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Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

OMB No 1545-0047

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

2011

Name of the organization			Employer identification number			
GRINNELL MUTUAL GROUP FOUNDATION			42-1308146			
Organi	zation type (check or	e).	L.,			
Filers of:		Section:				
Form 990 or 990-EZ		501(c)() (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a private fo	undation			
		527 political organization				
Form 990-PF		✓ 501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation	•			
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions. General Rule						
	instructions.					
For an organization filing Form 9 property) from any one contribut		filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 contributor. Complete Parts I and II.	JUN 1,4 2012			
Specia	Rules		SS			
	For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33½ % support test of the regulations, UT under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II.					
	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
	during the year, con not total to more that year for an exclusive applies to this organ	(7), (8), or (10) organization filing Form 990 or 990-EZ that received fro tributions for use exclusively for religious, charitable, etc., purposes, but \$1,000. If this box is checked, enter here the total contributions that ely religious, charitable, etc., purpose. Do not complete any of the partization because it received nonexclusively religious, charitable, etc., or	out these contributions did it were received during the ts unless the General Rule contributions of \$5,000 or			
990-EZ	Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2, of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)					

Name of organization GRINNELL MUTUAL GROUP FOUNDATION			Employer identification number 42-1308146
Part I	Contributors (see instructions). Use duplicate co	pies of Part I if additional space	ıs needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Grinnell Mutual Reinsurance Company 4215 Highway 146, PO Box 790 Grinnell IA 50112-0790	\$\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a)	(b) Name address and ZIP + 4	(c)	(d)

(a) No.

(b) Name, address, and ZIP + 4

Person Payroll Noncash

Person Payroll Noncash

(c)
Total contributions

(Complete Part II if there is a noncash contribution)

(d)
Type of contribution

(Complete Part II if there is a noncash contribution)