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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

2011Open to Public
Inspection**A** For the 2011 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)

590 West Forevergreen Road

Room/suite

City or town, state or country, and ZIP + 4

North Liberty, IA 52317**F** Name and address of principal officer: **Bradford C. Zuber****590 West Forevergreen Road, North Liberty, IA****D** Employer identification number**39-6659806****E** Telephone number**319-338-1522****G** Gross receipts \$**5,945,066.****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: Making cash grants to other organizations exempt under Section 501(c)(3) of the Internal Revenue		
	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)	3	2
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	2
	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	0
	6	Total number of volunteers (estimate if necessary)	6	0
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
7b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 3,362,830.	Current Year 4,345,527.
	9	Program service revenue (Part VIII, line 2g)	0.	0.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	67,596.	68,222.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,430,426.	4,413,749.
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	2,373,821.
14		Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
16a		Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
b		Total fundraising expenses (Part IX, column (D), line 25)	0.	0.
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f, 24e)	64,444.	52,948.
18		Total expenses - Add lines 13-17 (must equal Part IX, column (A), line 25)	2,438,265.	5,381,634.
Net Assets or Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12	992,161.	-967,885.
	20	Total assets (Part X, line 16)	Beginning of Current Year 8,029,250.	End of Year 7,058,925.
	21	Total liabilities (Part X, line 26)	0.	0.
	22	Net assets or fund balances. Subtract line 21 from line 20	8,029,250.	7,058,925.

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
	Bradford C. Zuber, Sr. Vice President & Trust Officer	5-9-12
Paid	Print/Type preparer's name	Preparer's signature
	Gary J. Streit	05/09/12
Preparer Use Only	Firm's name ▶ Shuttleworth & Ingersoll, P.L.C.	Firm's EIN ▶ 42-1496619
	Firm's address ▶ 115-3rd Street SE, Suite 500 Cedar Rapids, IA 52406-2107	Phone no. 319-365-9461

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

132001 01-23-12 LHA For Paperwork Reduction Act Notice, see the separate Instructions.

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See Schedule O for Organization Mission Statement Continuation

G-16

SCANNED JUN 15 2012

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 organization's program service accomplishments for each of its three largest program services, as measured 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 \$ 5,328,686. including grants of \$ 5,328,686.) (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 5,328,686.

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>	☒	☐
2 Is the organization required to complete Schedule B, Schedule of Contributors?	☒	☐
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>	☐	☒
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>	☐	☒
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>	☐	☒
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which 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>	☒	☐
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>	☐	☒
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>	☐	☒
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>	☐	☒
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	☐	☒
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>	☐	☒
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>	☒	☐
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>	☐	☒
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>	☐	☒
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	☐	☒
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>	☐	☒
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>	☐	☒
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>	☐	☒
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	☐	☒
14a Did the organization maintain an office, employees, or agents outside of the United States?	☐	☒
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	☐	☒
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>	☐	☒
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>	☐	☒
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>	☐	☒
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>	☐	☒
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>	☐	☒
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	☐	☒
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	☐	☐

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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 any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21 X	
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? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	X
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? <i>If "Yes," complete Schedule J</i>	23	X
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
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?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
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? <i>If "Yes," complete Schedule L, Part I</i>	25a	X
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? <i>If "Yes," complete Schedule L, Part I</i>	25b	X
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? <i>If "Yes," complete Schedule L, Part II</i>	26	X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	X
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? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
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? <i>If "Yes," complete Schedule L, Part IV</i>	28c X	
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29 X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
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? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	X
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? <i>If "Yes," complete Schedule R, Part VI</i>	37	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38 X	

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.		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
c	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.		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	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
b	If "Yes," enter the name of the foreign country: <u>See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.</u>		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	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
b	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).		
a	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
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year.		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	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.		
a	Did the organization make any taxable distributions under section 4966?		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?		X
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12.		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders.		
b	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?		
b	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.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
b	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.		
c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	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 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
1b Enter the number of voting members included in line 1a, above, who are independent		
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?	2 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?	3	X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5	X
6 Did the organization have members or stockholders?	6	X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	X
7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	8a X	
b Each committee with authority to act on behalf of the governing body?	8b 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	9	X

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

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a	X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a X	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c X	
13 Did the organization have a written whistleblower policy?	13	X
14 Did the organization have a written document retention and destruction policy?	14	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	15a	X
b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	15b	X
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?	16a	X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

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 (Section 501(c)(3)s only) available for public inspection. Indicate how you made 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 made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

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**
590 West Forevergreen Road, North Liberty, IA 52317

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

7

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								0.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		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? If "Yes," complete Schedule J for such individual		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? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

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

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	4,345,527.			
	g Noncash contributions included in lines 1a-1f \$		658,674.			
	h Total. Add lines 1a-1f		4,345,527.			
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)		66,673.			66,673.
	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	1532866.			
	b Less cost or other basis and sales expenses		1531317.			
	c Gain or (loss)		1,549.			
	d Net gain or (loss)		1,549.			1,549.
	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.		4,413,749.	0.	0.	68,222.	

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).

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

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 United States. See Part IV, line 21	5,328,686.	5,328,686.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States. 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 accruals and 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 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Custodial and recordkeeping	52,948.		52,948.	
b				
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	5,381,634.	5,328,686.	52,948.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here ☐ if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	5,000.	1	139,999.
	2 Savings and temporary cash investments	5,321,700.	2	3,925,538.
	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	874,542.	11	242,663.
	12 Investments - other securities. See Part IV, line 11	1,828,008.	12	2,750,725.
	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)	8,029,250.	16	7,058,925.	
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 (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). 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	8,029,250.	28	7,058,925.
	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	8,029,250.	33	7,058,925.
34 Total liabilities and net assets/fund balances	8,029,250.	34	7,058,925.	

Form 990 (2011)

Part XI Reconciliation of Net Assets

Check 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	4,413,749.
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,381,634.
3	Revenue less expenses Subtract line 2 from line 1	3	-967,885.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	8,029,250.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-2,440.
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	7,058,925.

Part XII Financial Statements and Reporting

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

☐

	Yes	No
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?		X
b Were the organization's financial statements audited by an independent accountant?		X
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?		X
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		

Form 990 (2011)

Department of the Treasury
Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No. 1545-0047

2011

**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)

[illegible]

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

Schedule A (Form 990 or 990-EZ) 2011

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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	4250564.	2541489.	2198149.	3362830.	4345527.	16698559.
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	4250564.	2541489.	2198149.	3362830.	4345527.	16698559.
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)						10817918.
6 Public support. Subtract line 5 from line 4						5880641.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	4250564.	2541489.	2198149.	3362830.	4345527.	16698559.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	221,547.	183,256.	69,221.	56,521.	68,222.	598,767.
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						17297326.
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 2011 (line 6, column (f) divided by line 11, column (f))	14	34.00	%
15 Public support percentage from 2010 Schedule A, Part II, line 14	15	34.72	%
16a 33 1/3% support test - 2011. 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 - 2010. 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 - 2011. 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 - 2010. 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) 2011

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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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 2011 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2011. 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 - 2010. 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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011Open 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	79	
2 Aggregate contributions to (during year)	4,345,527.	
3 Aggregate grants from (during year)	5,328,686.	
4 Aggregate value at end of year	7,049,606.	

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	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

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	▶ \$ _____
(ii) Assets included in Form 990, Part X	▶ \$ _____

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	▶ \$ _____
b Assets included in Form 990, Part X	▶ \$ _____

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

- c Beginning balance
 d Additions during the year
 e Distributions during the year
 f Ending balance

	Amount
1c	
1d	
1e	
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 current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment ► _____ %
 b Permanent endowment ► _____ %
 c Temporarily restricted endowment ► _____ %

The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
 (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

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 property	(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) 2011

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) VANGUARD 500 INDEX FUND		
(B) SIGNAL SHARES	946,449.	Cost
(C) VANGUARD TOTAL BOND		
(D) MARKET INDEX FUND SIGNAL		
(E) SHARES #1351	885,040.	Cost
(F) VANGUARD SHORT TERM		
(G) TREASURY FUND #32	416,182.	Cost
(H)		
(I)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶	2,750,725.	

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) Book value
(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)

132053
01-23-12

See Part XIV for Continuations

Schedule D (Form 990) 2011

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	4,413,749.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	5,381,634.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-967,885.
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	-2,440.
9	Total adjustments (net) Add lines 4 through 8	9	-2,440.
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	-970,325.

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.

Part XI, Line 8 - Other Adjustments:

TEMPORARY TIMING DIFFERENCES

-2,440.

Name of the organization

Employer identification number
39-6659806

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.
---------	--

☒ Yes ☐ No

[illegible][illegible]

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2011)

EAST CENTRAL IOWA CHARITABLE TRUST

EIN: 39-6659806

Form 990, Calendar Year 2011

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	26,000.00
Ambassadors for Christ International PO Box 470 Tucker, GA 30085	58-1303476	6,000.00
Avant Ministries 10000 N Oak Trfy Kansas City, MO 64155-2010	44-0594428	365,000.00
Billy Graham Evangelistic Association One Billy Graham Parkway Charlotte, NC 28201	41-0692230	5,600.00
Camp Courageous PO Box 418 12007 190th St. Monticello, IA 52310-0418	23-7210932	16,250.00
Campus Crusade for Christ PO Box 628222 Orlando, FL 32862-8222	95-2814920	24,540.00
Catholic Relief Services 228 West Lexington Street Baltimore, MD 21201-3413	13-5563422	10,000.00
Cedar Rapids Public Library Foundation 2600 Edgewood Road SW Cedar Rapids, IA 52404	23-7292786	5,500.00
Central Christian Church 3475 Kimball Avenue Waterloo, IA 50701	Not Available	17,000.00
Children's Relief International PO Box 2470 Rockwall, TX 75087	36-4353904	25,700.00
Christ Episcopal Church 220 40th Street NE Cedar Rapids, IA 52402	39-1879934	9,950.00

EAST CENTRAL IOWA CHARITABLE TRUST
EIN: 39-6659806
Form 990, Calendar Year 2011

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
Community Health Free Clinic 947 14th Ave SE Cedar Rapids, IA 52401	13-4228071	11,500.00
Earthwatch Institute 3 Clock Tower Place, Suite 100 PO Box 75 Maynard, MA 01754-0075	23-7168440	10,000.00
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	17,500.00
Emmaus Bible College 2570 Asbury Road Dubuque, IA 52001	36-2270695	178,000.00
Evangelical Lutheran Church in America P.O. Box 71764 Chicago, IL 60631-4179	Not Available	10,000.00
Faith Baptist Church 1251 Village Road Iowa City, IA 52240	42-1185801	7,200.00
Faith Bible Church 95 South Mentzer Road Robins, IA 52328	42-1185801	65,000.00
Family Life 5800 Ranch Dr. Little Rock, AR 72223	Not Available	70,000.00
Family Policy Center 1100 Hickory Blvd., Ste. 107 Pleasant Hill, IA 50327	42-1461169	15,000.00
Family Research Council 801 G Street NW Washington, DC 20001	52-1792772	150,000.00

EAST CENTRAL IOWA CHARITABLE TRUST

EIN: 39-6659806

Form 990, Calendar Year 2011

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
First Mennonite Church 405 Myrtle Avenue Iowa City, IA 52246	42-1021960	6,000.00
Focus On The Family 8605 Explorer Dr. Colorado Springs, CO 80920	95-3188150	250,400.00
Young Footlighters 2900 North Liberty Road NE North Liberty, IA 52317	Not Available	6,000.00
Grace Community Church 2707 Dubuque St. NE North Liberty, IA 52317	42-1192395	27,000.00
Heritage Christian School 2709 Dubuque Street NE North Liberty, IA 52317	42-1386017	76,000.00
HLV Commuinity School District 501 4th Street P.O. Box B Victor, IA 52347	42-6037189	5,107.67
Informed Choice of Iowa Corp. P.O. Box 2537 Iowa City, IA 52244	26-0451761	6,250.00
Insight For Living PO Box 269000 Plano, TX 75026-9000	95-3392299	671,500.00
Iowa State University Foundation 2505 University Blvd Ames, IA 50010-2230	42-1143702	117,366.00
Johnson County Crisis Center 1121 Gilbert Court Iowa City, IA 52240-4528	42-0955992	10,800.00
Life Action Ministries P.O. Box 2000 Niles, MI 49120	Not Available	100,000.00

EAST CENTRAL IOWA CHARITABLE TRUST**EIN: 39-6659806****Form 990, Calendar Year 2011****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
Living on the Edge 140-D Satellite Blvd NE Suwanee, GA 30024	46-0484695	245,000.00
Lutheran Interparish School PO Box 750 Williamsburg, IA 52361	42-0988468	8,584.00
Maranatha Bible Church 526 Third Ave SW Cedar Rapids, IA 52404	42-1140036	39,400.00
Mary's Meals USA 590 Bloomfield Ave, Unit 280 Bloomfield, NJ 07003	33-1215331	30,000.00
Mercy Medical Center Foundation 701 Tenth St. SE Cedar Rapids, IA 52403	51-0233180	16,000.00
Nature Conservancy of Iowa 303 Locust Street, Ste. 402 Des Moines, IA 50309	Not Available	13,500.00
New Covenant Bible Church 1800 46 St. NE Cedar Rapids, IA 52402	51-0139200	6,000.00
Newman Catholic Student Center Foundation 104 East Jefferson Street Iowa City, IA 52245	42-0957121	46,250.00
Orchestra Iowa 119 Third Ave. SE Cedar Rapids, IA 52401	42-0772544	18,300.00
Parkview Evangelical Free Church 15 Foster Road Iowa City, IA 52245	42-0989258	120,000.00
Planned Parenthood of the Heartland PO Box 4557 Des Moines, IA 50305	42-0727488	13,250.00

EAST CENTRAL IOWA CHARITABLE TRUST
EIN: 39-6659806
Form 990, Calendar Year 2011

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
Ravizacharias International Ministries 4725 Peachtree Corners Circle, Suite 250 Norcross, GA 30092	13-3200719	420,000.00
Riverside Theatre 213 North Gilbert Street Iowa City, IA 52245-2125	42-1188839	10,000.00
Samaritan's Purse PO Box 3000 Boone, NC 28607	58-1437002	5,050.00
Seeds of Faith Lutheran Church 221 1 st St. NE, Ste. 1 Mt. Vernon, IA 52314	42-1492437	10,600.00
Self-Realization Fellowship Church 3880 San Rafael Ave Los Angeles, CA 90065-3219	95-1942336	20,000.00
St. Francis Prayer Center G-2381 E. Carpenter Road Flint, MI 48505	38-2292386	50,000.00
St. Joseph's Catholic Church P.O. Box 145 Wellman, IA 52353	42-6130329	6,000.00
St. Mary's Catholic Church 302 East Jefferson Street Iowa City, IA 52240	42-0716346	14,100.00
St. Paul's United Methodist Church 803 Clearview Dr Williamsburg, IA 52361	Not Available	14,500.00
Third Sector New England 89 South Street Boston, MA 02111-2670	042-261-109	7,000.00
Trees Forever 770 7 th Avenue Marion, IA 52302	42-1419181	20,000.00

EAST CENTRAL IOWA CHARITABLE TRUST
EIN: 39-6659806
Form 990, Calendar Year 2011

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
Trinity Episcopal Church 204 East 5 th Street Ottumwa, IA 52501-2626	Not Available	5,500.00
Turning Point Ministries Box 3838 San Diego, CA 92163	33-0095805	500,000.00
University of Iowa Foundation PO Box 4550 Iowa City, IA 52244-4550	42-0796760	1,038,900.00
University of Northern Iowa Foundation 1223 West 22nd St. Cedar Falls, IA 50614	42-6058591	27,500.00
Wartburg College 100 Wartburg Blvd. Waverly, IA 50677	42-0680351	25,000.00
Williamsburg Community School District Foundation 810 W. Walnut P.O. Box 120 Williamsburg, IA 52361	42-1468053	8,203.70

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Schedule I, Part I, Line 2: The organization maintains complete and accurate written and electronic records as to the amounts of the grants it makes. The recipients of the grants are identified by contributors. The organization verifies that the recipient is a 501(c)(3) organization that is not a private foundation before the grants are actually disbursed.

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

2011

**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) 2011

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 M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

OMB No 1545-0047

2011

Open to Public
Inspection

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

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	52	654,514.	Market quotes
10 Securities - Closely held stock	X	1	4,160.	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**

	Yes	No
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?		X
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?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
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		

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

Schedule M (Form 990) (2011)

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

2011

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 590 Forevergreen Road,
North Liberty, Iowa 52317.

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 590 Forevergreen Road,

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

Schedule O (Form 990 or 990-EZ) (2011)

132211
01-23-12

Name of the organization

East Central Iowa Charitable Trust

Employer identification number

39-6659806

North Liberty, Iowa 52317.

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

TEMPORARY TIMING DIFFERENCES

-2,440.

EAST CENTRAL IOWA CHARITABLE TRUST

EIN 39-6659806

Form 990, Calendar Year 2011

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
ALL SAINTS CATHOLIC CHURCH	26,000.00
ALLEGRO ORGANIZATIONAL SOLUTIONS	3,416 66
ALLIANCE DEFENSE FUND	400 00
AMANA ARTS GUILD	100 00
AMANA CHURCH SOCIETY	250 00
AMANA CHURCH SOCIETY	1,000 00
AMANA CHURCH SOCIETY	2,000.00
AMANA COLONIES TRAILS	100 00
AMANA FIRE FIGHTERS ASSOCIATION	100 00
AMANA HERITAGE SOCIETY	500 00
AMANA HERITAGE SOCIETY	700 00
AMBASSADORS FOR CHRIST INTERNATIONAL-MONTHLY SUPPORT	6,000 00
AMERICAN CENTER FOR LAW AND JUSTICE	400 00
AMERICAN RED CROSS	500 00
AMERICAN RED CROSS	500 00
ANNA PURNA GHOSH FOUNDATION	1,500 00
APHA FOUNDATION-BOWL OF HYGEIA AWARD	250 00
ASBURY UNITED METHODIST CHURCH-WELLMAN FOOD PANTRY	1,800 00
AVANT MINISTRIES	300,000 00
AVANT MINISTRIES	65,000 00
BILLY GRAHAM EVANGELISTIC ASSOCIATION-SPREAD THE GOSPEL	5,600 00
BIRTHRIGHT	600 00
BOY SCOUTS OF AMERICA	250 00
BOY SCOUTS OF AMERICA	250 00
BOY SCOUTS OF AMERICA	1,000 00
BOYS & GIRLS CLUB OF CEDAR RAPIDS	500 00
BOYS & GIRLS CLUB OF KENOSHA	600 00
CAMP COURAGEOUS	1,000 00
CAMP COURAGEOUS	15,000 00
CAMP COURAGEOUS OF IOWA	250 00
CAMPUS CRUSADE FOR CHRIST	18,000 00
CAMPUS CRUSADE FOR CHRIST	6,540 00
CARE NET	300 00
CATHOLIC ANSWERS	3,000 00
CATHOLIC COMMUNITY FOUNDATION	500 00
CATHOLIC COMMUNITY FOUNDATION	1,500 00
CATHOLIC COMMUNITY FOUNDATION	1,600 00
CATHOLIC COMMUNITY FOUNDATION - ANNUAL APPEAL	250 00
CATHOLIC FOUNDATION-DIOCESE OF DAVENPORT	480 00
CATHOLIC FOUNDATION-DIOCESE OF DAVENPORT ANNUAL APPEAL	500 00
CATHOLIC RELIEF SERVICES	10,000 00
CEDAR RAPIDS MUSEUM OF ART	500 00
CEDAR RAPIDS MUSEUM OF ART	2,000 00
CEDAR RAPIDS OPERA THEATRE	250 00
CEDAR RAPIDS PUBLIC LIBRARY FOUNDATION	5,000 00
CEDAR RAPIDS PUBLIC LIBRARY FOUNDATION	500 00
CEDAR RAPIDS SCIENCE CENTER	1,000 00
CEDAR VALLEY HOSPICE	500 00
CENTRAL CHRISTIAN CHURCH	17,000 00
CHILD ABUSE LISTENING AND MEDIATION	2,000 00
CHILDREN'S RELIEF INTERNATIONAL	25,700 00
CHRIST EPISCOPAL CHURCH	3,200 00
CHRIST EPISCOPAL CHURCH	6,750 00
CITIZEN'S SCHOLARSHIP FOUNDATION OF HLV-2011 SENIOR SCHOLARSHIP PROGRAM	2,000 00
CLARE BOOTHE LUCE POLICY INSTITUTE	250 00

EAST CENTRAL IOWA CHARITABLE TRUST
EIN 39-6659806
Form 990, Calendar Year 2011

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
COE COLLEGE	500 00
COLUMBUS JUNCTION FIRE AND RESCUE	500 00
COMING HOME NETWORK INTERNATIONAL	3,000 00
COMMUNITY FOUNDATION OF JOHNSON COUNTY	1,000 00
COMMUNITY HEALTH FREE CLINIC	1,000 00
COMMUNITY HEALTH FREE CLINIC	10,000 00
COMMUNITY HEALTH FREE CLINIC	500 00
COMPASSION INTERNATIONAL	1,152 00
COMPEER PROGRAM	150 00
CORALVILLE COMMUNITY FUND-CORALVILLE CENTER FOR PERFORMING ARTS	1,000 00
CORNELL COLLEGE	500 00
CORPORATION FOR SOCIAL & EDUCATIONAL DEVELOPMENT	3,000 00
COUNCIL ON ALCOHOLISM AND DRUG ABUSE	1,000 00
COVENANT HOUSE	250 00
CREIGHTON UNIVERSITY- SCHOOL OF PHARMACY	1,250 00
CRISIS CENTER	1,000 00
CROOKED CREEK CHRISTIAN CAMP	4,000 00
DIOCESE OF DAVENPORT	200 00
DOCTORS WITHOUT BORDERS	500 00
DOMESTIC VIOLENCE INTERVENTION PROGRAM	100 00
DOMESTIC VIOLENCE INTERVENTION PROGRAM	500 00
DOMESTIC VIOLENCE INTERVENTION PROGRAM	2,000 00
EARTHWATCH INSTITUTE-EXPEDITION FUND	10,000 00
EAST UNION MENNONITE CHURCH	8,200 00
EASTER SEALS	250 00
EASTERN ILLINOIS UNIVERSITY FOUNDATION	500 00
ECHO HILL PRESBYTERIAN CHURCH	17,500 00
EDUCATION FOUNDATION-FAIRFIELD PUBLIC SCHOOLS	2,000 00
EMMA GOLDMAN CLINIC	250 00
EMMA GOLDMAN CLINIC	500 00
EMMAUS BIBLE COLLEGE	178,000 00
ENSEMBLE THEATRE PROJECT	2,000 00
ETERNAL WORD TELEVISION NETWORK	1,000 00
EVANGELICAL LUTHERAN CHURCH IN AMERICA - VISION FOR MISSION	5,000 00
EVANGELICAL LUTHERAN CHURCH IN AMERICA - WORLD HUNGER	5,000 00
EWTN RADIO	250 00
FAIRFIELD CONCERT ASSOCIATION	2,000 00
FAIRFIELD EVERGREEN CEMETERY ASSOCIATION	2,000 00
FAITH BAPTIST CHURCH	7,200 00
FAITH BIBLE CHURCH	65,000 00
FAITH EVANGELICAL CHURCH	4,000 00
FAMILY LIFE	70,000 00
FAMILY POLICY CENTER	15,000 00
FAMILY RESEARCH COUNCIL	150,000 00
FARM SAFETY-JUST 4 KIDS PROGRAM SUPPORT	3,000 00
FIRST LUTHERAN CHURCH	1,250 00
FIRST MENNONITE CHURCH	6,000 00
FIRST PRESBYTERIAN CHURCH	3,600 00
FIRST UNITED METHODIST CHURCH	3,000 00
FIVE SEASONS CHAMBER MUSIC	750 00
FOCUS ON THE FAMILY	400 00
FOCUS ON THE FAMILY	250,000 00
FOUR OAKS	500 00
FOUR OAKS	1,500 00
FRIENDS OF IOWA PUBLIC TELEVISION	250 00

EAST CENTRAL IOWA CHARITABLE TRUST

EIN 39-6659806

Form 990, Calendar Year 2011

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
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Name of Organization	Amount of Grant
FRIENDS OF IOWA PUBLIC TELEVISION	500 00
FRIENDS OF IOWA PUBLIC TELEVISION	1,000 00
FRIENDS OF THE ANIMAL CENTER FOUNDATION	100 00
FRIENDS OF THE MONTICELLO PUBLIC LIBRARY	250 00
GEMS OF HOPE INC	500 00
GOSHEN COLLEGE	500 00
GRACE COMMUNITY CHURCH	27,000 00
GUSTAVUS ADOLPHUS COLLEGE	2,000 00
HANDICAPPED DEVELOPMENT CENTER	500 00
HEADWATERS FOUNDATION	3,000 00
HEAL THE OCEAN	1,000 00
HEIFER PROJECT INTERNATIONAL INC	5,000 00
HERBERT HOOVER PRESIDENTIAL LIBRARY ASSOCIATION	500 00
HERITAGE CHRISTIAN SCHOOL	5,000 00
HERITAGE CHRISTIAN SCHOOL	71,000 00
HERITAGE FOUNDATION	250 00
HERITAGE FOUNDATION	400 00
HESSTON COLLEGE	500 00
HLV COMMUNITY SCHOOL DISTRICT -BOSTON POPS TRIP	829 67
HLV COMMUNITY SCHOOL DISTRICT -STUDENT HANCHER TRIP	4,278 00
ICPL FRIENDS FOUNDATION - ANNUAL FUND	1,000 00
ICPRD FOUNDATION	250 00
INDIAN CREEK NATURE CENTER	250 00
INDIAN CREEK NATURE CENTER	1,000 00
INDIAN CREEK NATURE CENTER	1,500 00
INDIAN HILLS COMMUNITY COLLEGE FOUNDATION	2,000 00
INFORMED CHOICE OF IOWA CORP	250 00
INFORMED CHOICE OF IOWA CORP	6,000 00
INSIGHT FOR LIVING	25,000 00
INSIGHT FOR LIVING	146,500 00
INSIGHT FOR LIVING-GENERAL FUND	500,000 00
INTERVARSITY CHRISTIAN FELLOWSHIP	2,250 00
IOWA CITY COMMUNITY SCHOOL DISTRICT FOUNDATION	250 00
IOWA CITY HOSPICE	250 00
IOWA CITY HOSPICE	250 00
IOWA CITY HOSPICE	450 00
IOWA CITY HOSPICE	500 00
IOWA CITY PARKS & RECREATION	500 00
IOWA FAMILY POLICY CENTER	450 00
IOWA MENNONITE SCHOOL	2,000 00
IOWA PUBLIC RADIO	250 00
IOWA PUBLIC RADIO	1,000 00
IOWA PUBLIC RADIO	1,000 00
IOWA PUBLIC RADIO	1,000 00
IOWA STATE UNIVERSITY FOUNDATION	500 00
IOWA STATE UNIVERSITY FOUNDATION	750 00
IOWA STATE UNIVERSITY FOUNDATION	100,000 00
IOWA STATE UNIVERSITY FOUNDATION-SCHOLARSHIP FUND	16,116 00
IOWA VALLEY COMMUNITY SCHOOLS-2011 SCHOLARSHIPS	2,000 00
IOWA WOMEN'S FOUNDATION	200 00
IRLC EDUCATION FUND	2,500 00
JOHNSON COUNTY CRISIS CENTER	300 00
JOHNSON COUNTY CRISIS CENTER	500 00
JOHNSON COUNTY CRISIS CENTER	10,000 00
JUDICIAL WATCH	500 00

EAST CENTRAL IOWA CHARITABLE TRUST**EIN 39-6659806****Form 990, Calendar Year 2011****Form 990, Part III, Line 4a****Form 990, Part IX, Line 1**

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Name of Organization	Amount of Grant
JUNIOR ACHIEVEMENT OF EAST CENTRAL IOWA	250 00
JUNIOR ACHIEVEMNET OF EASTERN IOWA	250 00
JUNIOR LEAGUE OF CEDAR RAPIDS	500 00
JUVENILE DIABETES RESEARCH FOUNDATION	1,500 00
K LOVE AIR 1 FOUNDATION	2,500 00
KIRKWOOD COMMUNITY COLLEGE - KCCK RADIO	500 00
KIRKWOOD COMMUNITY COLLEGE FOUNDATION	500 00
LANDLOCKED FILM FESTIVAL	250 00
LIFE ACTION MINISTRIES	100,000 00
LIVING ON THE EDGE	245,000 00
LOS ANGELES OPERA COMPANY	1,000 00
LUTHERAN INTERPARISH SCHOOL	250 00
LUTHERAN INTERPARISH SCHOOL	8,334 00
LUTHERAN SERVICES OF IOWA FOUNDATION	5,000 00
MARANATHA BIBLE CHURCH	39,400 00
MARY'S MEALS USA	30,000 00
MCELHINNY HOUSE ENDOWMENT FOUNDATION	1,000 00
MEDIA RESEARCH CENTER	500 00
MERCY MEDICAL CENTER FOUNDATION	1,000 00
MERCY MEDICAL CENTER FOUNDATION - CANCER CENTER	15,000 00
MICHIGAN 4-H FOUNDATION	100 00
MID-EASTERN IOWA COMMUNITY MENTAL HEALTH CENTER	1,000 00
MISSION OF HOPE	250 00
MISSOULA ART MUSEUM	3,000 00
MOUNT HOLYOKE COLLEGE	2,000 00
MT VERNON UNITED METHODIST CHURCH	5,000 00
MUSIC ACADEMY OF THE WEST	2,500 00
NARSAD	2,000 00
NATIONAL CZECH & SLOVAK MUSEUM & LIBRARY	500 00
NATURE CONSERVANCY OF IOWA	13,500 00
NAVIGATORS	250 00
NEIGHBORHOOD CENTERS OF JOHNSON COUNTY	500 00
NEIGHBORHOOD STORY PROJECT	1,000 00
NEW COVENANT BIBLE CHURCH	6,000 00
NEW TRIBE MISSION	1,500 00
NEWMAN CATHOLIC STUDENT CENTER FOUNDATION	25,000 00
NEWMAN CATHOLIC STUDENT CENTER FOUNDATION-FOUNDERS CLUB	250 00
NEWMAN CATHOLIC STUDENT CENTER FOUNDATION-NEWMAN SINGERS	1,000 00
NEWMAN CATHOLIC STUDENT CENTER FOUNDATION-SECURING THEIR FUTURE	20,000 00
NORTH LAKELAND DISCOVERY CENTER	250 00
NORTHWESTERN COLLEGE	1,000 00
NORTHWESTERN COLLEGE & RADIO FOR LIFE	100 00
NORTHWESTERN COLLEGE AND RADIO FOR LIFE 101 9 KNWS	2,500 00
NORWEGIAN AMERICAN GENEALOGICAL CENTER INC	1,000 00
ORCHESTRA IOWA	500 00
ORCHESTRA IOWA	2,000 00
ORCHESTRA IOWA	15,800 00
ORDER OF ST IGNATIUS OF ANTIOCH	1,000 00
OTTUMWA YMCA	2,000 00
OXFAM AMERICA INC	250 00
PARKVIEW EVANGELICAL FREE CHURCH	120,000 00
PIONEER CEMETERY COMMISSION OF LOUISA COUNTY	500 00
PLANNED PARENTHOOD	250 00
PLANNED PARENTHOOD OF GREATER IOWA	500 00
PLANNED PARENTHOOD OF THE HEARTLAND	12,500 00

EAST CENTRAL IOWA CHARITABLE TRUST
EIN 39-6659806
Form 990, Calendar Year 2011

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

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Name of Organization	Amount of Grant
PREUCIL SCHOOL OF MUSIC	500 00
PRISON FELLOWSHIP	250 00
PROJECT GREEN FUND IOWA CITY	100 00
RATHBUN LAKE AREA YMCA	500 00
RAVI ZACHARIAS INTERNATIONAL MINISTRIES	145,000 00
RAVI ZACHARIAS INTERNATIONAL MINISTRIES	275,000 00
REACHING OUT TO EDUCATION FOUNDATION-2011 SENIOR SCHOLARSHIP PROGRAM	2,000 00
RIVERSIDE THEATER	10,000 00
ROCKFORD COLLEGE-CHARTER FUND	500 00
ROTARY FOUNDATION	250 00
ROTARY FOUNDATION	100 00
ROTARY INTERNATIONAL FOUNDATION	1,000 00
ROTARY INTERNATIONAL FOUNDATION	200 00
ROTARY-IOWA MOST FOR KIDS	1,000 00
SALVATION ARMY	350 00
SALVATION ARMY	1,000 00
SALVATION ARMY	2,000 00
SAMARITAN'S PURSE	250 00
SAMARITAN'S PURSE	4,800 00
SANTA BARBARA ART ASSOCIATION	500 00
SANTA BARBARA BOTANIC GARDEN	5,000 00
SANTA BARBARA CHAMBER ORCHESTRA SOCIETY	3,500 00
SCHOLARSHIP FOUNDATION OF SANTA BARBARA	2,500 00
SEATTLE OPERA	750 00
SEEDS OF FAITH LUTHERAN CHURCH	10,600 00
SELF REALIZATION FELLOWSHIP-BOOK DONATION PROJECT	20,000 00
SEND INTERNATIONAL	3,200 00
SHARON CENTER UNITED METHODIST CHURCH	3,000 00
SHELTER HOUSE	500 00
SHELTER HOUSE	1,000 00
SMILE TRAIN	4,800 00
SOLDIERS ANGELS	250 00
SOLON EDUCATION FOUNDATION-MIDDLE SCHOOL LIGHTS	2,340 16
SPECIAL OLYMPICS	250 00
ST FRANCIS PRAYER CENTER	50,000 00
ST GEORGE CHURCH	1,600 00
ST LABRE INDIAN SCHOOL	600 00
ST MARY OF THE VISITATION CHURCH	3,000 00
ST MARY'S CATHOLIC CHURCH	1,200 00
ST MARY'S CATHOLIC CHURCH	3,550 00
ST MARY'S CATHOLIC CHURCH - ANNUAL DIOCESAN APPEAL	350 00
ST MARY'S CHURCH	2,000 00
ST PAUL'S UNITED METHODIST CHURCH	13,500 00
ST JOSEPH'S CATHOLIC CHURCH	6,000 00
ST MARY'S CATHOLIC CHURCH	2,900 00
ST MARY'S CATHOLIC CHURCH	3,400 00
ST MARY'S CATHOLIC CHURCH-ANNUAL APPEAL	700 00
ST PAUL'S UNITED METHODIST CHURCH	1,000 00
STEPPENWOLF THEATER COMPANY	100 00
STONEBRIDGE CHURCH	2,850 00
SUMMER OF THE ARTS	250 00
SUMMIT SCHOOLS	0 14
SUMMIT SCHOOLS, INC	1,000 00
TABERNACLE CHILDREN'S MINISTRIES	800 00
TABLE TO TABLE	100 00

EAST CENTRAL IOWA CHARITABLE TRUST

EIN 39-6659806

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Form 990, Part III, Line 4a

Form 990, Part IX, Line 1

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Name of Organization	Amount of Grant
TANAGER PLACE	500 00
TANAGER PLACE	750 00
TEEN PACT	2,000 00
TEMPLE JUDAH	2,000 00
THE ARC OF EAST CENTRAL IOWA	1,000 00
THE ARC OF SOUTHEAST IOWA	500 00
THE NAVIGATORS-MINISTRY SUPPORT	4,000 00
THE NAVIGATORS-MINISTRY SUPPORT	250 00
THE SALVATION ARMY	300 00
THE SALVATION ARMY	500 00
THEATRE CEDAR RAPIDS	750 00
THEATRE CEDAR RAPIDS	500 00
THIRD SECTOR NEW ENGLAND	7,000 00
TRANSITION HOUSE	1,000 00
TREES FOREVER	20,000 00
TRINITY COLLEGE	2,000 00
TRINITY EPISCOPAL CHURCH	5,500 00
TROUT CONSERVANCY OF MONTANA	2,000 00
TURNING POINT MINISTRIES	500,000 00
UNITED ACTION FOR YOUTH	250 00
UNITED WAY JOHNSON COUNTY	250 00
UNITED WAY OF EAST CENTRAL IOWA	1,250 00
UNITED WAY OF JOHNSON COUNTY	500 00
UNITED WAY OF WAPELLO COUNTY	2,000 00
UNIVERSITY OF CALIFORNIA SANTA BARBARA	1,500 00
UNIVERSITY OF IOWA FOUNDATION	500 00
UNIVERSITY OF IOWA FOUNDATION	1,250 00
UNIVERSITY OF IOWA FOUNDATION	1,000,000 00
UNIVERSITY OF IOWA FOUNDATION - HOLDEN COMPREHENSIVE CANCER CENTER	250 00
UNIVERSITY OF IOWA FOUNDATION-BLOMMERS-HIERONYMUS-FELDT FELLOWSHIP	100 00
UNIVERSITY OF IOWA FOUNDATION-CHILDREN'S HOSPITAL	300 00
UNIVERSITY OF IOWA FOUNDATION-CROSSING FOR A CURE CANCER FUND	250 00
UNIVERSITY OF IOWA FOUNDATION-HANCHER AUDITORIUM	3,000 00
UNIVERSITY OF IOWA FOUNDATION-HANCHER AUDITORIUM	5,000 00
UNIVERSITY OF IOWA FOUNDATION-HANCHER CIRCLE FUND	5,000 00
UNIVERSITY OF IOWA FOUNDATION-HOLDEN COMPREHENSIVE CANCER CENTER	20,000 00
UNIVERSITY OF IOWA FOUNDATION-IOWA SCHOLARSHIP FUND	250 00
UNIVERSITY OF IOWA FOUNDATION-MEN'S INTERCOLLEGIATE ATHLETICS	500 00
UNIVERSITY OF IOWA FOUNDATION-SCHOOL OF MUSIC	500 00
UNIVERSITY OF IOWA FOUNDATION-TIPPIE COLLEGE UNDERGRADUATE PROGRAM	500 00
UNIVERSITY OF IOWA FOUNDATION-UI MUSEUM OF ART	1,500 00
UNIVERSITY OF NORTHERN IOWA FOUNDATION	2,500 00
UNIVERSITY OF NORTHERN IOWA-UNI FOOTBALL FUND	25,000 00
UNIVERSITY OF SOUTHERN CALIFORNIA-KUSC RADIO	1,000 00
UNIVERSITY OF TEXAS	300 00
USCWM	999 99
VISITING NURSE ASSOCIATION	500 00
VISTING NURSE & HOSPICE OF SANTA BARBARA FOUNDATION	750 00
WARTBURG COLLEGE	25,000 00
WASHINGTON NATIONAL CATHEDRAL	250 00
WAYPOINT	500 00
WAYPOINT	1,000 00
WHEATON COLLEGE FUND	500 00
WILLIAMSBURG COMMUNITY SCHOOL DISTRICT FOUNDATION	200 00
WILLIAMSBURG MUSIC ASSOCIATION	8,203 70

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Name of Organization	Amount of Grant
WORLD VENTURE	2,600 00
WORLD VISION	840 00
WOUNDED WARRIOR PROJECT	500 00
WYCLIFFE BIBLE TRANSLATORS	2,700 00
XAVIER FOUNDATION - ANNUAL PARISH APPEAL	2,000 00
YOUNG FOOTLIGHTERS	6,000 00
YOUNG LIFE	3,000 00
YOUTH FOR ENVIRONMENTAL SANITY	500 00
ZING FOUNDATION INC	500 00
ZION LUTHERAN CHURCH	2,756 00
ZION PRESBYTERIAN CHURCH	4,000 00
	5,328,686 32