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SCANNED JUN 0 6 2012

Form: **990-PF** Department of the Treasury Internal Revenue Service

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

101	Calcill	dar year 2011 bi tax year beginning		, and ending		
Na	me of	foundation			A Employer identification	number
Н	OMI	E STATE BANK CHARITABLE	FOUNDATION		42-1378344	
		nd street (or P O box number if mail is not delivered to street		Room/suite	B Telephone number	<u> </u>
_1	15	W. STATE			515-386-21	.31
		wn, state, and ZIP code			C If exemption application is p	
_ <u>J</u>	EFI	FERSON, IA 50129-1911				<u>-</u>
G (heck	all that apply Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	s, check here
		Final return	Amended return		Comign omenizations me	notice the RES/ test
		Address change	Name change		Foreign organizations me 2. check here and attach co	emputation
H (_	type of organization X Section 501(c)(3) ex			E If private foundation sta	tus was terminated
		ction 4947(a)(1) nonexempt charitable trust Larket value of all assets at end of year J Accounti	Other taxable private foundaing method X Cash		under section 507(b)(1)	
			ther (specify)	Accrual	F If the foundation is in a	
	\$	184,394. (Part I, colu		basis.)	under section 507(b)(1))(B), check here
Pa	ırt l	Analysis of Revenue and Evnances	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessanly equal the amounts in column (a))	expenses per books	Income	Income	for chantable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	36,000.		N/A	
		Check If the foundation is not required to attach Sch B	.,			
	3	Interest on savings and temporary cash investments	481.	481.		STATEMENT 1
	1	Dividends and interest from securities				
	1 .	Gross rents .				
	1 _	Net rental income or (loss)		<u> </u>		
en e		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all				7/11/1-11
Revenue	1	assets on line 6a Capital gain net income (from Part IV, line 2)		0.		VEIVE O
æ	l	Net short-term capital gain		•		2017
		Income modifications			AM AS	<u> </u>
	10a	Gross sales less returns and allowances			7	Va.,
	b	Less Cost of goods sold		Minitely of Artable dill	The second secon	DEN. UI
	C	Gross profit or (loss)				******* · · · · · · · · · · · · · · · ·
		Other income	06.401			
		Total. Add lines 1 through 11	36,481.	481.		
	l	Compensation of officers, directors, trustees, etc	0.	0.		0.
	l	Other employee salaries and wages Pension plans, employee benefits				
es	16a	Legal fees		 		
ens	ь	Accounting fees STMT 2	300.	150.		0.
Expenses	C	Other professional fees				•
<u>8</u>		Interest .				-
Operating and Administrative		Taxes . STMT 3	17.	0.		0.
inis		Depreciation and depletion				
Ę		Occupancy				
ΔĀ	1	Travel, conferences, and meetings				
3 an		Printing and publications				
ţi		Other expenses Total operating and administrative			 	
era		expenses. Add lines 13 through 23	317.	150.		
ŏ		Contributions, gifts, grants paid	35,600.	130.		35,600.
		Total expenses and disbursements.	20,700			33,000.
		Add lines 24 and 25	35,917.	150.		35,600.
		Subtract line 26 from line 12:			1 1 11 11 11 11 11 11 11 11 11 11 11 11	
		Excess of revenue over expenses and disbursements	564.	-1		
	ı	Net investment income (if negative, enter -0-)		331.		
1235	C .	Adjusted net income (if negative, enter -0-)			N/A	
1235 12-0	2-11	LHA For Paperwork Reduction Act Notice, see	instructions.			Form 990-PF (2011)

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(a) List and desc	cribe the kin	d(s) of property sold (e g or common stock, 200 shs	, real estate,	111001110) P	low acc - Purch - Dona	ase '7	Date acquir mo , day, yr) Date sold io , day, yr.)
1a		· · · · · · · · · · · · · · · · · · ·	 		+ -	Dona				
	NE				t					
C				-						
d										
8	,				<u> </u>					
(e) Gross sales price	(f) D	epreciation allowed (or allowable)		t or other basis opense of sale			((h) Gain or e) plus (f) m		
<u>a</u>										
b	ļ									
<u> </u>						_				
<u>d</u>	<u> </u>									
<u>e</u>	<u> </u>			10.101.100						
Complete only for assets show			r — —				(I) G	ains (Col. (h)) gain minus is than -0-) c	1 P
(i) F M V as of 12/31/69	(i) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any				osses (from	col (h))	,.
<u>a</u>	ļ									
_b	 	. —-				_				
<u>C</u>	 									
<u>d</u>										
8	<u> </u>		<u> </u>							
2 Capital gain net income or (net c	capital loss)	If gain, also enter If (loss), enter -0-	r in Part I, line 7 - in Part I, line	7 7	}	2				
3 Net short-term capital gain or (lo If gain, also enter in Part I, line 8			ıd (6).		};					
If (loss), enter -0- in Part I, line 8	3		. <u>.</u>	<u> </u>		3				
Part V Qualification	<u>Under S</u>	ection 4940(e) for	Reduced	Tax on Ne	t Inv	estm	ent Inco	me		
Was the foundation liable for the se If "Yes," the foundation does not qu 1 Enter the appropriate amount in	alify under	section 4940(e) Do not co	mplete this pa	<u>rt</u>			•	· ·		Yes X No
(a) Base period years Calendar year (or tax year begin		(b) Adjusted qualifying dis		Net value of n	(c)		use assets	(co)	(d) Distribution (b) divided b	ratio
2010	iiig iii/		7,900.				6,790.	(001	(b) dividuo b	•157814
2009			8,730.			16	8,036.			.170975
2008			1,738.			16	2,196.			.25733
2007		3	0,110.				2,577.			.19734
2006		2	8,700.			13	6,164.			.210775
2 Total of line 1, column (d)								2		.994238
3 Average distribution ratio for the the foundation has been in exist	-	•	on line 2 by 5,	or by the numbe	r of ye	ears		3		.198848
4 Enter the net value of noncharita		•	lina 5					4		81,350
	avie-use as:	5613 IVI 2011 IIVIII FAIL X,	iiie J						-	
5 Multiply line 4 by line 3					٠			5		36,061
6 Enter 1% of net investment inco	ome (1% of	Part I, line 27b)						6		3
7 Add lines 5 and 6					•			7		36,064
8 Enter qualifying distributions fro	om Part XII,	line 4						8		35,600
If line 8 is equal to or greater the See the Part VI instructions.	an line 7, ch	eck the box in Part VI, line	1b, and comp	olete that part usi	ng a 1	1% tax	rate 			
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Forn	1 990-PF (2011) HOME STATE BANK CHARITABLE FOUNDATION 42-137		1	Page 4
Pa	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%			7.
	of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0.
3	Add lines 1 and 2			7.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			7.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			7.
6	Credits/Payments:			
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868)			
đ	Backup withholding erroneously withheld . 6d			
7	Total credits and payments Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			7.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2012 estimated tax ▶ Refunded ▶ 11			
Pa	art VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities			
C	Did the foundation file Form 1120-POL for this year?	10		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation \blacktriangleright \$ (2) On foundation managers \blacktriangleright \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers ► \$O.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		_X_
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	ı If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	X	
	If "Yes," complete Part II, col. (c), and Part XV.			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	<u>IA</u>			
b	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each state as required by General Instruction G? If "No," attach explanation	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			
	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		X
<u>10</u>	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		<u> </u>
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Pa	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	T = I		
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12	i	Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► SID JONES Telephone no ► (515)	386	-21	31
	Located at ► HOME STATE BANK, JEFFERSON, IOWA, IA ZIP+4 ►50)129		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		•	· 🔲
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of the foreign			
-	country D	<u> </u>		
ME	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	ļ	Yes	No
18	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)? Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period after			
ŀ	termination of government service, if terminating within 90 days) Yes X No			
L	of the any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A Organizations relying on a current notice regarding disaster assistance check here	1b		ļ
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
·	before the first day of the tax year beginning in 2011?	4.		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	1c		
_	defined in section 4942(j)(3) or 4942(j)(5)):			
a	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2011?			
	If "Yes," list the years			
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions) N/A	2b		1
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year? Yes X No			
t	If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2011.) N/A	_3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4b		Х

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Form 990-PF (2011) HOME STATE BANK CHARITABLE FOUNDATION 42	<u>-1378</u>	344 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		-
(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compensation
NONE		
	-	
		_
		<u> </u>
Total number of others receiving over \$50,000 for professional services	>	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 PROVIDE MONETARY AWARDS TO CHARITABLE, RELIGIOUS, LITERARY,		
EDUCATIONAL, OR OTHER WORTHY INSTITUTIONAL NEEDS. SEE	7	
STATEMENT 7		0.
2		
3	_	
	_	
4	-	
•	\dashv	
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A		
		0.
2		
All other program-related investments. See instructions.		
3	_	
	_	
Tatal Add base 4 through 0	+	
Total. Add lines 1 through 3		0.
	Forn	n 990-PF (2011)

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	0.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	184,112.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	184,112.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	2,762.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	181,350.
<u>6_</u> _	Minimum investment return. Enter 5% of line 5	6	9,068.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part)	d certain	
1	Minimum investment return from Part X, line 6	1	9,068.
2a	Tax on investment income for 2011 from Part VI, line 5		
b	Income tax for 2011 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	7.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	9,061.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	9,061.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	9,061.
P;	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	35,600. 0.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	_3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	35,600.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	35,600.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies fo	r the section

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4940(e) reduction of tax in those years

Part XIII . Undistributed Income (see instructions)

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	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI,		· · · · · · · · · · · · · · · · · · ·	2010	2011
line 7				9,061.
2 Undistributed income, if any, as of the end of 2011	***************************************	######################################		37001.
a Enter amount for 2010 only			0.	
b Total for prior years		-1		
<u></u>		0.		
3 Excess distributions carryover, if any, to 2011	***************************************			·····
a From 2006 21,963.				
b From 2007 22,576.				
t From 2008 33,687.				
d From 2009 20, 366.				
e From 2010 19,077.				
f Total of lines 3a through e	117,669.			
4 Qualifying distributions for 2011 from	117,003.			
Part XII, line 4: ►\$ 35,600.				
a Applied to 2010, but not more than line 2a			0.	
b Applied to undistributed income of prior	1.H111H1 -fir H		V •	+
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		^		***************************************
(Election required - see instructions)	0.			
d Applied to 2011 distributable amount	V •	# ####################################	 	0 061
e Remaining amount distributed out of corpus	26,539.	***************************************		9,061.
_	20,339.	 	***************************************	
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	144,208.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2010 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2011 Subtract	***************************************	······································		
lines 4d and 5 from line 1. This amount must				
be distributed in 2012				0.
7 Amounts treated as distributions out of			H	······································
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2006		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
not applied on line 5 or line 7	21,963.			
9 Excess distributions carryover to 2012.				
Subtract lines 7 and 8 from line 6a	122,245.			
10 Analysis of line 9				
a Excess from 2007 22,576.				
b Excess from 2008 33,687.				
c Excess from 2009 20, 366.				
d Excess from 2010 19,077.				
e Excess from 2011 26,539.				
	······································		•	5 . 000 DE (00.11)

	ATE BANK CH			42-13	78344 Page 10
Part XIV Private Operating F	_ 		-A, question 9)	N/A	
1 a 4f the foundation has received a ruling o					
foundation, and the ruling is effective for		=	. ▶ ∟		
b Check box to indicate whether the found		g foundation described i		4942(j)(3) or 49)42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		f=1 = 4-1
income from Part I or the minimum	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
investment return from Part X for					
each year listed .					
b 85% of line 2a					
c Qualifying distributions from Part XII,			ļ		
line 4 for each year listed .			<u> </u>		
d Amounts included in line 2c not					
used directly for active conduct of]				
exempt activities					
B Qualifying distributions made directly				1	
for active conduct of exempt activities					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter.					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter				 	
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
secunties loans (section 512(a)(5)), or royalties)		<u> </u>			
		 -	 -	 -	 -
(2) Support from general public and 5 or more exempt			1		
organizations as provided in					1
section 4942(j)(3)(B)(iii)		 	 		
(3) Largest amount of support from					
an exempt organization					
Part XV Supplementary Info		to this part only	if the foundatio	n had \$5 000 ar m	oro in cocoto
at any time during t			ii the loundatio	11 11au \$5,000 or 111	ore in assets
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh year (but only if they have contributed it			tributions received by th	e foundation before the clo	se of any tax
NONE	111010 111411 40,000) (000 1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
b List any managers of the foundation who other entity) of which the foundation ha			(or an equally large por	tion of the ownership of a p	partnership or
NONE	20 % 10 % OF BIGGER HITCHE	••			
	tion Count Olds I are	Cabala-bi			
2 Information Regarding Contribut Check here ► ☐ If the foundation	only makes contributions	to preselected charitable	organizations and does		
the foundation makes gifts, grants, etc	<u> </u>			complete items 2a, b, c, an	u u.
a The name, address, and telephone nun	nder of the person to who	m applications should be	e addressed		
SEE STATEMENT 5	<u> </u>				
b The form in which applications should	be submitted and informa	ition and materials they s	should include:		
c Any submission deadlines					
d Any restrictions or limitations on award	ds, such as by geographic	al areas, charitable fields	, kinds of institutions, o	r other factors	
123601 12-02-11					Form 990-PF (2011)

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the		rayment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recibient		
THEN FEED JUST ONE	N/A	PUBLIC CHARITY	CHARITABLE	
LEMARS, IA 51031				500
CITY OF SCRANTON 1006 MAIN STREET	N/A	PUBLIC CHARITY	CHARITABLE	
SCRANTON, IA 51462				100
BETA TAU DELTA (SIMON ESTES) 1537 235TH STREET	N/A	PUBLIC CHARITY	CHARITABLE	
JEFFERSON, IA 50129				2,100
ADOPT A FAMILY 309 NORTH OAK	N/A	PUBLIC CHARITY	CHARITABLE	
JEFFERSON, IA 50129				50
AMERICAN CANCER SOCIETY	N/A	PUBLIC CHARITY	CHARITABLE	
8364 HICKMAN ROAD DES MOINES, IA 50325				1,000
	ONTINUATION SHE	ET(S)	▶ 3a	35,600
b Approved for future payment				
NONE				
				
Total			▶ 3b	0

Part XVI-A	Analysis	of Income	-Producina	Activities
T CH L ALTER 1	MILLIANS		- F I OUUCIIIU	ACHAIRE 3

inter gross amounts unless otherwise indicated	Unrelated	business income		led by section 512, 513, or 514	(e)
• • • • • • • • • • • • • • • • • • • •	(a)	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion	Amount	function income
•			+ +		
ab			+		
			1 1		
t			+-+		
		<u> </u>	+		
e					
T. Fore and contracts from accomment energies	-		+		
g Fees and contracts from government agencies					
2 Membership dues and assessments			+		
3 Interest on savings and temporary cash			14	481.	
Investments 4 Dividends and interest from securities			1 1 1	401.	
•	•				
5 Net rental income or (loss) from real estate:			-1		
a Debt-financed property			1		
b Not debt-financed property			-		
6 Net rental income or (loss) from personal property					
7 Other investment income			.		
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a	_				
b	_ L				
C	_				
d	_				
e					
12 Subtotal Add columns (b), (d), and (e)	7 77 77	0	•	481.	
13 Total. Add line 12, columns (b), (d), and (e)				. 13	481
(See worksheet in line 13 instructions to verify calculations	<u> </u>				
Part XVI-B Relationship of Activities		mnlishment of t	Evamo	t Durnoses	
relationship of Activities			-vemb	. ruiposes	

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).				
I					

123621 12-02-11

Part XVII	Information Re Exempt Organi		sfers To a	nd Transactions	and Relations	ships With Nonc	haritable	1090 10
1 Did the or	ganization directly or indire		of the following	with any other organizat	ion described in sec	tion 501(c) of	Y	es No
	other than section 501(c)					55 7(5) 51		55 1.0
	from the reporting founda			• •				
(1) Cash	. •		,		_		1a(1)	X
(2) Other	assets			•	•		1a(2)	X
b Other tran	sactions				•			
(1) Sales	of assets to a noncharitat	ole exempt organizat	ion				1b(1)	X
(2) Purch	ases of assets from a nor	ncharitable exempt o	rganization				1b(2)	X
(3) Renta	l of facilities, equipment, o	or other assets			•		1b(3)	X
(4) Reimi	bursement arrangements						1b(4)	X
	s or loan guarantees						1b(5)	X
(6) Perfo	rmance of services or mer	mbership or fundrais	sing solicitatioi	ns		•	1b(6)	X
	f facilities, equipment, mai				•	٠	10	X
or service:	ver to any of the above is ' s given by the reporting fo	oundation If the four	idation receive	dule Column (b) should a ed less than fair market va	lways show the fair fue in any transactio	market value of the good n or sharing arrangeme	ds, other assets nt, show in	5,
) the value of the goods, o							
(a) Line no	(b) Amount involved	(c) Name of		exempt organization	(d) Description	n of transfers, transactions,	and sharing arrang	gements
			N/A	· · · · · · · · · · · · · · · · · · ·				
		· .						
-					 -			
		_ ,					•	
						· · · · · · · · · · · · · · · · · · ·		
	<u>-</u>							
								
					-			
in section	ndation directly or indirect 501(c) of the Code (other omplete the following sche	than section 501(c)			nizations described		Yes	X No
	(a) Name of org	anization		(b) Type of organization		(c) Description of relate	onship	
	N/A							
				<u> </u>	- 			
					-			
Sign Here	penalties of perjury, I declare tablef, it is true correct, and com	that I have examined thin plete. Declaration of pro	s return, including eparer (other than	n taxpayer) is based on all infor	rmation of which prepar	e best of my knowledge er has any knowledge	May the IRS disc return with the p shown below (se X Yes	reparer
Julyi	Print/Type preparer's na	me	Preparer's si	Date/ /	Title Date	Check rf P1	TIN	
	1 min The higher 2 lig	iiii o	,)	911ature	1 1 1	Check if P1 self- employed	IIV	
Paid	WAYNE FLOE	RCHINGER	Ways	w Roershunger	5-9-12		2002259	36
Preparer	Firm's name ► ROT		NY, P.	C. /		Firm's EIN ► 42-		
Use Only							· · -	
				, SUITE 1450	0			
] DE	S MOINES,	IA 50	309-3918		Phone no (51	L5) 244	
							Form 990-F	PF (2011)

3 Grants and Contributions Paid During th		T	<u> </u>	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
RACCOON RIVER VALLEY TRAIL	N/A	PUBLIC CHARITY	CUADIMADI.P	
ASSOCIATION	N/A	TOBBIC CHARITI	LIAKITABUB	
114 NORTH CHESTNUT	1			
JEFFERSON, IA 50129				5,00
ALL STRINGS ATTACHED	N/A	PUBLIC CHARITY	CHARITABLE	
PO BOX 253				
CARROLL, IA 51401				50
BELL TOWER FOUNDATION	N/A	PUBLIC CHARITY	CHARITARI.E	
220 NORTH CHESTNUT				
JEPFERSON, IA 50129				25
BLUE RIBBON FOUNDATION	N/A	PUBLIC CHARITY	CHARITABLE	
PO BOX 57130				
DES MOINES, IA 50317				1,00
BOY SCOUTS	N/A	PUBLIC CHARITY	CUADITADI.D	
PO BOX 3009	N/A	FOBBIC CHARITI	CHARITABLE	
DES MOINES, IA 50316				30
		 		- 30
CHURDAN FIRE DEPARTMENT	N/A	PUBLIC CHARITY	CHARITABLE	
905 JAY STREET				
CHURDAN, IA 50050		<u> </u>		6
I-CLUB	N/A	PUBLIC CHARITY	CHARTTARI.E	
402 CARVER-HAWKEYE ARENA	,	TODDIC CHARITI		
IOWA CITY, IA 52245				80
FIRST PRESBYTERIAN CHURCH	N/A	PUBLIC CHARITY	CHARITABLE	
208 WEST STATE				
JEFFERSON, IA 50129		 		95
FIRST UNITED METHODIST CHURCH	N/A	PUBLIC CHARITY	CHARITABLE	
307 SOUTH WILSON				
JEFFERSON, IA 50129				1,11
GENESIS DEVELOPMENT	N/A	PUBLIC CHARITY	CHARITABLE	
PO BOX 438 JEPPERSON, IA 50129				
Total from continuation sheets			<u> </u>	1,60

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount contribution status of any foundation manager Name and address (home or business) recipient or substantial contributor GOLDEN EAGLE WRESTLING N/A PUBLIC CHARITY CHARITABLE 9609 QUAIL RIDGE 900. URBANDALE, IA 50322 GRAND LODGE BPO DOES N/A PUBLIC CHARITY CHARITABLE PO BOX 168 JEFFERSON, IA 50129 700. GREENE COUNTY COMMUNITY FOUNDATION PUBLIC CHARITY CHARITABLE N/A 104 WEST WASHINGTON JEFFERSON, IA 50129 1,100. GREENE COUNTY MEDICAL CENTER N/A PUBLIC CHARITY CHARITABLE FOUNDATION 1000 WEST LINCOLNWAY 500. JEFFERSON, IA 50129 IOWA COLLEGE FOUNDATION PUBLIC CHARITY CHARITABLE N/A 505 5TH AVENUE DES MOINES, IA 50309 750. IOWA PUBLIC RADIO N/A PUBLIC CHARITY CHARITABLE 1021 COMMUNCATOTNS BLDG. 1,000. AMES, IA 50010 IOWA PUBLIC TELEVISON N/A PUBLIC CHARITY CHARITABLE PO BOX 6400 JOHNSTON, IA 50131 1,000. ISU FOUNDATION N/A PUBLIC CHARITY CHARITABLE 2505 ELWOOD DRIVE AMES, IA 50010 2,890. JEFFERSON COMMUNITY CHEST PUBLIC CHARITY CHARITABLE N/A 220 NORTH CHESTNUT JEFFERSON, IA 50129 1,000. JEFFERSON SCRANTON SCHOOL FOUNDATION N/A PUBLIC CHARITY CHARITABLE PO BOX 351 JEFFERSON, IA 50129 1,000. Total from continuation sheets

3 . Grants and Contributions Paid During the				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
NOMEN RACE FOR THE CURE	N/A	PUBLIC CHARITY	CHARITABLE	
DES MOINES, IA 50306				6
IOWA 4H FOUNDATION	N/A	PUBLIC CHARITY	CHARITABLE	
EXTENSION 4H YOUTH BUILDING				
AMES, IA 50010	-	 		300
NCCC 3318 5TH AVENUE SOUTH	N/A	PUBLIC CHARITY	CHARITABLE	
FORT DODGE, IA 50501				1,000
NEW HOPE VILLAGE FOUNDATION	N/A	PUBLIC CHARITY	CHARITABLE	
1211 BAST 18TH STREET				
CARROLL, IA 51401				25
IMPACT MINISTRIES INTERNATIONAL	N/A	PUBLIC CHARITY	CUADITARI.V	
PO BOX 102	N/A	TOBBIC CHARIII	CHARITABLE	
LONSDALE, MN 55046			-	80
CENTRAL CHRISTIAN CHURCH VACATION	N/A	PUBLIC CHARITY	CHARITABLE	
BIBLE SCHOOL				
108 NORTH ELM JEFFERSON, IA 50129			<u> </u>	10
AMES LITTLE LEAGUE	N/A	PUBLIC CHARITY	CHARITABLE	
PO BOX 684				_
AMES, IA 50014		 		5
SALEM METHODIST CHURCH	N/A	PUBLIC CHARITY	CUADTWADT P	
305 STATE STREET	,,,,	TOBBIC CIMALIT		
PATON, IA 50217		-	-	40
SCIENCE CENTER OF IOWA	N/A	PUBLIC CHARITY	CHARITABLE	
401 WEST MARTIN LUTHER KING PARKWAY DES MOINES, 1A 50309				30
GRAND JUNCTION FIRE AND RESCUE	N/A	PUBLIC CHARITY	CHARITABLE	
PO BOX 255				
GRAND JUNCTION, IA 50107 Total from continuation sheets			<u> </u>	10

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount contribution status of any foundation manager Name and address (home or business) recipient or substantial contributor N/A ST. COLUMBRILLE'S CATHOLIC CHURCH PUBLIC CHARITY CHARITABLE 805 HEAD STREET 680. CHURDAN, IA 50050 ST. JOSEPH'S CATHOLIC CHURCH N/A PUBLIC CHARITY CHARITABLE 503 NORTH CHESTNUT JEFFERSON, IA 50129 2,150. HOPE MINISTRIES PUBLIC CHARITY CHARITABLE N/A PO BOX 862 DES MOINES, IA 50304 100. COUNTRY BOY THEATRE COMPANY PUBLIC CHARITY CHARITABLE N/A 115 SOUTH WILSON 500. JEFFERSON, IA 50129 ZION LUTHERAN CHURCH N/A PUBLIC CHARITY CHARITABLE 319 WEST ELM STREET 900. OGDEN, IA 50212 TRINITY LUTHERAN CHURCH N/A PUBLIC CHARITY CHARITABLE 801 WEST LINCOLN WAY JEFFERSON, IA 50129 400. JEFFERSON ROTARY FOUNDATION N/A PUBLIC CHARITY CHARITABLE PO BOX 350 JEFFERSON, IA 50129 350. GREENE COUNTY ACTION RESOUCE CENTER N/A PUBLIC CHARITY CHARITABLE 112 EAST HARRISON JEFFERSON, IA 50129 1,000. Total from continuation sheets

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2011

Name of the organization

Employer identification number

H	HOME STATE BANK CHARITABLE FOUNDATION	42-1378344
Organization type (check	cone):	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	I
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	n is covered by the General Rule or a Special Rule. (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Spe	cial Rule. See instructions.
contributor. Con	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or mor nplete Parts I and II.	e (in money or property) from any one
Special Rules		
509(a)(1) and 17	1(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of 0(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.	
total contribution	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one as of more than \$1,000 for use exclusively for religious, charitable, scientific, literary of cruelty to children or animals. Complete Parts I, II, and III.	
contributions for If this box is che purpose. Do not	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one ruse exclusively for religious, charitable, etc., purposes, but these contributions did ecked, enter here the total contributions that were received during the year for an excomplete any of the parts unless the General Rule applies to this organization becable, etc., contributions of \$5,000 or more during the year.	I not total to more than \$1,000. Kclusively religious, charitable, etc.,
but it must answer "No" o	n that is not covered by the General Rule and/or the Special Rules does not file Sch on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or c set the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization

Employer identification number

HOME STATE BANK CHARITABLE FOUNDATION

42-1378344

Part I	Contributors (see instructions). Use duplicate copies of Part I	If additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	HOME STATE BANK 115 WEST STATE STREET JEFFERSON, IA 50129	\$\$.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
 		\$	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 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 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 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
122452 01 2		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Employer identification number

HOME STATE BANK CHARITABLE FOUNDATION

42-1378344

Part II	Noncash Property (see instructions). Use duplicate copies of P	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.	(b)	(c)	(d)
from Part I	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		* \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	990, 990-EZ, or 990-PF) (

ME S'	Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if additional	e following line entry. For organizations co , contributions of \$1,000 or less for the y	8), or (10) organizations that total more than \$1,000 for impleting Part III, enter ear (Enter this information once.)		
No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
·		(e) Transfer of gift			
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee		
No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	Transferee's name, address, ar	(e) Transfer of gift	Relationship of transferor to transferee		
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	(e) Transfer of gift				
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		
No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(e) Transfer of gift			
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CASH IN	VESTMENTS	STATEMENT 1
SOURCE				AMOUNT
INTEREST			•	481.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A	:	481.
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
TAX PREP	300.	150.		0.
TO FORM 990-PF, PG 1, LN 16B	300.	150.		0.
FORM 990-PF	TAX	ES		STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
EXCISE TAX	17.	0.		0.
TO FORM 990-PF, PG 1, LN 18	17.	0.		0.

	T OF OFFICERS, FOUNDATION MAN		STATI	EMENT 4
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE
DOUGLAS MCDERMOTT 1214 RUSHRIDGE RD JEFFERSON, IA 50129	DIRECTOR 0.00	0.	0.	0.
MARY GARST 1700 130TH STREET COON RAPIDS, IA 50058	TREASURER AND 0.00	DIRECTOR 0.	0.	0.
SCOTT SIEVERS 210 SOUTH WILSON JEFFERSON, IA 50129	DIRECTOR 0.00	0.	0.	0.
WAYNE SEAMAN 1827 NORTH WEST STREET CARROLL, IA 51401	DIRECTOR 0.00	0.	0.	0.
SUSAN TRONCHETTI 2366 140TH ST PATON, IA 50217	DIRECTOR 0.00	0.	0.	0.
ELIZABETH GARST 1313 FIG AVENUE COON RAPIDS, IA 50058	SECRETARY AND 0.00	DIRECTOR 0.	0.	0.
JENNIFER GARST 708 BROOKRIDGE AVE AMES, IA 50010	DIRECTOR 0.00	0.	0.	0.
SID JONES 1203 RUSHRIDGE RD JEFFERSON, IA 50129	PRESIDENT AND 0.00	DIRECTOR 0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6	, PART VIII	0.	0.	0.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

5

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

SID JONES 115 WEST STATE STREET JEFFERSON, IA 50129

TELEPHONE NUMBER

515-386-2131

FORM AND CONTENT OF APPLICATIONS

IN WRITING, WITH A BRIEF EXPLANATION OF THE INTENDED USE OF REQUESTED CONTRIBUTION.

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

MUST BE TO CHARITABLE, RELIGIOUS, LITERARY, EDUCATIONAL OR OTHER WORTHY INSTITUTIONS OR ORGANIZATIONS.