid Employee	s,		
	and Contract							
1		stees, foundation managers and their compensa	tion (see page 22 o	f the instructions	).			
			(b) Title, and average	(c) Compensation	(d) Contributions to			
	(	(a) Name and address	hours per week	(If not paid, enter	employee benefit plans and deferred		ense acco allowance	
			devoted to position	-0-)	compensation	Viller	anowance	,3
RC	BERT D. JENSEN	MUSCATINE	CHAIRMAN					
	00 WOODCREST LANE	IA 52761	1.00	0	o	,		0
	DANN M. JENSEN	MUSCATINE	SECRETARY		-			
	00 WOODCREST LANE	IA 52761	1.00	o	o	,		0
	EVIN D. JENSEN	MUSCATINE	DIRECTOR					
34	103 CLERMONT DRIVE	IA 52761	1.00	0	o	,		0
•	LE L. JENSEN	MUSCATINE	DIRECTOR					
	92 DEER RUN ROAD	IA 52761	1.00	۰ ا	0	,		0
		est-paid employees (other than those included o		23 of the instruc	tions).	-		_
	If none, enter "NONE."		. •					
			(b) Title, and average		(d) Contributions to	Ţ. <u>.</u>		
	(a) Name and address	of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred		ense acco allowance	
			devoted to position		compensation	Outer	anowance	,3
NO	DNE							
			1					
			1					
_								
			1	1				
	<del></del>							
			1					
_			1			T		_
			1					
Tota	I number of other employees p	paid over \$50,000		L	<u> </u>	<u> </u>	1	0
						-		

Form 990-PF (20	O10) JENSEN PRIVATE FOUNDATION, INC.	27-3945904		Page 7
Part VIII	· Information About Officers, Directors, Trustees, Foundat	ion Managers, Highly Paid Empl	oyees,	
	and Contractors (continued)			
3 Five high	est-paid independent contractors for professional services (see page 23	of the instructions). If none, enter "NONE	Ξ."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Comp	ensation
NONE				
		, in the second		
			-	
<u></u>				
Total number of	others receiving over \$50,000 for professional services	<del>-</del>	<u> </u>	l
Part IX-A	Summary of Direct Charitable Activities			
	n's four largest direct charitable activities during the tax year. Include relevant statistical infid other beneficiaries served, conferences convened, research papers produced, etc.	ormation such as the number of	Exper	nses
1 N/A				
•				
2				
3				
4				
			1	
Part IX-B	Summary of Program-Related Investments (see page 24			
	largest program-related investments made by the foundation during the tax year on lines 1	and 2	Amount	t .
1 N/A				
		<del></del>	<del></del>	
2				
All other program	-related investments See page 24 of the instructions			
3	and the second s			

Total. Add lines 1 through 3

qualifies for the section 4940(e) reduction of tax in those years

	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign	ın fot	ındatıons,
	see page 24 of the instructions )	·	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	li	
	purposes	-	
а	Average monthly fair market value of securities	1a	36,634
b	Average of monthly cash balances	1b	0
С	Fair market value of all other assets (see page 25 of the instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d_	36,634
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		_
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	36,634
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see page 25 of		
	the instructions)	4	550
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	36,084
6	Minimum investment return. Enter 5% of line 5	6	1,641
Pa	art XI. Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private ope	rating	
	foundations and certain foreign organizations check here ▶ and do not complete this part )		
1	Minimum investment return from Part X, line 6	1	1,641
2a	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010 (This does not include the tax from Part VI )		
С	Add lines 2a and 2b	2c	59
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,582
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5_	1,582
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	1,582
P:	art XII Qualifying Distributions (see page 25 of the instructions)		
		· · · · · ·	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	1a	0
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1b	
b	Program-related investments—total from Part IX-B	10	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	2	
	purposes		
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	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	-	
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	5	0
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	6	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	ستا	<del> </del>
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	ı	

Pa	rt XIII · Undistributed Income (see page 26 of the	ne instructions)		<del></del>	
1	Distributable amount for 2010 from Part XI,	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
	line 7				1,582
2	Undistributed income, if any, as of the end of 2010				
а	Enter amount for 2009 only				
b	Total for prior years 20 , 20 , 20			· · · · · · · · · · · · · · · · · · ·	
3	Excess distributions carryover, if any, to 2010				
а	From 2005				
b	From 2006				
С	From 2007				
d	From 2008				
е	From 2009				
f	Total of lines 3a through e				
4	Qualifying distributions for 2010 from Part XII,				
	line 4 ▶ \$				
а	Applied to 2009, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required—see page 26 of the instructions)				
C	Treated as distributions out of corpus (Election				
	required—see page 26 of the instructions)				
d	Applied to 2010 distributable amount	<del> </del>			
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2010	· • · ·			
	(If an amount appears in column (d), the same		<i>h</i>		
	amount must be shown in column (a) )		,:		
6	Enter the net total of each column as				
	indicated below:		İ		
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	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				
d	Subtract line 6c from line 6b Taxable				
	amount—see page 27 of the instructions		<u> </u>		
е	Undistributed income for 2009 Subtract line				
	4a from line 2a Taxable amount—see page				
	27 of the instructions				
f	Undistributed income for 2010 Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2011				1,582
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
	instructions)				
8	Excess distributions carryover from 2005 not				
	applied on line 5 or line 7 (see page 27 of the				
	instructions)				
9	Excess distributions carryover to 2011.				
	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9				
а	Excess from 2006				
b	Excess from 2007				
c	Excess from 2008				
d	Excess from 2009				
в	Excess from 2010				

3 Grants and Contributions Paid During the	Vear or Approved for Fu	ture Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
a Paid during the year				
N/A				
			1	
Total			▶ 3a	
b Approved for future payment	· · · · · · · · · · · · · · · · · · ·			
N/A				
Total			▶ 3b	

Page **12** 

	OIO) CHINDER TRITTED TOORDII		·			1 2 3 2
	<ul> <li>Analysis of Income-Producing Ac</li> </ul>			T		
Enter gross amo	ounts unless otherwise indicated	Unrelate	d business income	Exclude	d by section 512, 513, or 514	(e) Related or exempt
4 D		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See page 28 of the instructions)
1 Program ser				<del> </del>		
		_		<del>                                     </del>		<del></del>
		_	· ·-			<del> </del>
_		_				
		-				
f						
o Fees ar	nd contracts from government agencies					
-	dues and assessments					
	savings and temporary cash investments					
4 Dividends a	nd interest from securities			14	2,973	
5 Net rental in	come or (loss) from real estate					
a Debt-fin	anced property					
<b>b</b> Not deb	t-financed property			ļ .		
6 Net rental in	come or (loss) from personal property			ļ		
7 Other invest	tment income			ļ		
8 Gain or (los	s) from sales of assets other than inventory					
	or (loss) from special events					
	or (loss) from sales of inventory			<u> </u>		
	ue a	_		<del> </del>		
		_				· · · · · · · · · · · · · · · · · · ·
				<del>                                     </del>		
a		_		<del>                                     </del>		
9	Id columns (b) (d) and (o)		0	<del> </del>	2,973	0
	ld columns (b), (d), and (e) ine 12, columns (b), (d), and (e)	L		<u> </u>	13	2,973
	in line 13 instructions on page 29 to verify calculation	ine )				2,0,0
Part XVI-B			ent of Exempt Pu	rposes		
Line No. ▼	Explain below how each activity for which income accomplishment of the foundation's exempt purport	e is reported in col	umn (e) of Part XVI-A	contribute	ed importantly to the	he
	instructions)				<del></del>	
N/A						
<del></del>	-					
<del></del>				<del></del>		<del></del>
			<del></del>			
		•				
-						
						<del></del>
			····			
<del></del>						
					<u> </u>	

рап х			ion Rega Organiza	_	nsters to an	a iransac	tions and	Relationsni	ps with	Noncharita	ible		
1 Did					ın any of the follo	owing with an	v other organ	nization describ	ed			Yes	No
	-		=		n 501(c)(3) organı								
	anızatıon	` '	0000 (00.				,	,				l i	
_			rtına founda	tion to a non	charitable exemp	ot organizatioi	n of						
	Cash					<b>J</b>					1a(1)	•	X
	Other as	ssets									1a(2)		Х
	er transa												
			noncharital	ble exempt o	rganization						1b(1)		X
٠,				•	xempt organization	on					1b(2)		Х
٠,				or other asse							1b(3)		Х
			angements								1b(4)		Х
		r loan guara	•								1b(5)		Х
		•		mbership or i	fundraising solicit	ations					1b(6)		X
				•	er assets, or paid						1c		Х
					lete the following		olumn (b) sho	ould always sho	w the fair m	arket		<u> </u>	
					en by the reportin								
					, show in column								
(a) Lin		1	nt involved		of noncharitable exe	•		(d) Description of			haring arrange	ements	
N/A		(2),		(c) manie		<del>-</del>		<u> </u>				-	
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			•	•	oth, or related to,		-	rganizations			$\Box$ ,	T.	a
					nan section 501(c	:)(3)) or in sec	ction 527?				☐ Y	es X	J No
<b>b</b> If "Y		· <del>· · · · · · · · · · · · · · · · · · ·</del>	ollowing sch	edule				<del></del>					
27/7		Name of org	janization		(b) Type of	forganization		· · · · · · · · · · · · · · · · · · ·	(c) Descript	tion of relationshi	ip		
N/I	7						-						
										<del></del>			
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	Under pe	nalties of per	jury, I declare	that I have exa	amined this return, in of preparer (other th	ncluding accom	panying schedi	ules and statemer	its, and to the	best of my know	wledge and		
Sign	beller, it i	Conec	c, and condition	te Declaration	or preparer (other ti	ilali taxpayer ol	- / - /	ssed on an informa			iy kilowicage		
Here	1/2	oble	Olen	<u> </u>			2/23/1	<i></i>	CHAI	RMAN			
	<b>▼</b> Sign	ature of office	or trustee				Date /		Title	<del></del>	<del></del>	г —	
	Print/T	ype preparer	s name			Preparer's	signature				Date	Check	ıf
Paid							OR		_			1	ployed
Preparer	TODD	J. WHI				<u> </u>				0	3/16/11		
Jse Only	Firm's	name 🕨	ANDER			ITLOW,	PC			PTIN	P00115		
	Firm's	address 🕨			ST STE 2				1	Firm's EIN			
	1		BETTE	NDORF,	IA 527	22				Phone no	563-35	9-4	757

#### 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

2010

Name of the organization

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

. (1

<b>JENSEN</b>	PRIVATE FOUNDATION, INC. 2	<u>7-3945904</u>					
	ype (check one)						
Filers of:	Section:						
Form 990 or 990	0-EZ 501(c)( ) (enter number) organization						
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation						
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
Note. Only a se instructions	rganization is covered by the <b>General Rule</b> or a <b>Special Rule</b> . ection 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See						
General Rule							
	organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or ty) from any one contributor. Complete Parts I and II						
Special Rules							
section	section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations units 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the 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 II						
the yea	ection 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, duar, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, o ional purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III						
the yea aggreg year for applies	section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, durar, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not late to more than \$1,000. If this box is checked, enter here the total contributions that were received during their an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the <b>General Rule</b> to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or methe year.						
990-EZ, or 990-	ganization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 99 -PF), but it <b>must</b> answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, m 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	or on					

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

Page 1 of 1 of Part I

**Employer identification number** 

Name of organization 27-3945904 JENSEN PRIVATE FOUNDATION, INC. · Part I Contributors (see instructions) (d) (c) (a) Type of contribution Name, address, and ZIP + 4 **Aggregate contributions** No. 1 ROBERT D. AND JOANN M. JENSEN Person 400 WOODCREST LANE Payroll 400,000 Noncash MUSCATINE IA 52761 (Complete Part II if there is a noncash contribution) (d) (c) (a) (b) No. Name, address, and ZIP + 4 **Aggregate contributions** Type of contribution Person Payroli \$ Noncash (Complete Part II if there is a noncash contribution ) (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 Aggregate contributions Person **Payroll** \$ Noncash (Complete Part II if there is a noncash contribution ) (a) (b) (c) (d) Aggregate contributions No. Name, address, and ZIP + 4 Type of contribution Person Payroll \$ Noncash (Complete Part II if there is a noncash contribution) (d) (b) (c) (a) Name, address, and ZIP + 4 Aggregate contributions Type of contribution No. Person Payroll \$ Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution Person Payroll \$ Noncash (Complete Part II if there is a noncash contribution )

27-3945904

# **Federal Statements**

### Statement 1 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Description

2000 page						
	Beginning of Year	) 	End of Year	Basis of Valuation	_	Fair Market Value
VANGUARD MUTUAL FUNDS	\$	\$	402,973	COST	\$_	402,973
TOTAL	\$	0 \$	402,973		\$_	402,973

27-3945904

## **Federal Statements**

### Statement 2 - Form 990-PF, Part VII-A, Line 10 - Substantial Contributors

Name

Address

City, State, Zip\_\_\_\_

ROBERT D. AND JOANN M. JENSEN

400 WOODCREST LANE MUSCATINE IA 52761

27-3945904

# **Federal Statements**

### Statement 3 - Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000

Name of Manager	 Amount
ROBERT D. JENSEN JOANN M. JENSEN	\$ 200,000 200,000
TOTAL	\$ 400,000