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Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0047

2010Open to Public
Inspection

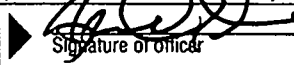
A For the 2010 calendar year, or tax year beginning _____ and ending _____	
B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	C Name of organization East Central Iowa Charitable Trust Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite 2771 Oakdale Blvd. Suite 4 City or town, state or country, and ZIP + 4 Coralville, IA 52241 F Name and address of principal officer: Bradford C. Zuber 2771 Oakdale Blvd. Suite 4, Coralville, IA
D Employer identification number 39-6659806	
E Telephone number 319-338-1522	
G Gross receipts \$ 4,454,324.	
H(a) Is this a group return for affiliates? ☐ Yes ☒ No	
H(b) Are all affiliates included? ☐ Yes ☐ No	
If "No," attach a list. (see instructions)	
H(c) Group exemption number ▶	
I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c)() ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527	
J Website: ▶ N/A	
K Form of organization: ☐ Corporation ☒ Trust ☐ Association ☐ Other ▶	
L Year of formation: 1997 M State of legal domicile: IA	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>Making cash grants to other organizations exempt under Section 501(c)(3) of the Internal Revenue</u>		
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	2
	4	Number of independent voting members of the governing body (Part VI, line 1b)	2
	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	0
	6	Total number of volunteers (estimate if necessary)	0
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	0.
7b	Net unrelated business taxable income from Form 990-T, line 34	0.	
Revenue	8	Contributions and grants (Part VIII, line 1h)	2,198,149.
	9	Program service revenue (Part VIII, line 2g)	0.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	10,110.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	67,596.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	0.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	2,208,259.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	2,533,791.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.
	16b	Total fundraising expenses (Part IX, column (D), line 25) ▶	0.
Expenses	17	Other expenses (Part IX, column (A), lines 11d, 11f-24f)	61,725.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	64,444.
	19	Revenue less expenses. Subtract line 18 from line 12	2,595,516.
	20	Total assets (Part X, line 1b)	-387,257.
Net Assets or Fund Balances	21	Total liabilities (Part X, line 26)	992,161.
	22	Net assets or fund balances. Subtract line 21 from line 20	7,038,776.
	23	Beginning of Current Year	8,029,250.
24	End of Year	0.	
25	Net assets or fund balances. Subtract line 21 from line 20	7,038,776.	

Part II Signature Block

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

Sign Here	Signature of officer 	Date	5-10-11
	Bradford C. Zuber, Sr. Vice President & Trust Officer Type or print name and title		
Paid	Print/Type preparer's name	Preparer's signature	Date
Preparer Use Only	Firm's name ▶ Shuttleworth & Ingersoll, P.L.C.	Firm's EIN ▶	PTIN
	Firm's address ▶ 115-3rd Street SE, Suite 500	Phone no. 319-365-9461	
	Cedar Rapids, IA 52406-2107		

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

032001 02-22-11 LHA For Paperwork Reduction Act Notice, see the separate instructions.

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See Schedule O for Organization Mission Statement Continuation

SCANNED JUN 16 2011

9-16 24

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III ☐**1** Briefly describe the organization's mission:

Making cash grants to other organizations exempt under Section 501(c)(3) of the Internal Revenue Code and which are not private foundations under Section 509 of the Internal Revenue Code.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: _____) (Expenses \$ 2,373,821. including grants of \$ 2,373,821.) (Revenue \$ _____)
See grant schedule attached. All grants made by the East Central Iowa Charitable Trust were made to organizations which are tax exempt organizations under Section 501(c)(3) of the Internal Revenue Code and which are not private foundations under Section 509 of the Internal Revenue Code. All grants are made in the form of cash.

4b (Code: _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4c (Code: _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4d Other program services. (Describe in Schedule O.)

(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e Total program service expenses 2,373,821.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>		X
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	X	
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)		

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Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	☒	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		☒
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		☒
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25		☒
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		☒
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		☒
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		☒
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III		☒
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		☒
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		☒
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	☒	
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	☒	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		☒
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		☒
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		☒
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		☒
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1		☒
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?		☒
a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 ☐ Yes ☒ No		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		☒
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		☒
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	☒	

Note. All Form 990 filers are required to complete Schedule O

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Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	0	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	0	
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
4b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		X
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		X
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state?		
13b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
13c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

Check if Schedule O contains a response to any question in this Part VI

☒**Section A. Governing Body and Management**

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	2	
1b Enter the number of voting members included in line 1a, above, who are independent	2	
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	X	
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6 Does the organization have members or stockholders?		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?		X
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13 Does the organization have a written whistleblower policy?		X
14 Does the organization have a written document retention and destruction policy?		X
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official		X
b Other officers or key employees of the organization		X
If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **IA**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **Bradford C. Zuber - 319-338-1522**
2771 Oakdale Blvd. Suite 4, Coralville, IA 52241

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees, officers; key employees; highest compensated employees, and former such persons

☒ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

[illegible]

[illegible]

2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization	0
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3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	X
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	X

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. **NONE**

(A) Name and business address	(B) Description of services	(C) Compensation

2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization	0
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Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	3,362,830.				
	g	Noncash contributions included in lines 1a-1f \$		552,285.				
	h	Total. Add lines 1a-1f		3,362,830.				
Program Service Revenue			Business Code					
	2 a							
	b							
	c							
	d							
	e							
	f	All other program service revenue						
g	Total. Add lines 2a-2f							
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		56,521.			56,521.	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6 a	Gross Rents	(i) Real	(ii) Personal				
		b	Less: rental expenses					
		c	Rental income or (loss)					
	d	Net rental income or (loss)						
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b	Less: cost or other basis and sales expenses					
		c	Gain or (loss)					
		d	Net gain or (loss)					
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
		b	Less: direct expenses	b				
		c	Net income or (loss) from fundraising events					
		9 a	Gross income from gaming activities. See Part IV, line 19	a				
			b	Less: direct expenses	b			
			c	Net income or (loss) from gaming activities				
		10 a	Gross sales of inventory, less returns and allowances	a				
			b	Less: cost of goods sold	b			
			c	Net income or (loss) from sales of inventory				
		Miscellaneous Revenue			Business Code			
	11 a							
b								
c								
d		All other revenue						
e		Total. Add lines 11a-11d						
12	Total revenue. See instructions.			3,430,426.	0.	0.	67,596.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	2,373,821.	2,373,821.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a Custodial and recordkeeper	64,444.		64,444.	
b				
c				
d				
e				
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	2,438,265.	2,373,821.	64,444.	0.
26 Joint costs. Check here ☐ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X. Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	1,883.	1	5,000.
	2 Savings and temporary cash investments	4,418,249.	2	5,321,700.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b	10c	
	11 Investments - publicly traded securities	772,759.	11	874,542.
	12 Investments - other securities. See Part IV, line 11	1,845,885.	12	1,828,008.
	13 Investments - program related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	7,038,776.	16	8,029,250.	
Liabilities	17 Accounts payable and accrued expenses		17	
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	0.	26	0.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets		27	
	28 Temporarily restricted net assets	7,038,776.	28	8,029,250.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	7,038,776.	33	8,029,250.
34 Total liabilities and net assets/fund balances	7,038,776.	34	8,029,250.	

Form 990 (2010)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response to any question in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,430,426.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,438,265.
3	Revenue less expenses. Subtract line 2 from line 1	3	992,161.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7,038,776.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-1,687.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	8,029,250.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII ☐

- 1 Accounting method used to prepare the Form 990:
- ☒
- Cash
- ☐
- Accrual
- ☐
- Other

If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O

- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?

- b Were the organization's financial statements audited by an independent accountant?

- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

- d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both

☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis

- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		X
2b		X
2c		
3a		X
3b		

Form 990 (2010)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization

East Central Iowa Charitable Trust

Employer identification number

39-6659806

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 ☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)
- 3 ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 ☐ A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)
- 6 ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)
- 8 ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)
- 9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h
- a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f ☐ If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? ☐
- (ii) A family member of a person described in (i) above? ☐
- (iii) A 35% controlled entity of a person described in (i) or (ii) above? ☐
- h Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

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

Schedule A (Form 990 or 990-EZ) 2010

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	3199997.	4250564.	2541489.	2198149.	3362830.	15553029.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	3199997.	4250564.	2541489.	2198149.	3362830.	15553029.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						9908839.
6 Public support. Subtract line 5 from line 4						5644190.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	3199997.	4250564.	2541489.	2198149.	3362830.	15553029.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	172,521.	221,547.	183,256.	69,221.	56,521.	703,066.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support. Add lines 7 through 10						16256095.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ☐						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	34.72 %
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	36.14 %
16a 33 1/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ☒		
b 33 1/3% support test - 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ☐		
17a 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ☐		
b 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ☐		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ☐		

Schedule A (Form 990 or 990-EZ) 2010

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ☐						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2010.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

b **33 1/3% support tests - 2009.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

- Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization

East Central Iowa Charitable Trust

Employer identification number

39-6659806

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	<u>77</u>	
2 Aggregate contributions to (during year)	<u>3,362,830.</u>	
3 Aggregate grants from (during year)	<u>2,373,321.</u>	
4 Aggregate value at end of year	<u>8,038,198.</u>	

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☒ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☒ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (e.g., recreation or education)	☐ Preservation of an historically important land area
☐ Protection of natural habitat	☐ Preservation of a certified historic structure
☐ Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Tax Year
a Total number of conservation easements	<u>2a</u>
b Total acreage restricted by conservation easements	<u>2b</u>
c Number of conservation easements on a certified historic structure included in (a)	<u>2c</u>
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	<u>2d</u>

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4 Number of states where property subject to conservation easement is located ►

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1	► \$ <u> </u>
(ii) Assets included in Form 990, Part X	► \$ <u> </u>

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1	► \$ <u> </u>
b Assets included in Form 990, Part X	► \$ <u> </u>

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a ☐ Public exhibition
- b ☐ Scholarly research
- c ☐ Preservation for future generations
- d ☐ Loan or exchange programs
- e ☐ Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No
- b If "Yes," explain the arrangement in Part XIV and complete the following table
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No
- b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

- | | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|--|------------------|----------------|--------------------|----------------------|---------------------|
| 1a Beginning of year balance | | | | | |
| b Contributions | | | | | |
| c Net investment earnings, gains, and losses | | | | | |
| d Grants or scholarships | | | | | |
| e Other expenditures for facilities and programs | | | | | |
| f Administrative expenses | | | | | |
| g End of year balance | | | | | |
- 2 Provide the estimated percentage of the year end balance held as:
- a Board designated or quasi-endowment ☐ _____ %
- b Permanent endowment ☐ _____ %
- c Term endowment ☐ _____ %
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|--------|----|
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
| b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				0.

Schedule D (Form 990) 2010

Part VII Investments - Other Securities. See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) 12,781.863 SHS VANGUARD		
(B) 500 INDEX FUND SIGNAL		
(C) SHARES	1,290,086.	Cost
(D) 50,959.927 SHS VANGUARD		
(E) TOTAL BOND MARKET INDEX		
(F) FUND #84	537,922.	Cost
(G)		
(H)		
(I)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)	1,828,008.	

Part VIII Investments - Program Related. See Form 990, Part X, line 13

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)		

Part IX Other Assets. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.)	

Part X Other Liabilities. See Form 990, Part X, line 25

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)	

FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

032053
12-20-10

Schedule D (Form 990) 2010

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net) Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4; Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

East Central Iowa Charitable Trust

Part I	General Information on Grants and Assistance
--------	--

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed.

[illegible]

2 Enter total number of section 501(c)(3) and government organizations

3 Enter total number of other organizations

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2010)

EAST CENTRAL IOWA CHARITABLE TRUST
EIN 39-6659806
Form 990, Calendar Year 2010

Schedule I, Part II, Line 1
Grants and Other Assistance to Organizations,
Governments and Individuals in the U.S.

(a) Name and address of organization	(b) EIN	(d) Amount of cash grant
All Saints Catholic Church 720 29 th Street SE Cedar Rapids, IA 52403	42-0698056	16,000.00
Ambassadors for Christ International PO Box 470 Tucker, GA 30085	58-1303476	6,000.00
American Cancer Society 4080 1 st Avenue NE, Ste 101 Cedar Rapids, IA 52402	13-1788491	5,750.00
Billy Graham Evangelistic Association One Billy Graham Parkway Charlotte, NC 28201	41-0692230	5,300.00
Camp Courageous PO Box 418 12007 190th St. Monticello, IA 52310-0418	23-7210932	7,250.00
Campus Crusade for Christ PO Box 628222 Orlando, FL 32862-8222	95-2814920	27,040.00
Cedar Hills Community Church 6455 E Ave NW Cedar Rapids, IA 52405	Not Available	20,000.00
Central Christian Church 3475 Kimball Avenue Waterloo, IA 50701	Not Available	7,000.00
Children's Relief International PO Box 2470 Rockwall, TX 75087	36-4353904	20,650.00
Christ Episcopal Church 220 40th Street NE Cedar Rapids, IA 52402	39-1879934	7,000.00
Earthwatch Institute 3 Clock Tower Place, Suite 100 PO Box 75 Maynard, MA 01754-0075	23-7168440	11,000.00

EAST CENTRAL IOWA CHARITABLE TRUST
EIN: 39-6659806
Form 990, Calendar Year 2010

Schedule I, Part II, Line 1
Grants and Other Assistance to Organizations,
Governments and Individuals in the U.S.

(a) Name and address of organization	(b) EIN	(d) Amount of cash grant
East Union Mennonite Church 5615 Gable Ave Kalona, IA 52247	42-0733455	8,200.00
Echo Hill Presbyterian Church PO Box 11335 Cedar Rapids, IA 52410	26-1157921	20,000.00
Evangelical Lutheran Church in America P O Box 71764 Chicago, IL 60631-4179	Not Available	10,000.00
Fairfield Evergreen Cemetery Association 510 East Stone Ave. Fairfield, IA 52556	42-0239990	7,000.00
Faith Baptist Church 1251 Village Road Iowa City, IA 52240	Not Available	7,200.00
Family Research Council 801 G Street NW Washington, DC 20001	52-1792772	10,000.00
First Mennonite Church 405 Myrtle Avenue Iowa City, IA 52246	42-1021960	6,000.00
First United Methodist Church 214 East Jefferson St. Iowa City, IA 52240	42-0772560	7,752.88
Four Oaks Foundation 5400 Kirkwood Blvd SW Cedar Rapids, IA 52404-9973	42-1358316	16,500.00
Grace Community Church 2707 Dubuque St. NE North Liberty, IA 52317	42-1192395	27,000.00
Harvest Preserve Foundation PO Box 2443 Iowa City, IA 52244-2443	20-2420512	60,000.00
Heritage Christian School 2709 Dubuque Street NE North Liberty, IA 52317	42-1386017	250,000.00
Johnson County Crisis Center 1121 Gilbert Court Iowa City, IA 52240-4528	42-0955992	11,350.00
Lutheran Interparish School PO Box 750 Williamsburg, IA 52361	Not Available	9,574.00

EAST CENTRAL IOWA CHARITABLE TRUST
EIN 39-6659806
Form 990, Calendar Year 2010

Schedule I, Part II, Line 1
Grants and Other Assistance to Organizations,
Governments and Individuals in the U.S.

(a) Name and address of organization	(b) EIN	(d) Amount of cash grant
Maranatha Bible Church 526 Third Ave SW Cedar Rapids, IA 52404	42-1140036	46,700.00
Mercy Medical Center Foundation 701 Tenth St. SE Cedar Rapids, IA 52403	51-0233180	12,000 00
Nazareth Evangelical Lutheran Church 7401 University Avenue Cedar Falls, IA 50613	Not Available	30,000.00
Newman Catholic Student Center Foundation 104 East Jefferson Street Iowa City, IA 52245	42-0957121	54,941 25
Northwestern College 3003 Snelling Ave North St Paul, MN 55113-1598	41-07116610	19,622 22
Parkview Evangelical Free Church 15 Foster Road Iowa City, IA 52245	42-0989258	125,500 00
Pathways Adult Day Health Center 817 Pepperwood Lane Iowa City, IA 52240-7005	42-1457018	16,000 00
Riverside Theatre 213 North Gilbert Street Iowa City, IA 52245-2125	42-1188839	10,000.00
Salvation Army 1000 C Ave NW Cedar Rapids, IA 52405	36-2167910	9,000 00
Samaritan's Purse PO Box 3000 Boone, NC 28607	Not Available	5,050.00
Seeds of Faith Lutheran Church 221 1 st St NE, Ste. 1 Mt. Vernon, IA 52314	Not Available	6,500.00
Self-Realization Fellowship Church 3880 San Rafael Ave Los Angeles, CA 90065-3219	Not Available	10,000.00
Shattuck-St. Mary's School 1000 Shumway Ave. PO Box 218 Faribault, MN 55021	41-0696908	20,000.00
St. Francis Prayer Center G-2381 E Carpenter Road Flint, MI 48505	38-2292386	50,000 00

Schedule I, Part II, Line 1
 Grants and Other Assistance to Organizations,
 Governments and Individuals in the U.S.

(a) Name and address of organization	(b) EIN	(d) Amount of cash grant
St. Joseph's Catholic Church P O. Box 145 Wellman, IA 52353	Not Available	6,000.00
St Luke's Health Care Foundation 855 A Avenue NE, Ste 105 Cedar Rapids, IA 52402	42-1106819	10,000 00
St. Mary's Catholic Church 302 East Jefferson Street Iowa City, IA 52240	Not Available	20,825 00
St Paul's United Methodist Church 803 Clearview Dr Williamsburg, IA 52361	Not Available	8,000.00
St. Paul's Lutheran Church 404 E Jefferson St Iowa City, IA 52245	Not Available	6,000 00
The Navigators PO Box 6000 Colorado Springs, CO 80934	Not Available	6,250.00
Trees Forever 770 7 th Avenue Marion, IA 52302	42-1419181	20,000 00
Trinity Episcopal Church 204 East 5 th Street Ottumwa, IA 52501-2626	Not Available	5,400 00
Turning Point Ministries Box 3838 San Diego, CA 92163	33-0095805	830,100 00
United Way of East Central Iowa 1030 5 th Ave SE Cedar Rapids, IA 52403	Not Available	6,000.00
University of Iowa Foundation PO Box 4550 Iowa City, IA 52244-4550	42-0796760	173,475.00
Wartburg College 100 Wartburg Blvd. Waverly, IA 50677	42-0680351	22,000 00
Williamsburg Community School District Foundation 810 W. Walnut P O. Box 120 Williamsburg, IA 52361	42-1468053	30,000 00
Young Life Foundation P.O. Box 520 Colorado Springs, CO 80901-0520	84-0385934	8,000.00

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

▶ Complete if the organization answered
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2010

Open To Public
Inspection

Name of the organization

East Central Iowa Charitable Trust

Employer identification number

39-6659806

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958

▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

▶ \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No

Total ▶ \$

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance

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

Schedule L (Form 990 or 990-EZ) 2010

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
Dwight O. Seegmiller	Mr. Seegmiller is t	0.	Hills Bank		X
Bradford C. Zuber	Mr. Zuber is a seni	0.	Hills Bank		X

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Sch L, Part IV, Business Transactions Involving Interested Persons:(a) Name of Person: Dwight O. Seegmiller(b) Relationship Between Interested Person and Organization:Mr. Seegmiller is the President of Hills Bank and Trust Company.

(d) Description of Transaction: Hills Bank and Trust Company provides investment, accounting, and other administrative services for the East Central Iowa Charitable Trust at rates and on terms consistent with market rates for similar services.

(a) Name of Person: Bradford C. Zuber(b) Relationship Between Interested Person and Organization:Mr. Zuber is a senior officer of Hills Bank and Trust Company

(d) Description of Transaction: Hills Bank and Trust Company provides investment, accounting, and other administrative services for the East Central Iowa Charitable Trust at rates and on terms consistent with market rates for similar services.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization

East Central Iowa Charitable Trust

Employer identification number
39-6659806

Form 990, Part I, Line 1, Description of Organization Mission:

Code and which are not private foundations under Section 509 of the
Internal Revenue Code.

Form 990, Part VI, Section A, line 2: Both trustees are employed by Hills
Bank & Trust Company.

Form 990, Part VI, Section B, line 11: Both Trustees carefully review and
examine the Form 990 before it is signed and thoroughly discuss any
questions either they may have with the preparer of the Form 990.

Form 990, Part VI, Section B, Line 12c: There are only 2 trustees of the
organization and avoidance of conflicts of interests is done on an informal
basis. Both of the trustees know all of the organization's donors on a
personal basis and both trustees would advise a donor if either trustee was
sufficiently involved with a recipient organization as to create a conflict
of interest.

Form 990, Part VI, Section C, Line 18: The organization does not have a
web site. All governing documents, conflict of interest policy and
financial statements are available to the public at 2271 Oakdale Boulevard,
Suite 4, Coralville, Iowa 52241.

Form 990, Part VI, Section C, Line 19: The organization does not have a
web site. All governing documents, conflict of interest policy and
financial statements are available to the public at 2271 Oakdale Boulevard,

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

Schedule O (Form 990 or 990-EZ) (2010)

032211
01-24-11

Name of the organization

East Central Iowa Charitable Trust

Employer identification number

39-6659806

Suite 4, Coralville, Iowa 52241

Form 990, Part XI, line 5, Changes in Net Assets:

TEMPORARY TIMING DIFFERENCES

-1,687.

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization **East Central Iowa Charitable Trust** Employer identification number **39-6659806**

Part I. Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	42	547,605.	Market quotes
10 Securities - Closely held stock	X	1	4,680.	Appraisal
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► ()				
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If "Yes," describe in Part II.

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a		X
31		X
32a		X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) (2010)

EAST CENTRAL IOWA CHARITABLE TRUST
EIN 39-6659806
Form 990, Calendar Year 2010

Form 990, Part III, Line 4a
Form 990, Part IX, Line 1

All grants made by the East Central Iowa Charitable Trust
were made to organizations which are tax exempt organizations under
Section 501 (c) (3) of the Internal Revenue Code and which are not private
foundations under Section 509 of the Internal Revenue Code All grants were made in the form of cash

Name of Organization	Amount of Grant
1ST UNITED METHODIST CHURCH	2,252 88
21ST CENTURY FOUNDATION	5,000 00
AID TO WOMEN	1,000 00
ALL SAINTS CATHOLIC CHURCH	16,000 00
ALLIANCE DEFENSE FUND	375 00
AMANA CHURCH SOCIETY	2,000 00
AMANA CHURCH SOCIETY	250 00
AMANA COLONIES TRAILS	100 00
AMANA HERITAGE SOCIETY	250 00
AMANA SCHOOL/COMMUNITY LIBRARY	100 00
AMBASSADORS FOR CHRIST INTERNATIONAL-MONTHLY SUPPORT FOR XXXXXXXXXX FAMILY	6,000 00
AMERICAN CANCER SOCIETY - IOWA HOPE LODGE	5,000 00
AMERICAN CANCER SOCIETY-IOWA COUNTY RELAY FOR LIFE	250.00
AMERICAN CANCER SOCIETY-IOWA HOPE LODGE	500 00
AMERICAN RED CROSS	500 00
AMERICAN RED CROSS	500 00
ANKENY FREE CHURCH-MICKEY KINZENBAW ZAMBIA MISSION TRIP/GOSPELINK	2,500.00
ANNA PURNA GHOSH FOUNDATION	1,500 00
ARC OF SOUTHEAST IOWA	100 00
ARTS IOWA CITY	250 00
ASTRAEA FOUNDATION	250 00
AVANT MINISTRIES	500 00
BAPTIST MID-MISSIONS	2,500 00
BILLY GRAHAM EVANGELISTIC ASSOCIATION-SPREAD THE GOSPEL	5,300.00
BIRTHRIGHT	300 00
BIRTHRIGHT	600 00
BOY SCOUTS OF AMERICA	1,500 00
BOY SCOUTS OF AMERICA	250 00
BOY SCOUTS OF AMERICA	500 00
CAMP COURAGEOUS	7,000 00
CAMP COURAGEOUS OF IOWA	250 00
CAMPUS CRUSADE FOR CHRIST - XXXXXXXXXXXXXXXXXXXX	6,540 00
CAMPUS CRUSADE FOR CHRIST INTERNATIONAL-XXXXXXXXXXXXXX	300 00
CAMPUS CRUSADE FOR CHRIST-XXXXXXXXXXXXXX	1,200 00
CAMPUS CRUSADE FOR CHRIST-XXXXXXXXXXXXXX	1,000 00
CAMPUS CRUSADE FOR CHRIST-XXXXXXXXXXXXXX	18,000 00
CATHOLIC ANSWERS	3,000 00
CATHOLIC COMMUNITY FOUNDATION	250.00
CATHOLIC COMMUNITY FOUNDATION	1,500 00
CATHOLIC COMMUNITY FOUNDATION	500 00
CATHOLIC COMMUNITY FOUNDATION	1,600 00
CATHOLIC FOUNDATION OF THE DIOCESE OF DAVENPORT	1,000 00
CATHOLIC RELIEF SERVICES	3,000 00
CATHOLIC RELIEF SERVICES	550 00
CEDAR HILLS COMMUNITY CHURCH	20,000 00
CEDAR RAPIDS COMMUNITY SCHOOL DISTRICT	250 00
CEDAR VALLEY HOSPICE	1,000 00
CENTRAL CHRISTIAN CHURCH	7,000 00
CEO FORUM	5,000 00
CHILDRENS RELIEF INTERNATIONAL	20,650 00
CHRIST EPISCOPAL CHURCH	7,000 00
CITIZEN'S SCHOLARSHIP FOUNDATION OF HLV-2010 SENIOR SCHOLARSHIP PROGRAM	2,000 00
COMING HOME NETWORK INTERNATIONAL	3,000 00
COMMUNITY FOUNDATION OF JOHNSON COUNTY	500 00
COMPASSION INTERNATIONAL	1,152 00
COMPEER PROGRAM	200 00
CORNELL COLLEGE	500 00
CORPORATION FOR SOCIAL & EDUCATIONAL DEVELOPMENT	3,000 00
CREIGHTON UNIVERSITY-SCHOOL OF PHARMACY	250.00
CROOKED CREEK CHRISTIAN CAMP	2,000 00
DIOCESE OF DAVENPORT	250 00
DISTRICT 600 HUMANITARIAN & EDUCATION FOUNDATION	100 00
DOMESTIC VIOLENCE INTERVENTION PROGRAM	500 00
EARTHWATCH INSTITUTE	5,000 00
EARTHWATCH INSTITUTE-EARTHWATCH STUDENT FELLOWSHIP	6,000 00

EAST CENTRAL IOWA CHARITABLE TRUST
EIN 39-6659806
Form 990, Calendar Year 2010

Form 990, Part III, Line 4a
Form 990, Part IX, Line 1

All grants made by the East Central Iowa Charitable Trust were made to organizations which are tax exempt organizations under Section 501 (c) (3) of the Internal Revenue Code and which are not private foundations under Section 509 of the Internal Revenue Code All grants were made in the form of cash

Name of Organization	Amount of Grant
EAST UNION MENNONITE CHURCH	8,200 00
EASTERN IOWA ARTHRITIS FOUNDATION	2,750 00
ECHO HILL PRESBYTERIAN CHURCH-GENERAL FUND	10,000 00
ECHO HILL PRESBYTERIAN CHURCH-IMPROVEMENTS	10,000.00
EDUCATION FOUNDATION-FAIRFIELD PUBLIC SCHOOLS	2,000.00
EMMA GOLDMAN CLINIC	100.00
ETERNAL WORD TELEVISION NETWORK	1,000.00
EVANGEL UNIVERSITY-PRESIDENTIAL SCHOLARSHIP	2,500 00
EVANGELICAL LUTHERAN CHURCH IN AMERICA - VISION FOR MISSION	5,000 00
EVANGELICAL LUTHERAN CHURCH IN AMERICA - WORLD HUNGER	5,000 00
FAIRFIELD CONCERT ASSOCIATION	2,000 00
FAIRFIELD EVERGREEN CEMETERY ASSOCIATION	7,000 00
FAITH BAPTIST-MONTHLY CONTRIBUTION FROM XXXXXXXXXXXXXXXXXXXX	7,200 00
FAITH EVANGELICAL CHURCH	1,500 00
FAMILY LIFE	5,000 00
FAMILY RESEARCH COUNCIL	10,000 00
FARM SAFETY-JUST 4 KIDS PROGRAM SUPPORT	3,500 00
FIRST BAPTIST CHURCH NAPLES-BUILDING FUND	1,000 00
FIRST LUTHERAN CHURCH	1,000 00
FIRST MENNONITE CHURCH	6,000 00
FIRST PRESBYTERIAN CHURCH	3,600 00
FIRST UNITED METHODIST CHURCH	3,000 00
FIRST UNITED METHODIST CHURCH-BUILDING FUND	2,500.00
FIVE SEASONS CHAMBER MUSIC	750 00
FOCUS ON THE FAMILY	350.00
FOUNDATION 2 INC	500 00
FOUR OAKS	1,500 00
FOUR OAKS FOUNDATION	15,000 00
FRANCISCAN UNIVERSITY OF STEUBENVILLE	250.00
FRIENDS OF CEDAR RAPIDS PUBLIC LIBRARY FOUNDATION	500 00
FRIENDS OF IOWA PUBLIC TELEVISION	500 00
FRIENDS OF THE ANIMAL CENTER FOUNDATION	100 00
GEMS OF HOPE INC	500 00
GLOBAL FUND FOR WOMEN	750 00
GLOBAL GREENGRANTS FUND	750 00
GLORIA DEI LUTHERAN CHURCH	2,000 00
GLORIA DEI LUTHERAN CHURCH	3,000 00
GOSHEN COLLEGE	500 00
GRACE COMMUNITY CHURCH	27,000 00
GREATER CEDAR RAPIDS COMMUNITY FOUNDATION FOR DAYBREAK ROTARY	250 00
GREEN FUND IOWA CITY	100 00
GUSTAVUS ADOLPHUS COLLEGE	2,000 00
HANDICAPPED DEVELOPMENT CENTER	500 00
HARVEST BAPTIST CHURCH	1,250 00
HARVEST PRESERVE FOUNDATION	60,000.00
HEADWATRS FOUNDATION	750 00
HEIFER PROJECT INTERNATIONAL INC	5,000 00
HERBERT HOOVER PRESIDENTIAL LIBRARY ASSOCIATION	500 00
HERITAGE CHRISTIAN SCHOOL	250,000.00
HESSTON COLLEGE	500 00
HLV COMMUNITY SCHOOL DISTRICT- ANNUAL HANCHER TRIP	4,278 00
HOMESTEAD BAPTIST CHURCH	2,500 00
INFORMED CHOICE OF IOWA	1,000 00
INFORMED CHOICE OF IOWA	350 00
INFORMED CHOICE OF IOWA CORP.	3,250 00
INFORMED CHOICE OF IOWA CORP	250.00
INTERVARSITY CHRISTIAN FELLOWSHIP - KEVIN KUMMER SUPPORT	1,750 00
IOWA CITY COMMUNITY SCHOOL DISTRICT	150 00
IOWA CITY COMMUNITY SCHOOL DISTRICT FOUNDATION	1,000 00
IOWA CITY COMMUNITY SCHOOL DISTRICT FOUNDATION	100 00
IOWA CITY COMMUNITY SCHOOL DISTRICT FOUNDATION	1,000 00
IOWA CITY FAMILY POLICY CENTER	400.00
IOWA CITY HOSPICE	500 00
IOWA CITY HOSPICE	100 00
IOWA CITY HOSPICE	500 00

EAST CENTRAL IOWA CHARITABLE TRUST
 EIN 39-6659806
 Form 990, Calendar Year 2010

Form 990, Part III, Line 4a
 Form 990, Part IX, Line 1

All grants made by the East Central Iowa Chantable Trust
 were made to organizations which are tax exempt organizations under
 Section 501 (c) (3) of the Internal Revenue Code and which are not private
 foundations under Section 509 of the Internal Revenue Code All grants were made in the form of cash

Name of Organization	Amount of Grant
IOWA FAMILY POLICY CENTER	5,000 00
IOWA PRIDE NETWORK	100 00
IOWA PUBLIC RADIO	100 00
IOWA PUBLIC RADIO	1,000 00
IOWA PUBLIC RADIO	250 00
IOWA STATE UNIVERSITY FOUNDATION	500 00
IOWA STATE UNIVERSITY FOUNDATION	1,000.00
IOWA STATE UNIVERSITY FOUNDATION	250.00
IOWA VALLEY COMMUNITY SCHOOLS-2010 SCHOLARSHIPS	2,000 00
IU FOUNDATION	1,000.00
JOHNSON COUNTY CRISIS	600 00
JOHNSON COUNTY CRISIS CENTER	500 00
JOHNSON COUNTY CRISIS CENTER	250 00
JOHNSON COUNTY CRISIS CENTER	10,000 00
JOHNSON COUNTY HISTORICAL SOCIETY-GENERAL FUND	500.00
JUNIOR ACHIEVEMENT	1,000 00
JUNIOR ACHIEVEMENT OF EAST CENTRAL IOWA	250 00
JUSTICE NOW	750 00
KALONA CHRISTIAN FELLOWSHIP FOR XXXXXXXXXXXXXXXX	5,000.00
KIRKWOOD COMMUNITY COLLEGE FOUNDATION	500 00
KSKB 99 1	200 00
LINN COUNTY TRAILS ASSOCIATION	250 00
LUTHERAN INTERPARISH SCHOOL	9,324 00
LUTHERAN INTERPARISH SCHOOL	250.00
LUTHERAN SERVICES OF IOWA FOUNDATION	5,000 00
MARANATHA BIBLE CHURCH	46,700 00
MCELHINNY HOUSE ENDOWMENT FOUNDATION	1,000 00
MERCY HOSPITAL FOUNDATION	500.00
MERCY HOSPITAL FOUNDATION	100 00
MERCY MEDICAL CENTER FOUNDATION	10,000.00
MERCY MEDICAL CENTER FOUNDATION - SISTER MARY LAWRENCE FUND	2,000 00
MID-EASTERN IOWA COMMUNITY MENTAL HEALTH CENTER	250 00
MILTON AND ROSE D FRIEDMAN FOUNDATION	250 00
MOUNT HOLYOKE COLLEGE	2,000 00
MT VERNON UNITED METHODIST CHURCH	5,000 00
NARSAD	1,000 00
NATIONAL CZECH & SLOVAK MUSEUM & LIBRARY - FLOOD RELIEF	1,000.00
NATIONAL FOUNDATION FOR CANCER RESEARCH	500.00
NATURE CONSERVANCY	1,000 00
NAZARETH EVANGELICAL LUTHERAN CHURCH	30,000 00
NEIGHBORHOOD CENTERS OF JOHNSON COUNTY	250 00
NEIGHBORHOOD STORY PROJECT	1,500 00
NEW COVENANT BIBLE CHURCH	2,000.00
NEW TRIBES MISSION	1,500 00
NEWMAN CATHOLIC STUDENT CENTER FOUNDATION	21,500.00
NEWMAN CATHOLIC STUDENT CENTER FOUNDATION-ANNUAL	25,000 00
NEWMAN CATHOLIC STUDENT CENTER FOUNDATION-BWIKO SMALL FARM PROJECT	8,441 25
NEWMAN CATHOLIC STUDENT CENTER FOUNDATION-DIOCESE OF SAME	2,000 00
NORTHWESTERN COLLEGE-RADIO FOR LIFE 101.9	1,000 00
NORTHWESTERN COLLEGE-RSC RENOVATION	8,622.22
NORTHWESTERN COLLEGE-SCIENCE DEPARTMENT	10,000 00
ORCHESTRA IOWA	750 00
ORDER OF ST IGNATIUS OF ANTIOCH	1,000 00
OTTUMWA YMCA	2,000 00
OUR REDEEMER LUTHERAN CHURCH - BUILDING FUND	300.62
PARKVIEW CHURCH	500 00
PARKVIEW EVANGELICAL FREE CHURCH	95,000 00
PARKVIEW EVANGELICAL FREE CHURCH-BELIZE MISSION TRIP (XXXXXXXXXXXXXXXXXXXXXXXXXXXX)	30,000 00
PATHWAYS ADULT DAY HEALTH CENTER	15,000.00
PATHWAYS ADULT DAY HEALTH CENTER	500 00
PATHWAYS ADULT DAY HEALTH CENTER	500.00
PERNET FAMILY HEALTH CARE SERVICE	250.00
PIONEER COMETERY	500.00
PREUCIL SCHOOL OF MUSIC	500 00
RATHBUN LAKE AREA YMCA	1,000.00

EAST CENTRAL IOWA CHARITABLE TRUST
EIN 39-6659806
Form 990, Calendar Year 2010

Form 990, Part III, Line 4a
Form 990, Part IX, Line 1

All grants made by the East Central Iowa Charitable Trust
were made to organizations which are tax exempt organizations under
Section 501 (c) (3) of the Internal Revenue Code and which are not private
foundations under Section 509 of the Internal Revenue Code All grants were made in the form of cash

Name of Organization	Amount of Grant
REACHING OUT TO EDUCATION FOUNDATION-2010 SENIOR SCHOLARSHIP PROGRAM	2,000 00
RIVERSIDE THEATRE	10,000 00
ROCKFORD COLLEGE-CHARTER FUND	500 00
RONALD MCDONALD HOUSE	500 00
ROTARY DISTRICT 6000 HEF FOR IOWA MOST	1,000 00
ROTARY FOUNDATION	250 00
ROTARY FOUNDATION	100 00
ROTARY FOUNDATION OF ROTARY INTERNATIONAL	1,000.00
ROTARY INTERNATIONAL FOUNDATION	1,000 00
ROTARY INTERNATIONAL FOUNDATION	200 00
SALVATION ARMY	5,000.00
SALVATION ARMY	1,250 00
SALVATION ARMY	1,000.00
SALVATION ARMY-DISASTER RELIEF, FEEDING THE HUNGRY IN CEDAR RAPIDS	1,000 00
SAMARITAN'S PURSE	1,000 00
SAMARITAN'S PURSE	250 00
SAMARITAN'S PURSE-RESCUE/REPAIR EFFORTS	3,800 00
SEEDS OF FAITH LUTHERAN CHURCH	6,500 00
SELF-REALIZATION FELLOWSHIP	10,000 00
SEND INTERNATIONAL	1,200 00
SERVING IN MISSION	1,500 00
SHATTUCK ST MARY'S SCHOOL	20,000 00
SHELTER HOUSE	500 00
SHELTER HOUSE	100 00
SMILE TRAIN-SOUTH AMERICA SURGERY	2,800 00
SOLOMON COMMUNITY SCHOOL DISTRICT	1,500 00
ST FRANCIS PRAYER CENTER	50,000 00
ST GEORGE CHURCH	1,500 00
ST MARY OF THE VISITATION CHURCH	3,000 00
ST MARY'S CATHOLIC CHURCH	1,300 00
ST MARY'S CATHOLIC CHURCH	3,350 00
ST MARY'S CATHOLIC CHURCH - ANNUAL DIOCESAN APPEAL	775 00
ST PAUL'S UNITED METHODIST CHURCH	7,000 00
ST JOSEPH'S CATHOLIC CHURCH	6,000.00
ST. LUKE'S HEALTH CARE FOUNDATION	10,000 00
ST MARY'S CATHOLIC CHURCH	2,800 00
ST MARY'S CATHOLIC CHURCH	5,000 00
ST MARY'S CATHOLIC CHURCH	3,400 00
ST MARY'S CATHOLIC CHURCH-BISHOP'S ANNUAL APPEAL	700 00
ST MARY'S CHURCH	3,500 00
ST PAUL LUTHERAN CHURCH	6,000 00
ST. PAUL'S UNITED METHODIST CHURCH	1,000 00
ST WENCESLAUS	1,300 00
STONE BRIDGE CHURCH	500 00
SUMMER OF THE ARTS	250 00
TABERNACLE CHILDREN'S MINISTRIES	1,000 00
TANAGER PLACE	500 00
TEEN PACT	2,000 00
TEMPLE JUDAH	1,250 00
THE NAVIGATORS -XXXXXXXXXXXXX MINISTRY SUPPORT	2,000 00
THE NAVIGATORS-XXXXXXXXX MINISTRY SUPPORT	4,000.00
THE NAVIGATORS-XXXXXXXXXXXXX MINISTRY SUPPORT	250 00
THE SALVATION ARMY	250 00
THE SALVATION ARMY	500 00
THEATRE CEDAR RAPIDS	1,000 00
THIRD SECTOR NEW ENGLAND, INC.-RESOURCE GENERATION	5,000.00
THIRD WAVE FOUNDATION	250.00
TREES FOREVER	20,000.00
TRINITY COLLEGE	2,000.00
TRINITY EPISCOPAL CHURCH	5,400 00
TURNING POINT MINISTRIES	100.00
TURNING POINT MINISTRIES - STUDIOS AND TECHNOLOGY CENTER	830,000.00
UNITED ACTION FOR YOUTH	250.00
UNITED WAY OF CEDAR RAPIDS	1,250.00
UNITED WAY OF EAST CENTRAL IOWA	3,800.00

EAST CENTRAL IOWA CHARITABLE TRUST

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Name of Organization	Amount of Grant
UNITED WAY OF JOHNSON COUNTY	250 00
UNITED WAY OF JOHNSON COUNTY	500 00
UNITED WAY OF JOHNSON COUNTY	200 00
UNITED WAY OF WAPELLO COUNTY	2,000 00
UNIVERSITY OF IOWA FOUNDATION	1,250 00
UNIVERSITY OF IOWA FOUNDATION	500 00
UNIVERSITY OF IOWA FOUNDATION - MAIA QUARTET	1,000 00
UNIVERSITY OF IOWA FOUNDATION - HOLDEN COMPREHENSIVE CANCER CENTER	250 00
UNIVERSITY OF IOWA FOUNDATION - MUSEUM OF ART	10,500 00
UNIVERSITY OF IOWA FOUNDATION - TIPPIC COLLEGE UNDERGRADUATE PROGRAM FUND	300 00
UNIVERSITY OF IOWA FOUNDATION - UNIVERISTY OF IOWA CHILDREN'S HOSPITAL	300 00
UNIVERSITY OF IOWA FOUNDATION-CHILDREN'S HOSPITAL	1,000 00
UNIVERSITY OF IOWA FOUNDATION-COLLEGE OF PUBLIC HEALTH	1,500 00
UNIVERSITY OF IOWA FOUNDATION-DEPARTMENT OF ATHLETICS FOR FOOTBALL	1,000 00
UNIVERSITY OF IOWA FOUNDATION-HANCHER	5,000 00
UNIVERSITY OF IOWA FOUNDATION-HANCHER AUDITORIUM	5,000 00
UNIVERSITY OF IOWA FOUNDATION-HANCHER AUDITORIUM	5,000 00
UNIVERSITY OF IOWA FOUNDATION-HAWKEY FUND	250 00
UNIVERSITY OF IOWA FOUNDATION-HOLDEN COMPREHENSIVE CANCER CENTER	125 00
UNIVERSITY OF IOWA FOUNDATION-MEN'S INTERCOLLEGIATE ATHLETICS	500 00
UNIVERSITY OF IOWA FOUNDATION-SCHOLARSHIP MEMORIAL FUND	15,000 00
UNIVERSITY OF IOWA-WRESTLING ROOM	125,000 00
USCWM FOR XXXXXXXXXXXXXXXXXXXXX	3,300 00
VARIETY-THE CHILDREN'S CHARITY	500 00
VISITING NURSE ASSOCIATION	500 00
WARTBURG COLLEGE	22,000 00
WAY OFF BROADWAY MUSICAL THEATRE	3,000 00
WHEATON COLLEGE FUND	700 00
WILLIAMSBURG COMMUNITY SCHOOL DISTRICT FOUNDATION	500 00
WILLIAMSBURG MUSIC ASSOCIATION-INSTRUMENTS (TUBAS)	4,915 00
WILLIAMSBURG SCHOOL DISTRICT FOUNDATION-PROJECT LEAD THE WAY	30,000 00
WORLD VENTURE	600 00
WORLD VISION FOUNDATION	420 00
WYCLIFFE BIBLE TRANSLATORS	1,700 00
XAVIER FOUNDATION - ANNUAL PARISH APPEAL	2,000 00
YOUNG LIFE IOWA CITY	5,000 00
YOUNG LIFE-MINISTRY SUPPORT	3,000 00
ZION PRESBYTERIAN CHURCH	3,600 00
TOTAL	2,373,820 97