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Form **990-PF**

Return of Private Foundation

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

OMB No 1545-0052

| | | t of the Treasury venue Service Note . The foundation may | be able to use a copy of this | | rting requirements. | ZU IU |
|--------------------------------------|----------|---|---|---------------------------|--|---|
| | | dar year 2010, or tax year beginning | | , and ending | | - |
| | | all that apply: Initial return Amended return | Initial return of a fo | rmer public charity | Final return | |
| Nar | ne of | foundation | | | A Employer identification | number |
| | | HILLS BANCORPORATION nd street (or P.O. box number if mail is not delivered to street | | 15 | 39-1890766 | |
| Nun | 10er a | 131 MAIN STREET | address) | Room/suite | B Telephone number 319-679-22 | 91 |
| City | or to | own, state, and ZIP code | | | C If exemption application is pe | |
| L | | HILLS, IA 52235 | | | D 1. Foreign organizations | , check here |
| H C | _ | type of organization: X Section 501(c)(3) e | | | Foreign organizations med check here and attach cor | mputation |
| <u> </u> | | ction 4947(a)(1) nonexempt charitable trust Lirket value of all assets at end of year J Account | Other taxable private foundating method: X Cash | Accrual | E If private foundation stat | |
| | | | Other (specify) | Accidar | under section 507(b)(1)(| , - |
| | ·\$ | 1,453,615. (Part I, cold | | pasis.) | F If the foundation is in a 6 under section 507(b)(1)(| |
| Pa | ırt I | | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
| | 1 | Contributions, gifts, grants, etc., received | 200,000. | | N/A | |
| | 2 | Check if the foundation is not required to attach Sch. B | | | | |
| | 3 | Interest on savings and temporary cash investments | 0.4 | 0.4.000 | | |
| | 4 | Dividends and interest from securities | 24,888. | 24,888. | | STATEMENT 1 |
| | | Gross rents | } | | | |
| | - ا | Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 | 11,172. | | | |
| že | h | Gross sales price for all assets on line to assets on line to | 22/2/20 | | | |
| Revenue | 7 | Capital gain set income (from Part/II/Cilina 2) | | 11,172. | | |
| Œ | 8 | Net short-term capital gain RECEI | VED | | | |
| | 9 | Income modifications | | | | |
| | 10a | Gross sales less returns and allowances | 2011 8 | | | _ <u></u> |
| | 1 | Less Cost of goods sold | 2 | | | |
| | l | Gross profit or (loss) Other income OGDEN | | | | |
| | 11 12 | Other income COULT | 236,060. | 36,060. | | - · · · · · · · · · · · · · · · · · · · |
| | 13 | Compensation of officers, directors, trustees, etc | 0. | 0. | | 0. |
| | 14 | Other employee salaries and wages | | | | . <u> </u> |
| | 15 | Pension plans, employee benefits | | | | |
| Ses | 16a | Legal fees | | | | |
| 2 | b | Accounting fees STMT 2 | 965. | 483. | | 482. |
| 到 | C | Other professional fees | | | | |
| 7 | 17 | Interest | | | ļ | |
| ⊕ | 18 | Taxes Depreciation and depletion | | | | |
| | 20 | Occupancy | | | <u> </u> | |
| 7 | 21 | Travel, conferences, and meetings | | | | |
| 5 | 22 | Printing and publications | | | | |
| 19.5 | 23 | Other expenses | | | | |
| i i i | 24 | Total operating and administrative | | | | |
| Appereignand Athinis Gative Expenses | 2 | expenses. Add lines 13 through 23 | 965. | 483. | | 482. |
| 3 | 25 | | 54,000. | | | 54,000. |
| • | 26 | Total expenses and disbursements. | E4 06E | 483. | | EA 402 |
| | 97 | Add lines 24 and 25 Subtract line 26 from line 12; | 54,965. | 483. | | 54,482. |
| | | Excess of revenue over expenses and disbursements | 181,095. | | | |
| | 1 | Net investment income (if negative, enter -0-) | 201,000 | 35,577. | | |
| | 1 | Adjusted net income (if negative, enter -0-) | | | N/A | |
| 0235 | | LUA For Banaguark Badustian Act Nation and | the instructions | | | Form 990-PF (2010) |

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8

54,482.

8 Enter qualifying distributions from Part XII, line 4

See the Part VI instructions.

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.

| | 990-PF (2010) HILLS BANCORPORATION FOUNDATION 3 rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4940(c) | | 89070 see ins | | | Page 4 |
|---------------|--|-------|------------------|---------------|-----|-----------------|
| | Exempt operating foundations described in section 4940(d)(2), check here \(\bigs\) and enter "N/A" on line 1. | | | | | |
| | Date of ruling or determination letter:(attach copy of letter if necessary-see instructions) | 1 | | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1% | _1 _ | | | 7 | 12. |
| | of Part I, line 27b | | | | | |
| C | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). | l | | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 2 | | _ | | 0. |
| 3 | Add lines 1 and 2 | 3 | | | 7 | <u> 12.</u> |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 4 | | | | <u>0.</u> |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | 5 | | | 7 | <u> 12.</u> |
| 6 | Credits/Payments; | - 1 | | | | |
| | 2010 estimated tax payments and 2009 overpayment credited to 2010 6a 331. | | | | | |
| | Exempt foreign organizations - tax withheld at source | - | | | | |
| | Tax paid with application for extension of time to file (Form 8868) | Ì | | | | |
| | Backup withholding erroneously withheld | 1 | | | _ | |
| 7 | Total credits and payments. Add lines 6a through 6d | 7 | | | 3 | <u>31.</u> |
| 8 | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached | 8 | | | | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | 9 | | | 3 | <u>81.</u> |
| 10 |) · · | 10 | | | | |
| | | 11 | | | | |
| $\overline{}$ | rt VII-A Statements Regarding Activities | | | —т | Yes | No |
| 18 | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in | 1 | - | $\overline{}$ | 162 | |
| | any political campaign? | | | <u>a</u> | | X |
| 0 | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? | | - | b | - | 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. | | ١. | . \ | | v |
| | Did the foundation file Form 1120-POL for this year? | | | C | | X |
| a | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | | | Į | | į |
| _ | (1) On the foundation. > \$ 0. (2) On foundation managers. > \$ 0. Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation | | İ | | | l |
| е | managers. > \$ 0. | | | l | | |
| • | Has the foundation engaged in any activities that have not previously been reported to the IRS? | | 1. | 2 | | х |
| ~ | If "Yes," attach a detailed description of the activities. | | <u> </u> | + | | |
| 9 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or | | į | | | |
| | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | | 3 | | X |
| 42 | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | ļ | a | | X |
| | If "Yes," has it filed a tax return on Form 990-T for this year? | N/ | | ь | | _ _ |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | , | | ; | | X |
| • | If "Yes," attach the statement required by General Instruction T. | | | | | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: | | | - 1 | | |
| | 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 la | aw |] | Ì | | |
| | remain in the governing instrument? | | | 3 | X | I |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? | | | , | 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) | | | ı | | ı |
| | IA | | | Ì | | ì |
| 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) | | | | | ı |
| | of each state as required by General Instruction G? If "No," attach explanation | | 8 | b | X | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calend | dar | | | | |
| | year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV | | | | | X |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses | | | 0 | | X |

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| Form 990-PF (2010) HILLS BANCORPORATION FOU Part VII-B Statements Regarding Activities for Which I | | Peguired (control | 39-18907 | 66 Page 6 |
|--|---|--|--|---|
| 5a During the year did the foundation pay or incur any amount to: Carry on propaganda, or otherwise attempt to influence legislation (section) Influence the outcome of any specific public election (see section 4955); of any voter registration drive? Provide a grant to an individual for travel, study, or other similar purposes Provide a grant to an organization other than a charitable, etc., organization 509(a)(1), (2), or (3), or section 4940(d)(2)? Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals? If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und section 53.4945 or in a current notice regarding disaster assistance (see instru Organizations relying on a current notice regarding disaster assistance check in the answer is "Yes" to question 5a(4), does the foundation claim exemption for expenditure responsibility for the grant? "Yes," attach the statement required by Regulations section 53.4946 Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract? Did the foundation, during the year, pay premiums, directly or indirectly, on a pif "Yes" to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax so if "Yes," did the foundation receive any proceeds or have any net income attribution information About Officers, Directors, Trust | n 4945(e))? or to carry on, directly or indirectly or described in section or educational purposes, or the described indirectly of the tax because it maintates 5-5(d). pay premiums on personal benefit contract? shelter transaction? | ectly, Ye Ye Ye for Ye In Regulations I/A Ye Ye | S X No | 5b X |
| Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their | compensation | | · | |
| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
| SEE STATEMENT 5 | | 0. | 0. | 0. |
| | | | | |
| 2 Compensation of five highest-paid employees (other than those inc | luded on line 1). If none | enter "NONE " | | |
| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
| NONE | | | | |
| | | | | |
| Total number of other employees paid over \$50,000 | | | > | 0 |

| Information About Officers, Directors, Trustees, Foundation | | 1890/66 Page/ |
|---|---------------------|------------------|
| Part VIII Paid Employees, and Contractors (continued) | nanagers, riigiliy | |
| 3 Five highest-paid independent contractors for professional services. If none, enter "NON | | |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Total number of others receiving over \$50,000 for professional services | | ▶ 0 |
| Part IX-A Summary of Direct Charitable Activities | | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical info, number of organizations and other beneficiaries served, conferences convened, research papers produced, e | | Expenses |
| 1 NONE | | |
| | | |
| | | 0. |
| 2 | | |
| | | |
| | | |
| 3 | | |
| | | |
| 4 | | |
| | | |
| | | |
| Part IX-B Summary of Program-Related Investments | | |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 | ınd 2. | Amount |
| 1 NONE | | |
| | | ^ |
| | | 0. |
| 2 | | |
| | | |
| All other program-related investments. See instructions. | | |
| 3 NONE | | |
| | | |
| | | 0. |
| Total Add lines 1 through 3 | > | 0. |

| P | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four | ndations, | see instructions.) |
|----|---|---------------|-----------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | |
| · | Average monthly fair market value of securities | 1a | 1,164,898. |
| b | Average of monthly cash balances | 1b | 1,164,898. 48,472. |
| - | Fair market value of all other assets | 1c | |
| d | | 1d | 1,213,370 |
| e | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) 1e 0. | ŀ | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0 |
| 3 | Subtract line 2 from line 1d | 3 | 1,213,370 |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 18,201 |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 1,195,169 |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 59,758. |
| P | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here in and do not complete this part.) | d certain | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 59,758 |
| 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.) | | |
| C | Add lines 2a and 2b | _2c | 712 |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 59,046. |
| 4 | Recoveries of amounts treated as qualifying distributions | _4 | 0. |
| 5 | Add lines 3 and 4 | _5 | 59,046 |
| 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 | 59,046 |
| P | art XII Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | T | |
| a | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 54,482 |
| b | Program-related investments - total from Part IX-B | 16 | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | |
| a | Suitability test (prior IRS approval required) | 3a | |
| b | Cash distribution test (attach the required schedule) | 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 54,482 |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | | |
| | income. Enter 1% of Part I, line 27b | 5 | 0. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 54,482. |
| | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years. | qualifies for | |

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Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2009 | (c) 2009 | (d) 2010 |
|--|---------------|----------------------------|-------------|---------------------------|
| 1 Distributable amount for 2010 from Part XI, | | | | 59,046. |
| 2 Undistributed income, if any, as of the end of 2010 | | | | 337010. |
| a Enter amount for 2009 only | Ì | | 53,253. | |
| b Total for prior years: | | 0 | 30,200 | |
| 3 Excess distributions carryover, if any, to 2010: | | 0. | | |
| a From 2005 | | | | |
| b From 2006 | | | | |
| c From 2007 | | | | |
| d From 2008 | | | | |
| e From 2009 | | | | |
| f Total of lines 3a through e | 0. | | | |
| 4 Qualifying distributions for 2010 from | | | | |
| Part XII, line 4: ▶\$ 54, 482. | ļ | | | |
| a Applied to 2009, but not more than line 2a | | | 53,253. | |
| b Applied to undistributed income of prior | | | 33,233. | |
| years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | | | | |
| (Election required - see instructions) | 0. | | | |
| d Applied to 2010 distributable amount | | · | | 1,229. |
| e Remaining amount distributed out of corpus | 0. | | | 1,225. |
| 5 Excess distributions carryover applied to 2010 | 0. | | | 0. |
| (If an amount appears in column (d), the same amount must be shown in column (a).) | | | | |
| 6 Enter the net total of each column as indicated below: | _ | | | |
| 2 Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 0. | | | |
| b Prior years' undistributed income. Subtract | | | | |
| line 4b from line 2b | | 0. | | ···· |
| c Enter the amount of prior years' | | | | |
| undistributed income for which a notice of deficiency has been issued, or on which | | | | |
| the section 4942(a) tax has been previously | | | | |
| assessed | | 0. | | |
| d Subtract line 6c from line 6b. Taxable | 1 | } | 1 | |
| amount - see instructions | | 0. | | |
| e Undistributed income for 2009. Subtract line | | | | |
| 4a from line 2a. Taxable amount - see instr. | | | 0. | |
| f Undistributed income for 2010. Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2011 | | | | 57,817. |
| 7 Amounts treated as distributions out of | | İ | | |
| corpus to satisfy requirements imposed by | | | | |
| section 170(b)(1)(F) or 4942(g)(3) | 0. | | | |
| 8 Excess distributions carryover from 2005 | _ | | | |
| not applied on line 5 or line 7 | 0. | | | |
| 9 Excess distributions carryover to 2011. | | | | |
| Subtract lines 7 and 8 from line 6a | 0. | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2006 | | | | |
| b Excess from 2007 | ļ | | | |
| c Excess from 2008 | | | | |
| d Excess from 2009 | | | ľ | |
| e Excess from 2010 | | | | |
| | | | | Form 900-DE (2010) |

| | ANCORPORATI | | | 39-18 | 90766 Page 10 |
|---|-------------------------------|------------------------------|---------------------------|------------------------------|--------------------|
| Part XIV Private Operating F | oundations (see ins | structions and Part VII | -A, question 9) | N/A | |
| 1 a If the foundation has received a ruling of | r determination letter that | it is a private operating | | | |
| foundation, and the ruling is effective fo | r 2010, enter the date of t | he ruling | ▶ | · | |
| b Check box to indicate whether the found | dation is a private operation | ig foundation described i | n section | 4942(j)(3) or 49 | 42(j)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | |
| income from Part I or the minimum | (a) 2010 | (b) 2009 | (c) 2008 | (d) 2007 | (e) Total |
| investment return from Part X for | | | | | |
| each year listed | | | | | ···· |
| b 85% of line 2a | | | | | |
| c Qualifying distributions from Part XII, | | | İ | | |
| line 4 for each year listed | | | | | |
| d Amounts included in line 2c not | | | | | |
| used directly for active conduct of | | | | | |
| exempt activities | | | | | |
| e Qualifying distributions made directly | | | | | |
| for active conduct of exempt activities. | | | | | |
| Subtract line 2d from line 2c 3 Complete 3a, b, or c for the | | | | - | |
| alternative test relied upon: | | | | | |
| a "Assets" alternative test - enter: (1) Value of all assets | | | | | |
| • | | | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | , | | | | |
| b "Endowment" alternative test - enter | | | | | ···· |
| 2/3 of minimum investment return shown in Part X, line 6 for each year | | | | | |
| listed | | | | | |
| c "Support" alternative test - enter: | | | | | |
| (1) Total support other than gross | j . | | | | |
| 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 | <u> </u> | | | | |
| (4) Gross investment income Part XV Supplementary Info | rmation (Comple | to this part only | if the foundation | had \$5,000 or me | re in accete |
| at any time during t | | | ii ule loulidatioi | r nau \$5,000 or me | ne iii assets |
| 1 Information Regarding Foundation | - | | | | |
| a List any managers of the foundation wh | _ | than 2% of the total cont | ributions received by the | e foundation before the clos | se of any tax |
| year (but only if they have contributed r | | | • | | , |
| NONE | | | | | |
| b List any managers of the foundation wh | | | or an equally large port | on of the ownership of a pa | artnership or |
| other entity) of which the foundation ha | is a 10% or greater interes | st. | | | |
| NONE | | | | | |
| 2 Information Regarding Contribut | | | | | |
| Check here X if the foundation of | only makes contributions t | to preselected charitable | organizations and does | not accept unsolicited requ | ests for funds. If |
| the foundation makes gifts, grants, etc. | | | | ompiete tiems za, b, c, and | <u>u.</u> |
| a The name, address, and telephone num | iber of the person to whor | n applications snould be | addressed: | | |
| N/A | | | | | |
| b The form in which applications should I | ne submitted and informat | tion and materials they sh | noniq ractude. | - | |
| N/A | oe submitted and anormal | ion and materials they si | iouiu inciduc. | | |
| c Any submission deadlines: | | | | | |
| N/A | | | | | |
| d Any restrictions or limitations on award | s, such as by geographica | il areas, charitable fields. | kinds of institutions, or | other factors: | |
| N/A | , , g gpou | , | 22 21 manana, 01 | | |
| | | | | | |
| | | | | | |

| 3 Grants and Contributions Paid During the Ye | ear or Approved for Future | Payment | | |
|---|--|--|----------------------------------|---------------------------------------|
| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | | · · · · · · · · · · · · · · · · · · · |
| a Paid during the year | | | | |
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| SEE STATEMENT 6 | | | | |
| Total b Approved for future payment | | | <u>▶</u> 3a | 54,000. |
| s Approved for lattire payment | | | | |
| | | | | |
| MONTE | | | | |
| NONE | | | | |
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| | | l | | |
| <u>Total</u> | | | ▶ 3b | 0. |

Part XVI-A **Analysis of Income-Producing Activities**

| Enter gross amounts unless otherwise indicated. | Unrelated | f business income | | led by section 512, 513, or 514 | (e) |
|---|--|--------------------------|---------------|---------------------------------|-------------------|
| | (a) Business | (b) | (c) Exclu- | (d) | Related or exempt |
| 1 Program service revenue; | Code | Amount | sion | Amount | function income |
| | 1 | | 1 | | |
| b | | | 1 | | |
| | | | 11 | | |
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| 0 | | | | | |
| e | | | | | |
| · · · · · · · · · · · · · · · · · · · | | | | | · |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | - | | | | |
| 3 Interest on savings and temporary cash | | | | | |
| investments | ļ | | - | | |
| 4 Dividends and interest from securities | | | 14 | 24,888. | |
| 5 Net rental income or (loss) from real estate: | | | | | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal | | | | | |
| property | | | | | |
| 7 Other investment income | | <u></u> | | | |
| 8 Gain or (loss) from sales of assets other | , , | | | - | |
| than inventory | | | 18 | 11,172. | |
| 9 Net income or (loss) from special events | | | | | |
| 10 Gross profit or (loss) from sales of inventory | | | | | |
| 11 Other revenue: | | | | | |
| a | | | l | | |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| 12 Subtotal. Add columns (b), (d), and (e) | | 0. | | 36,060. | 0. |
| 13 Total. Add line 12, columns (b), (d), and (e) | | | | | 36,060. |
| (See worksheet in line 13 instructions to verify calculations.) | | | _ | | |
| Part XVI-B Relationship of Activities to | a the Acco | molishment of Ex | omni | Burnoses | |
| relationship of Activities to | o die Acco | | cilib. | rurposes | |
| Line No. Explain below how each activity for which income | me is reported in | column (e) of Part XVI-A | contrib | uted importantly to the accom | plishment of |
| the foundation's exempt purposes (other than | by providing fun | ds for such purposes). | | | |
| NOT APPLICABLE | | | | | |
| | | | - | | |
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Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: 1a(1) (2) Other assets 1a(2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 16(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) X (5) Loans or loan guarantees 1b(5) X (6) Performance of services or membership or fundraising solicitations 15(6) X Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1c If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets. or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (c) Name of noncharitable exempt organization (a) Line no (b) Amount involved (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, an taxpayer or fiduciary) is based on all information of which preparer has any knowledge Sign Here THEASULEN Signature of officer or trustee Date Title Check PTIN Print/Type preparer's name Date Preparer's signature self-employed Paid JENNIFER GUSTAFSON P00555380 **Preparer** Firm's name ► RSM MCGLADREY, Firm's EIN ► 41-1944416 **Use Only** Firm's address ▶ 125 S DUBUQUE ST

IOWA CITY, IA 52240-4077

319-354-150<u>0</u>

Phone no.

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

➤ Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2010

Employer identification number

39-1890766 HILLS BANCORPORATION FOUNDATION Organization type (check one): Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990 EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

| Schedule B (F | orm 990, 990-EZ, or 990-PF) (2010) | | Page 1 of 1 of Part I |
|---------------|------------------------------------|-------------------------------|---|
| Name of or | | 1 | imployer identification number |
| HILLS | BANCORPORATION FOUNDATION | | 39-1890766 |
| Part I | Contributors (see instructions) | | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contribution | (d) ons Type of contribution |
| 1 | HILLS BANK AND TRUST COMPANY | | Person X |
| | 131 MAIN STREET | \$ 200,00 | Payroll |
| | HILLS, IA 52235 | | (Complete Part II if there is a noncash contribution.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contribution | (d) ons Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contribution | (d) ons Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contribution | (d) ons Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contribution | (d) Type of contribution |
| | | \$ | Person Payroll Noncash |

(b)

Name, address, and ZIP + 4

Person Payroll Noncash

(c)

Aggregate contributions

(Complete Part II if there is a noncash contribution.)

(d)

Type of contribution

(Complete Part II if there is a noncash contribution.)

(a)

No.

of Part II

Name of organization

Employer identification number

HILLS BANCORPORATION FOUNDATION

39-1890766

| Part II | Noncash Property (see instructions) | | |
|------------------------------|--|--|----------------------|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | _ _ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | _ _ _ _ \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash prop erty given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| <u></u> | | _ _ _ \$ | |

| na af a | riantina | | Page of |
|--------------------------|---|--|---|
| ne of organ | nization | | Employer identification number |
| (LLS I | more than \$1,000 for the year. Complet Part III, enter the total of exclusively reliqu | ndividual contributions to section 50 e columns (a) through (e) and the follow ous, charitable, etc., contributions of | 39-1890766 1(c)(7), (8), or (10) organizations aggregating wing line entry For organizations completing |
|) No. rom Part I | \$1,000 or less for the year. (Enter this int | (c) Use of gift | (d) Description of how gift is held |
| - - | | | |
| | | (e) Transfer of gift | -L |
| - | Transferee's name, address, a | nd ZIP + 4 | Relationship of transferor to transferee |
| n) No. From Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| - | | | |
| | | (e) Transfer of gift | |
| - | Transferee's name, address, a | nd ZIP + 4 | Relationship of transferor to transferee |
| rom I | Transferee's name, address, a | (c) Use of gift | Relationship of transferor to transferee (d) Description of how gift is held |
| rom I | | | |
| rom i | | | |
| i) No. from Part I | | (c) Use of gift (e) Transfer of gift | |
| Part I | (b) Purpose of gift Transferee's name, address, a | (c) Use of gift (e) Transfer of gift | (d) Description of how gift is held |
| rom I | (b) Purpose of gift | (c) Use of gift (e) Transfer of gift | (d) Description of how gift is held |
| Part I | (b) Purpose of gift Transferee's name, address, a | (c) Use of gift (e) Transfer of gift | (d) Description of how gift is held |

| (a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co. | | | | (c) Date acquired (mo., day, yr.) | (d) Date soid (mo., day, yr.) | | |
|---|--|----------------------------|---------------------------------------|---|----------------------------------|--|--|
| 1a 1265.513 SHS COLUMBIA ACORN FUND CLASS Z | | | | | 02/08/10 | | |
| b MATURED 75000 UNITS FEDERAL FARM CREDIT BANK | | | | | 03/15/10 | | |
| c 231.481 SHS GROWTH FUNOF AMERICAN | | | | VARIOUS | $\frac{12}{31}$ | | |
| d 598.291 SHS NORTHERN SMALL CAP VALUE FUND | | | | | 08/11/10 | | |
| e 121.422 SHS T ROWE PRICE MID CAP GROWTH | | | | VARIOUS | 12/31/10 | | |
| f 914.913 SHS VA | NGUARD SHORT-TER | M FEDERAL FD | P | VARIOUS | 09/07/10 | | |
| g 2.646 SHS COLUMBIA ACORN FUND CLASS Z | | | | VARIOUS | 02/08/10 | | |
| h LT CAP GAIN DI | | | P | | VARIOUS | | |
| 14,819 SHS NORT | HERN SMALL CAP V | ALUE FUND | P | VARIOUS | 08/11/10 | | |
| | | | | ļ | | | |
| <u>k</u> | | | | | | | |
| <u> </u> | | · | | | | | |
| <u>m</u> | | | | | | | |
| <u>n</u> | | | | | | | |
| 0 | (f) Depreciation allowed | (g) Cost or other basis | |) Gain or (loss) | <u> </u> | | |
| (e) Gross sales price | (or allowable) | plus expense of sale | (e) ; | lus (f) minus (g) | | | |
| a 29,271. | | 23,643. | | | 5,628. | | |
| b 75,000. | | 75,081. | | | -81. | | |
| c 7,000. | | 5,733. | | | 1,267. | | |
| d 7,413. | | 6,500. | | | 913. | | |
| e 7,000. | | 6,779. | | | 221. | | |
| 10,000. | | 10,037. | | | -37. | | |
| g 61. | | 62. | | | <u>-1.</u> | | |
| h 3,261. | | | | | <u>3,261.</u> | | |
| 1 60. | | 59. | | | 1. | | |
| <u> </u> | | | · · · · · · · · · · · · · · · · · · · | | | | |
| k i | | | | | | | |
| <u></u> | | | | | | | |
| n | | | | | | | |
| 0 | | | | | | | |
| Complete only for assets show | ng gain in column (h) and owned by | the foundation on 12/31/69 | (I) Los | ses (from col. (h)) | | | |
| (i) F.M.V. as of 12/31/69 | (j) Adjusted basis | (k) Excess of col. (i) | Gains (excess | Gains (excess of col. (h) gain over col. (k), but not less than "-0-") | | | |
| (1) 1.141.4. 43 01 12/01/03 | as of 12/31/69 | over col. (i), if any | | —————————————————————————————————————— | | | |
| <u>a</u> | | | | | 5,628. | | |
| <u>b</u> | | | | | -81. | | |
| <u>c</u> | | | | | 1,267. | | |
| <u>d</u> | | | | | 913. 221. | | |
| <u>e</u> f | | | | | -37 <u>.</u> | | |
| 9 | | | | | -1. | | |
| h | | | ··· | | 3,261. | | |
| 1 | | | | | 1. | | |
| J | | | | | | | |
| k | | | | | | | |
| <u> </u> | | | | | | | |
| <u>m</u> | | | | | | | |
| <u>n</u> | | | | | | | |
| 0 | | | | | | | |
| A. Canital gain not income as fact - | apital loss) { If gain, also enter if (loss), enter if | in Part I, line 7 | | | 11 170 | | |
| 2 Capital gain net income or (net c | | 、 1 | 2 | | 11,172. | | |
| 3 Net short-term capital gain or (lo if gain, also enter in Part I, line 8. | ss) as defined in sections 1222(5) an | ld (6): | | | | | |
| If (loss), enter "-0-" in Part I, line of | | <i>f</i> { | 3 | N/A | | | |

| | OS AND | INTER | EST FROM | SECUI | RITIES | STATEMENT | 1 |
|---|---------|-------------------------|-----------------------------|------------|------------------------------|---|-------|
| SOURCE | | GROSS | AMOUNT | | ITAL GAINS IVIDENDS | COLUMN (A) AMOUNT |) |
| DIVIDEND INCOME INTEREST | _ | - | 8,024. 16,864. | | 0. | 8,02 16,86 | |
| TOTAL TO FM 990-PF, PART I, I | LN 4 = | | 24,888. | | 0. | 24,88 | 38. |
| FORM 990-PF | AC | COUNTI | NG FEES | | | STATEMENT | 2 |
| DESCRIPTION | EXPE | A) NSES BOOKS | (B) NET INVI MENT INC | | (C) ADJUSTED NET INCOM | | |
| ACCOUNTING FEES | | 965. | | 483. | | 4.8 | 32. |
| FO FORM 990-PF, PG 1, LN 16B | | 965. | | 483. | | 482. | |
| FORM 990-PF U.S. AND S | STATE/ | CITY G | OVERNMENT | r ORL | CAMTONG | CMAMEMENT | _ |
| DESCRIPTION | | U.S | • OTHER | . <u>-</u> | | FAIR MARKET | 3 |
| DESCRIPTION US COVERNMENT OR IGATIONS | | GOV' | • OTHER | . <u>-</u> | OK VALUE | FAIR MARKET VALUE | r. |
| DESCRIPTION US GOVERNMENT OBLIGATIONS TOTAL U.S. GOVERNMENT OBLIGATIONS | rions | | • OTHER | . <u>-</u> | | FAIR MARKET | 97. |
| US GOVERNMENT OBLIGATIONS | | GOV' | OTHER GOV'T | . <u>-</u> | 332,697. | FAIR MARKET VALUE 332,69 | 97. |
| US GOVERNMENT OBLIGATIONS TOTAL U.S. GOVERNMENT OBLIGAT | /ERNMEI | GOV' | OTHER GOV'T | . <u>-</u> | 332,697. | FAIR MARKET VALUE 332,69 | 97. |
| US GOVERNMENT OBLIGATIONS TOTAL U.S. GOVERNMENT OBLIGATIONS TOTAL STATE AND MUNICIPAL GOVERNMENT | /ERNMEI | GOV' | OTHER GOV'T | . <u>-</u> | 332,697. 332,697. | FAIR MARKET VALUE 332,69 | 97. |
| US GOVERNMENT OBLIGATIONS TOTAL U.S. GOVERNMENT OBLIGAT TOTAL STATE AND MUNICIPAL GOV TOTAL TO FORM 990-PF, PART II | /ERNMEI | GOV' X NT OBL | OTHER GOV'T | BOO | 332,697. 332,697. | FAIR MARKET VALUE 332,69 332,69 | 97. |
| US GOVERNMENT OBLIGATIONS TOTAL U.S. GOVERNMENT OBLIGAT TOTAL STATE AND MUNICIPAL GOVERNMENT TOTAL TO FORM 990-PF, PART INTERMEDIATE TOTAL TO FORM 990-PF, PART INTERMEDIATE TOTAL TO FORM 990-PF | /ERNMEI | GOV' X NT OBL E 10A VAI | OTHER GOV'T | BOO | 332,697. 332,697. | FAIR MARKET VALUE 332,69 332,69 STATEMENT FAIR MARKET | 97. |

| | | T OF OFFICERS, DIRECTORS FOUNDATION MANAGERS | | | |
|--|--------------------------|--|---------------------------------|---------|--|
| NAME AND ADDRESS | TITLE AND AVRG HRS/WK | | EMPLOYEE BEN PLAN CONTRIB | EXPENSE | |
| JOHN BENSON 131 MAIN STREET HILLS, IA 52235 | SECRETARY 1.00 | 0. | 0. | 0. | |
| DR. WILLIAM H. OLIN 131 MAIN STREET HILLS, IA 52235 | VICE PRES 1.00 | 0. | 0. | 0. | |
| ANN M. RHODES 131 MAIN STREET HILLS, IA 52235 | DIRECTOR 1.00 | 0. | 0. | 0. | |
| EARLIS ROHRET 131 MAIN STREET HILLS, IA 52235 | VICE PRES 1.00 | 0. | 0. | 0. | |
| DWIGHT O. SEEGMILLER 131 MAIN STREET HILLS, IA 52235 | PRESIDENT 1.00 | 0. | 0. | 0. | |
| JAMES G. PRATT 131 MAIN STREET HILLS, IA 52235 | TREASURER 5.00 | 0. | 0. | 0. | |
| WILLIS M. BYWATER 131 MAIN STREET HILLS, IA 52235 | DIRECTOR 1.00 | 0. | 0. | 0. | |
| TOTALS INCLUDED ON 990-PF, PA | GE 6, PART VIII | 0. | 0. | 0. | |

| | AND CONTRIBUTIONS DURING THE YEAR | STATEMENT 6 | | |
|---|--|---------------------|---------|--|
| RECIPIENT NAME AND ADDRESS | RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT | RECIPIENT STATUS | AMOUNT | |
| CEDAR RAPIDS SCHOOLS - DISTRICT FOUNDATION 907 15TH ST SW CEDAR RAPIDS, IA 52404-1700 | NONE FOR COMMUNITY DEVELOPMENT | PUBLIC | 11,000. | |
| HANCHER PROGRAMS - UNIVERSITY OF IOWA FOUNDATION PO BOX 4550 IOWA CITY, IA 52244 | FOR COMMUNITY | PUBLIC | 5,000. | |
| IOWA 4-H FOUNDATION IOWA STATE UNIVERSITY AMES, IA 50011-3630 | NONE FOR LEADERSHIP GRANTS | PUBLIC | 20,000. | |
| UNIVERSITY OF IOWA UNIVERSITY OF IOWA IOWA CITY, IA 52242 | NONE FOR ENTREPRENEURSHIP CAMP | PUBLIC | 3,000. | |
| ICCSD FOUNDATION - IOWA CITY HIGH SPORTS COMPLEX 509 S. DUBUQUE ST IOWA CITY, IA 52240 | NONE FOR COMMUNITY DEVELOPMENT | PUBLIC | 5,000. | |
| MARION COMMUNITY SCHOOL DISTRICT 777 S. 15TH STREET MARION, IA 52302 | NONE FOR COMMUNITY DEVELOPMENT | PUBLIC | 2,500. | |
| NORTH LIBERTY COMMUNITY LIBRARY 520 WEST CHERRY STREET NORTH LIBERTY, IA 52317 | NONE FOR LIBRARY EXPANSION | PUBLIC | 5,000. | |
| COLLEGE COMMUNITY FOUNDATION 401 76TH AVENUE SW CEDAR RAPIDS, IA 52404-1700 | NONE FOR COMMUNITY DEVELOPMENT | PUBLIC | 2,500. | |
| TOTAL TO FORM 990-PF, PART XV, LI | NE 3A | | 54,000. | |

5/12

Form **8868** (Rev. January 2011)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No. 1545-1709

Form 8868 (Rev. 1-2011)

| If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box | | | | | | X | |
|--|---|------------------|---|-----------------|--------------------------|---------------|--|
| | you are filing for an Additional (Not Automatic) 3-Month | | | form). | | | |
| Do r | not complete Part II unless you have already been grant | ed an automa | atic 3-month extension on a previously f | il ed Fo | rm 8868. | | |
| Elec | tronic filing (e-file). You can electronically file Form 886 | 8 if you need | a 3-month automatic extension of time | to file (| 6 months for a corp | oration | |
| requ | ured to file Form 990-T), or an additional (not automatic) 3 | -month exten | sion of time. You can electronically file I | Form 8 | 868 to request an e | xtension | |
| of tin | me to file any of the forms listed in Part I or Part II with the | exception o | f Form 8870, Information Return for Trai | nsfers | Associated With Ce | rtain | |
| Pers | onal Benefit Contracts, which must be sent to the IRS in | paper format | (see instructions). For more details on t | he ele | ctronic filing of this f | orm, | |
| | www rs gov/efile and click on e-file for Charities & Nonpr | | | | | | |
| Pa | | | | | | | |
| | rporation required to file Form 990-T and requesting an a | utomatic 6-m | onth extension - check this box and cor | nplete | _ | _ | |
| - | I only | | | | > | | |
| | ther corporations (including 1120-C filers), partnerships, I | REMICs, and | trusts must use Form 7004 to request a | n exter | nsion of time | | |
| to file income tax returns. | | | | | | | |
| Туре | | | Employer identification number | | | | |
| print | | | | 20 4000755 | | | |
| File by | HILLS BANCORPORATION FOUR | | | | 9-1890766 | - | |
| due de filing y | ate for Number, street, and room or suite no. If a P.O. bo | ox, see instruc | ctions. | | | | |
| eturn | See 131 MAIN SINEEL | o foreign add | draga and making at in a | | | | |
| nstruc | ctions. City, town or post office, state, and ZIP code. For HILLS, IA 52235 | a loreign auc | aress, see instructions. | | | | |
| | HILLD, IR 32233 | | | | | | |
| Ente | r the Return code for the return that this application is for | r ífile a senara | ite application for each return) | | | 0 4 | |
| | The field for the forth that the application is | (mo a sopare | is application for each return, | • | | نقاب | |
| laaA | lication | Return | Application | | Ret | | |
| is Fo | | Code | Is For | | | Code | |
| | 1 990 | 01 | Form 990-T (corporation) | | | 07 | |
| | 1 990-BL | 02 | Form 1041-A | | | 08 | |
| Form | 1 990-EZ | 03 | Form 4720 | | | 09 | |
| Form | 1 990-PF | 04 | Form 5227 | | | 10 | |
| Form | 990-T (sec 401(a) or 408(a) trust) | 05 | Form 6069 | | | 11 | |
| orm | 990-T (trust other than above) | 06 | Form 8870 | | | 12 | |
| | HILLS BANK & | TRUST | COMPANY | | | | |
| • Th | ne books are in the care of 131 MAIN STRE | <u> EET - H</u> | ILLS, IA 52235 | | | | |
| Τe | elephone No. ► 319-679-2291 | _ | FAX No | | | | |
| | the organization does not have an office or place of busil | | | | > | | |
| • If | this is for a Group Return, enter the organization's four d | igit Group Exi | emption Number (GEN) If th | is is fo | r the whole group, c | heck this | |
| | if it is for part of the group, check this box | | ich a list with the names and EINs of all | | ers the extension is | for. | |
| 1 | I request an automatic 3-month (6 months for a corpora | | | | | | |
| | AUGUST 15, 2011 , to file the exe | mpt organiza | tion return for the organization named a | bove. | The extension | | |
| | is for the organization's return for: | | | | | | |
| | ► X calendar year 2010 or | | | | | | |
| | tax year beginning | , an | d ending | | _ · | | |
| _ | M. M. J. J. J. J. J. J. J. J. J. J. J. J. J. | | | | | | |
| 2 | If the tax year entered in line 1 is for less than 12 month | s, check reas | on: Initial return Fina | al retur | n | | |
| | Change in accounting period | | | | | | |
| | If the application is for Fam. 200 St. 200 ST. 200 T. | 20. == 0000 | | r - | r | | |
| 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any | | | | | ^ | | |
| _ | nonrefundable credits. See instructions. 3a \$ | | | | | 0. | |
| b if this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and | | | | 221 | | | |
| _ | estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$ | | | 331. | | | |
| С | | | | | | 0. | |
| ٠ | ion, If you are going to make an electronic fund withdraw | | | 3c | EO for payment inch | | |
| -aut | 1511. I TOU GO GOING WILLIAMS ON CIGCUOLIC IULIU WILLIUIDIA | רוו ווווייד ובי | ,,,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | JU1 3" | | - GUNUI 13. | |

For Paperwork Reduction Act Notice, see Instructions.