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

OMB No 1545-0052

2011

Department of the Treasury Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

<u>For•ca</u>	lendar year 2011, or tax year beginning	, 2011	, and ending	,
	AN J VAN WYK FAMILY			A Employer identification number 42-1484434
PO E	IDATION BOX 389 .DON, IA 51201-0389			B Telephone number (see the instructions) 712-324-5316
SHEL	DON, 1A 31201-0309			C If exemption application is pending, check here
G Ch	eck all that apply: Initial return	Initial Return of a for	mer public charity	D 1 Foreign organizations, check here
	Final return	Amended return		2 Foreign organizations meeting the 85% test, check
H (Address change Check type of organization: X Section 50	Name change 1(c)(3) exempt private f	oundation	here and attach computation
	Section 4947(a)(1) nonexempt charitable	trust Other taxable	orivate foundation	E If private foundation status was terminated
I F	air market value of all assets at end of year from Part II, column (c), line 16)	counting method: X C	ash Accrual	under section 507(b)(1)(A), check here
▶ \$	′ ′″ ′	Other (specify) , column (d) must be or		If the foundation is in a 60-month termination under section 507(b)(1)(B), check here .
Part	Analysis of Revenue and	(a) Revenue and	(b) Net investme	
	Expenses (The total of amounts in columns (b), (c), and (d) may not neces-	expenses per books	income	income for charitable purposes
	sarıly equal the amounts ın column (a) (see instructions))			(cash basis only)
	1 Contributions, gifts, grants, etc, received (att sch)	200,000.	**	5.1.2
	2 Ck Inf the foundn is not req to att Sch B	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	* .	(3) 33 F
	3 Interest on savings and temporary cash investments	215.	21	5. 215.
	4 Dividends and interest from securities 5a Gross rents			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
	b Net rental income or (loss)		p > 1	
R	6a Net gain/(loss) from sale of assets not on line 10		(· Profession of
E V	b Gross sales price for all assets on line 6a.	* * * * * * * * * * * * * * * * * * *		
E N	7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain			
U	9 Income modifications		``	The state of the s
E	10 a Gross sales less returns and allowances	क्रिकेश्वरकार्याची व्याप्त वर्ष	3 * 3	
	b Less Cost of goods sold			
	c Gross profit/(loss) (att sch)		 	* **
	11 Other income (attach schedule)			
	12 Total. Add lines 1 through 11	200,215.	21	5. 215.
	13 Compensation of officers, directors, trustees, etc	0.		
	14 Other employee salaries and wages.		-	
_	15 Pension plans, employee benefits. 16a Legal fees (attach schedule)			
A D M	b Accounting fees (attach sch) SEE ST 1	500.		
I N	Other prof fees (attach sch)			
O I P S E T	17 Interest From the first			
K R	18 Jaxes (attach schedule)(see instrs) 19 Depreciation (attach 012 sch) anid/depletion 20 Occupancy			
A A	19 Depreciation (attach 012 Sch) and depletion 5			
N V G E	20 Diccupancy 21 Travel ; conterences and in a citings			
A E	22 Printing and publications			
N X D P E	23 Other expenses (attach schedule)			
N S	24 Total operating and administrative			
E S	expenses. Add lines 13 through 23.	500.		
	25 Contributions, gifts, grants paid PART XV	65,950.	 	65,950.
	26 Total expenses and disbursements. Add lines 24 and 25	66,450.		0. 0. 65,950.
	27 Subtract line 26 from line 12:	, , ,		
	a Excess of revenue over expenses and disbursements	133,765.		
	b Net investment income (if negative, enter -0-)		21	
	C Adjusted net income (if negative, enter -0-).			215.

BAA For Paperwork Reduction Act Notice, see instructions.

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Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 1 31,969 2 133,765. 2 Enter amount from Part I, line 27a 3 3 Other increases not included in line 2 (itemize) 4 165,734 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 165,734.

Par	(a) List and describe	Losses for Tax on Investmer e the kınd(s) of property sold (e g , r se; or common stock, 200 shares ML	eal estate,	(b) How acquired P — Purchase D — Donation	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a	N/A				1	
b						
c						
d						
e						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal		(h) Gain or (e) plus (f) m	
<u>a</u> b					<u>.</u>	
c						
d						
e						
	Complete only for assets show	ing gain in column (h) and owned by	the foundation on 12/31/69)	(I) Gains (Coli	ımn (h)
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a		gain minus column (l lan -0-) or Losses (fi	(), but not less
а						
b						
c						
d						
е						· · · · · · · · · · · · · · · · · · ·
2	Capital gain net income or (net	t capital loss)	enter in Part I, line 7 ter -0- in Part I, line 7	2		
3	Net short-term capital gain or (loss) as defined in sections 1222(5)	and (6).			
	If gain, also enter in Part I, line in Part I, line 8	e 8, column (c) (see instructions) If	(loss), enter -0-	3		
Par		Section 4940(e) for Reduce	d Tax on Net Investme	ent Income	1	
Was i	s,' the foundation does not qual	tion 4942 tax on the distributable an ify under section 4940(e) Do not co	mplete this part		Yes	☐ No
1	Enter the appropriate amount in	n each column for each year, see th	e instructions before making	g any entries	 .	
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use ass	sets (col	(d) Distributior umn (b) divided	
	2010					
	2009					
	2008				. = -	
	2007					
	2006					
2	Total of line 1, column (d)			2		
3	Average distribution ratio for th number of years the foundation	e 5-year base period – divide the to has been in existence if less than t	otal on line 2 by 5, or by the 5 years	3		
4	Enter the net value of nonchari	table-use assets for 2011 from Part	X, line 5	4	1	
5	Multiply line 4 by line 3			5		-
	Enter 1% of net investment inc	ome (1% of Part I. line 27h)		6		
	Add lines 5 and 6			7		
		nes Desk VIII. bor - 4				.
	Enter qualifying distributions fro	·	Date the section of the original	8	<u> </u>	
	If line 8 is equal to or greater to Part VI instructions	nan line 7, check the box in Part VI,	line 1b, and complete that	oart using a 1%	6 tax rate See th	ne

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Forn	n 990-PF (2011) ARLAN J VAN WYK FAMILY 42-148	34434		F	Page 4
Pai	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see ins	tructions	;)		
1 8	a 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 instrs)	1			
اِ	b Domestic foundations that meet the section 4940(e) requirements in Part V,				4.
	check here ▶ ☐ and enter 1% 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, column (b)				٠
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable	ļ			لنينن
	foundations only Others enter -0-).	\rightarrow			<u>0.</u>
3	Add lines 1 and 2				4.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		_		<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-				4.
	Credits/Payments:				
	a 2011 estimated tax pmts and 2010 overpayment credited to 2011 6 a 36. Exempt foreign organizations — tax withheld at source	İ	-		
	b Exempt foreign organizations — tax withheld at source Tax paid with application for extension of time to file (Form 8868) 6c	ļ		*	
	Backup withholding erroneously withheld 6d			' #	167
	Total credits and payments. Add lines 6a through 6d				36.
8	Enter any penalty for underpayment of estimated tax. Check here				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed .				0.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				32.
11	Enter the amount of line 10 to be: Credited to 2012 estimated tax				0.
Par	t VII-A Statements Regarding Activities				
1 a	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		1 a	Yes	No X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		1 b		х
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials publish or distributed by the foundation in connection with the activities	hed			
c	Did the foundation file Form 1120-POL for this year?		1 c		x í
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	-			 ,
	(1) On the foundation \$\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	0.	ļ		!
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \Rightarrow \$ 0.		Ì		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	1	2		X
	If 'Yes,' attach a detailed description of the activities				 -
2	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles				;
3	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes.		3		Х
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
b	olf 'Yes,' has it filed a tax return on Form 990-T for this year?		4b	N,	/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	L	5		X
_	If 'Yes,' attach the statement required by General Instruction T	•	1		
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 confli- with the state law remain in the governing instrument?	ct _	6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	. [7	X	
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions) IA	_			
b	o If 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 <i>General Instruction G</i> ? If 'No,' attach explanation		8ь	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 494 for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If 'Yes,' complete Part XIV)?	·2(j)(5) irt XIV	9		<u>x</u>
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their name and addresses.		10		Х
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► 20, 20, 20		
a Did the foundation hold more than a 2% direct or indirect interest in any business		
Tes M No		
b 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.)	NI/	′ Δ
determine if the foundation had excess business holdings in 2011.)	147	<u> </u>
a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a		Х
b 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?		Х
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Part VII-B Statements Regarding Activit	ies for Which Form	n 4720 May Be Requ	uired (continued)	,,	
5a During the year did the foundation pay or incu	-				
(1) Carry on propaganda, or otherwise attempt	ot to influence legislation	on (section 4945(e))?	Yes X	No	1
 (2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra 	No	المر .			
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	∐ Yes X	No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	han a charitable, etc, oi 14940(d)(2)? (see instri	rganization described uctions)	Yes X	No	
(5) Provide for any purpose other than religio educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	o, literary, or or animals?	Yes X	No	
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	a current notice regard	ding disaster assistance	tions	5b	N/A
Organizations relying on a current notice rega	•				读
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	sibility for the grant?	•	N/A. Yes	No	
If 'Yes,' attach the statement required by Reg					
6a Did the foundation, during the year, receive all on a personal benefit contract?b Did the foundation, during the year, pay prem			∐ Yes X	No 6b	<u> </u>
If 'Yes' to 6b, file Form 8870	idins, directly of manee	itty, on a personal benef	in Contract	- 55	
7a At any time during the tax year, was the found	dation a party to a proh	ibited tax shelter transa	ction? Yes X	No	
b If 'Yes,' did the foundation receive any proceed				I/A 7b	
Part VIII Information About Officers, D and Contractors	irectors, Trustees,	Foundation Manag	jers, Highly Paid E	Employees	,
1 List all officers, directors, trustees, foundation	n managers and their	compensation (see inst	ructions).		
(a) Name and address	(b) Title, and average hours per week devoted to position		(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allo	e account, owances
ARLAN J VAN WYK	PRESIDENT	0.	0.		0.
2814 MEADOW PARK AVENUE	1.00				
HENDERSON, NV 89052					
_DARLA_ARENDS	TREASURER	0.	0.		0.
PO BOX 389	2.00				
SHELDON, IA 51201	D T D T G M G D				
_DAVE_VAN_WYK	DIRECTOR	0.	0.		0.
PO BOX 389	1.00				
SHELDON, IA 51201					
2 Compensation of five highest-paid employee	es (other than those inc	luded on line 1 – see in	structions). If none, e	nter 'NONE.'	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allo	
NONE			harvasion		
	-				
Total number of other employees paid over \$50,000	<u>l</u>	I			<u> </u>
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3 Five highest-paid independent contractors for professional services (see in	nstructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
-		
Total number of others receiving over \$50,000 for professional services	•	C
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistica organizations and other beneficiaries served, conferences convened, research papers produced, etc	I information such as the number of	Expenses
1 <u>N/A</u>		
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
2		•
3		
·		
4		
Part IX-B Summary of Program-Related Investments (see Instru	ctions)	
Describe the two largest program-related investments made by the foundation du	ring the tax year on lines 1 and 2	Amount
1		
<u>N/A</u>		
2		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3	<u> </u>	0.
BAA		Form <b>990-PF</b> (201

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 1.63 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: a Average monthly fair market value of securities 1 a **b** Average of monthly cash balances 1_b 98,852 c Fair market value of all other assets (see instructions) 1 c 1 d 98,852 d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1c 0. (attach detailed explanation) 1 e 2 2 Acquisition indebtedness applicable to line 1 assets 0 98, 852 3 Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions). 1,483. Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 5 97,369. 4,868. Minimum investment return. Enter 5% of line 5 6 Part XI Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and do not complete this part.) and certain foreign organizations check here Minimum investment return from Part X, line 6 4,868. 2a Tax on investment income for 2011 from Part VI, line 5 2a 4 b Income tax for 2011. (This does not include the tax from Part VI) 2b 4. c Add lines 2a and 2b 2 c 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 4,864. 4 Recoveries of amounts treated as qualifying distributions 4 Add lines 3 and 4 5 4,864. 6 Deduction from distributable amount (see instructions) 4.864. Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 Part XII | Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1 a 65,950. b Program-related investments - total from Part IX-B 1 b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. purposes 2 3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required) 3a **b** Cash distribution test (attach the required schedule) 3 h 65,950 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions) 5 65,950. Adjusted qualifying distributions. Subtract line 5 from line 4 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years BAA

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#### Part XIII Undistributed Income (see instructions)

	•	(a) Corpus	<b>(b)</b> Years prior to 2010	<b>(c)</b> 2010	<b>(d)</b> 2011
	Distributable amount for 2011 from Part XI, line 7				4.864.
	Undistributed income, if any, as of the end of 2011:				4,004.
	Enter amount for 2010 only .		0	0.	
	Total for prior years 20, 20, 20 Excess distributions carryover, if any, to 2011:	- 4.54	0.		
	From 2006 447, 097.				•
b	From 2007 1,168,683.	. S			
	From 2008 201, 457.				
	From 2009 147, 243. From 2010 97, 701.			-	
	Total of lines 3a through e	2.062.181.	1.5		
	Qualifying distributions for 2011 from Part	m * /4			
	XII, line 4 ► \$65,950.				
а	Applied to 2010, but not more than line 2a			0.	
b	Applied to undistributed income of prior years (Election required – see instructions)	* * <b>=</b> 1 ,	0.		2 1 1 1 2 1 2 2 1 1 2 1 1 1 1 1 1 1 1 1
	` '		0.		
	Treated as distributions out of corpus (Election required — see instructions).	0.			
d	Applied to 2011 distributable amount	,	:		4,864.
	Remaining amount distributed out of corpus	61,086.			
	Excess distributions carryover applied to 2011 (If an amount appears in column (d), the	0.			<u>.</u>
	same amount must be shown in column (a) )	*			, ₁ , ,
6	Enter the net total of each column as				- 1
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e. Subtract line 5	2,123,267.			
b	Prior years' undistributed income Subtract line 4b from line 2b		0.		, ,
С	Enter the amount of prior years' undistribut-				
	ed income for which a notice of deficiency has been issued, or on which the section				
	4942(a) tax has been previously assessed		0.		
-	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 instructions			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				
	corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)				
	(see instructions).	0.			
	Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)	447,097.			
	Excess distributions carryover to 2012.	117,037.			
9	Subtract lines 7 and 8 from line 6a	1,676,170.			
	Analysis of line 9				
	Excess from 2007 1,168,683. Excess from 2008 201,457.				
	Excess from 2008 201, 457.  Excess from 2009 147, 243.				
	Excess from 2010 97,701.		!		
e l	Excess from 2011 61,086.				
					Form 000 DF (2011)

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Part XIV   Private Operating Foundate					N/A
1a If the foundation has received a ruling or one is effective for 2011, enter the date of the	ruling	·		_	
<b>b</b> Check box to indicate whether the foundation		rating foundation de		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years	1	
investment return from Part X for each year listed	(a) 2011	<b>(b)</b> 2010	(c) 2009	(d) 2008	(e) Total
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					<u></u>
d Amounts included in line 2c not used directly for active conduct of exempt activities					
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c</li> </ul>					
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					
<ul><li>(1) Total support other than gross investment income (interest, dividends, rents, payments</li></ul>					
on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information assets at any time during th	(Complete this p	part only if the	organization ha	id \$5,000 or mor	e in
		structions.)			
Information Regarding Foundation Managers a List any managers of the foundation who have close of any tax year (but only if they have ARLAN J VAN WYK	nave contributed mo	re than 2% of the than \$5,000) (See	otal contributions resection 507(d)(2))	eceived by the found	dation before the
<b>b</b> List any managers of the foundation who ca partnership or other entity) of which the NONE	own 10% or more of foundation has a 10	the stock of a corp 9% or greater intere	ooration (or an equa st	ally large portion of	the ownership of
2 Information Regarding Contribution, Gran Check here ► X if the foundation only n requests for funds If the foundation make complete items 2a, b, c, and d	nakes contributions	to preselected char	ritable organization:		
a The name, address, and telephone number	er of the person to w	hom applications s	hould be addressed	d	
<b>b</b> The form in which applications should be	submitted and inforn	mation and material	ls they should ınclu	de	
c Any submission deadlines		·		· · · · · · · · · · · · · · · · · · ·	
d Any restrictions or limitations on awards, s	such as by geograph	nical areas, charitat	ole fields, kinds of i	nstitutions, or other	factors
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				······································	
3	Grants and Contributions Paid During the Y	ear or Approved for Fut	ure Paymen	ıt	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	substantial contributor	recipient		
a	Paid during the year				
	STATEMENT 2				
			1		
			}		
					1
	Total			<u>► 3a</u>	65,950
b	Approved for future payment				
		1			
	Total			► 3h	

#### Part XVI A. Analysis of Income-Producing Activities

Enter gro	ss amounts unless otherwise indicated	Unrelate	d business income	Excluded by	section 512, 513, or 514	(e)
1`Pro	gram service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	<b>(d)</b> Amount	Related or exempt function income (See instructions)
a						
b						
	<del></del>	<u> </u>				
d				<u> </u>		
				<b></b>		
f				<del>  _  </del>		
_	s and contracts from government agencies	L				<del></del>
	mbership dues and assessments	-		<del>                                     </del>		
	est on savings and temporary cash investments	1		14	215.	
	idends and interest from securities				*	
	rental income or (loss) from real estate:		•	<del> </del>		
	ot-financed property	<del> </del>		-		
	debt-financed property			+		
	rental income or (loss) from personal property er investment income			+ +-		
	or (loss) from sales of assets other than inventory			+ +		
	income or (loss) from special events	<del>                                     </del>		+ +		<del></del>
	ss profit or (loss) from sales of inventory	<del> </del>	·	<del> </del>		
	er revenue					
						35,34
L						
d e					215.	
d e 12 Sub					215.	215.
e	total Add columns (b), (d), and (e)					215.
e12 Sub 13 Tot See wor	ototal Add columns (b), (d), and (e)  al. Add line 12, columns (b), (d), and (e)  ksheet in line 13 instructions to verify calculation	ons )	shment of Exemp	nt Purnos	13	215.
de 12 Sub 13 Tot See wor	ototal Add columns (b), (d), and (e)  al. Add line 12, columns (b), (d), and (e)  Asheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the	ons )		·-	13 <u>.</u>	
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d e 12 Sub 13 Tot See work Part XV	ototal Add columns (b), (d), and (e)  al. Add line 12, columns (b), (d), and (e)  Asheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the	ons )		·-	13 <u>.</u>	
d e 12 Sub 13 Tot See work Part XV	ototal Add columns (b), (d), and (e)  al. Add line 12, columns (b), (d), and (e)  Asheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the	ons )		·-	13 <u>.</u>	
d e 12 Sub 13 Tot See work Part XV	ototal Add columns (b), (d), and (e)  al. Add line 12, columns (b), (d), and (e)  Asheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the	ons )		·-	13 <u>.</u>	
d e 12 Sub 13 Tot See work Part XV	ototal Add columns (b), (d), and (e)  al. Add line 12, columns (b), (d), and (e)  Asheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the	ons )		·-	13 <u>.</u>	
d e 12 Sub 13 Tot See work Part XV	ototal Add columns (b), (d), and (e)  al. Add line 12, columns (b), (d), and (e)  Asheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the	ons )		·-	13 <u>.</u>	
d e 12 Sub 13 Tot See work Part XV	ototal Add columns (b), (d), and (e)  al. Add line 12, columns (b), (d), and (e)  Asheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the	ons )		·-	13 <u>.</u>	
d e 12 Sub 13 Tot See work Part XV	ototal Add columns (b), (d), and (e)  al. Add line 12, columns (b), (d), and (e)  Asheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the	ons )		·-	13 <u>.</u>	
d e 12 Sub 13 Tot See work Part XV	ototal Add columns (b), (d), and (e)  al. Add line 12, columns (b), (d), and (e)  Asheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the	ons )		·-	13 <u>.</u>	
d e 12 Sub 13 Tot See work Part XV	ototal Add columns (b), (d), and (e)  al. Add line 12, columns (b), (d), and (e)  Asheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the	ons )		·-	13 <u>.</u>	
d e 12 Sub 13 Tot See work Part XV	ototal Add columns (b), (d), and (e)  al. Add line 12, columns (b), (d), and (e)  Asheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the	ons )		·-	13 <u>.</u>	
d e 12 Sub 13 Tot See work Part XV	ototal Add columns (b), (d), and (e)  al. Add line 12, columns (b), (d), and (e)  Asheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the	ons )		·-	13 <u>.</u>	
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d e 12 Sub 13 Tot See work Part XV	ototal Add columns (b), (d), and (e)  al. Add line 12, columns (b), (d), and (e)  Asheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the	ons )		·-	13 <u>.</u>	
d e 12 Sub 13 Tot See work Part XV	ototal Add columns (b), (d), and (e)  al. Add line 12, columns (b), (d), and (e)  Asheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the	ons )		·-	13 <u>.</u>	
d e 12 Sub 13 Tot See work Part XV	ototal Add columns (b), (d), and (e)  al. Add line 12, columns (b), (d), and (e)  Asheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the	ons )		·-	13 <u>.</u>	y to the astructions.)

### Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

a Transfe (1) Cas (2) Oth b Other tr (1) Sale (2) Pur (3) Rer	organization directly ed in section 501(c) or to political organizations from the reporting sher assets eansactions: es of assets to a nonchases of assets from that of facilities, equipmbursement arranger	of the Code (o nons? foundation to charitable exe n a noncharita oment, or othe	ther than section a noncharitable empt organization able exempt orga	n 501(c)(3) organ exempt organız	nizations) or in sect	zation ion 527,	1a (1) 1a (2) 1b (1) 1b (2) 1b (3) 1b (4)	Yes	X X X X X
<b>(5)</b> Loa	ns or loan guarantee	s					1 b (5)		<u> </u>
• •	formance of services						1 b (6)		X
c Sharing	of facilities, equipme	ent, mailing lis	sts, other assets,	, or paid employ	ees		1c		<u>X</u>
<b>d</b> If the au the goo any trar	nswer to any of the a ds, other assets, or s nsaction or sharing ar	bove is 'Yes,' services given rrangement, s	complete the fol by the reporting how in column (	llowing schedule foundation If th d) the value of the	. Column <b>(b)</b> should ne foundation receiv ne goods, other ass	d always show the fair red less than fair mark ets, or services receive	market val et value in ed.	ue of	
(a) Line no	(b) Amount involved		of noncharitable exem			f transfers, transactions, and			
N/A									
						<u>.</u>			
							<del></del>		
				·	1				
-									
<del></del>								-	
-									
						**	·		
			· · ·						
	oundation directly or i ed in section 501(c) o complete the followi		ated with, or relather than section	ated to, one or n 1 501(c)(3)) or in	nore tax-exempt org section 527?	ganizations	Yes	X X	<b>1</b> 0
	) Name of organization	on	<b>(b)</b> Type	of organization		(c) Description of re	lationship		
N/A									
Under	nenalties of neruny 1 declare	e that I have exam	ned this return, include	ling accompanying sel	nedules and statements a	nd to the best of my knowledg	o and bolief it	ic true	
Sign Here	and complete Declaration	of preparer (other	than taxpayer) is base	d on all information o	TREASURE	knowledge	May the I this return preparer (see instr	RS discu n with the shown be	elow
	Print/Type preparer's nam	ne	reparer's	signature	Date	Check If	PTIN	res	No
Paid	JOHN P. TOAL	Æ	( has I	1). Bele	5/9/6	)	P01405	645	
Preparer			STAVE CO.	, LLP	<del></del>		173624		
Use Only	· -	316 W 187		<u> </u>				-	
	_		A 51301-01			Phone no (712	2) 262-3	3117	
BAA							Form 99		2011)

## 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 ARLAN J VAN WYK	FAMILY	Employer identification number
FOUNDATION		42-1484434
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> trea	ated as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
1 01111 350 1 1	4947(a)(1) nonexempt charitable trust treated	as a private foundation
	501(c)(3) taxable private foundation	•
Check if your organization is covered by the	General Rule or a Special Rule.	1.0. 10.1.0.
<b>Note.</b> Only a section 501(c)(7), (8), or (10) or	organization can check boxes for both the General Rule	e and a Special Rule. See instructions
General Rule		
X For an organization filing Form 990, 990	-EZ, or 990-PF that received, during the year, \$5,000 c	or more (in money or property) from any one
contributor (Complete Parts I and II)		
Special Rules		
For a section 501(c)(3) organization film	g Form 990 or 990-EZ that met the 33-1/3% support to lived from any one contributor, during the year, a contr	est of the regulations under sections
(2) 2% of the amount on (i) Form 990, P	art VIII, line 1h or (ii) Form 990-EZ, line 1 Complete F	Parts I and II
For a section 501(c)(7), (8), or (10) orga	nization filing Form 990 or 990-EZ that received from	any one contributor, during the year,
total contributions of more than \$1,000 f the prevention of cruelty to children or a	or use exclusively for religious, charitable, scientific, li nimals Complete Parts I, II, and III	terary, or educational purposes, or
For a section 501(c)(7), (8), or (10) orga	inization filing Form 990 or 990-EZ that received from	any one contributor, during the year,
contributions for use exclusively for relig	lious, charitable, etc, purposes, but these contributions al contributions that were received during the year for	s did not total to more than \$1,000
purpose Do not complete any of the par	rts unless the General Rule applies to this organization	n because it received nonexclusively
religious, charitable, etc, contributions of	f \$5,000 or more during the year	<b>►</b> \$
Caution: An organization that is not covered	by the General Rule and/or the Special Rules does no	ot file Schedule B (Form 990, 990-EZ, or
990-PF) but it <b>must</b> answer 'No' on Part IV, Form 990-PF, to certify that it does not mee	line 2, of its Form 990, or check the box on line H of it the filing requirements of Schedule B (Form 990, 990)	ts Form 990-E∠ or on Part I, line 2, of its J-EZ, or 990-PF)
BAA For Paperwork Reduction Act Notice		Schedule <b>B</b> (Form 990, 990-EZ, or 990-PF) (2011)
990EZ, or 990-PF.	,	

Name of org			er identification number
ARLAN	J VAN WYK FAMILY	42-	1484434
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional s	pace is needed	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ARLAN J VAN WYK	200,000	Person X Payroll
	2814 MEADOW PARK AVENUE HENDERSON, NV 89052	\$200,000	(Complete Part II if there is a noncash contribution)
(a) Number	(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) Number	(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) Number	(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) Number	(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) Number	(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)
54.4		Calcal I. D. (F. O)	000 DE) (0011)

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2011)

Page

1 of

1 of Part 1

Page

1 to

1 of Part II

Name of organization

ARLAN J VAN WYK FAMILY

42-1484434

Employer identification number

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed (d) Date received (a) No. from Part I (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) N/A (d) Date received (a) No. from Part I (c) FMV (or estimate) (see instructions) Description of noncash property given (d) Date received (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (a) No. from Part I (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received (a) No. from Part I (d) Date received (a) No. from (c) FMV (or estimate) (see instructions) (b) Description of noncash property given Part I (a) (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) No. from Date received Part I BAA Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

TEEA0703L 08/30/11

1 of Part III

Name of organization
ARLAN J VAN WYK FAMILY

Employer identification number 42-1484434

Part III .	Exclusively religious, charitable, etc, individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete cols (a) through (e) and the following line entry					
•	For organizations completing Part III, enter total of exclusively religious, charitable, etc, contributions of \$1,000 or less for the year (Enter this information once See instructions)  Use duplicate copies of Part III if additional space is needed					
(a) No. from Part I	(b) (c) Purpose of gift Use of gift			(d) Description of how gift is held		
	N/A					
	(e)  Transfer of gift  Transferee's name, address, and ZIP + 4  Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	(e) Transfer of gift Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	(e) Transfer of gift Transferee's name, address, and ZIP + 4			ationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	(e) Transfer of gift Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee			
ļ						

2011	FEDERAL STATEMENTS	PAGE 1
Gueni 2205	AFFLAN I VAN WYK FAMILY FOUNDATION	42-1434434

#### STATEMENT 1 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES

		(A)	(B) NET	(C)	(D)
		EXPENSES	INVESTMENT	ADJUSTED	CHARITABLE
	<u>F</u>	PER BOOKS	INCOME	NET INCOME	<u>PURPOSES</u>
ACCOUNTING	TOTAL \$	500. 500.	\$ 0.	<u>\$ 0.</u>	\$ 0.

#### STATEMENT 2 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
NCC FOUNDATION 603 WEST PARK STREET SHELDON, IA 51201	NONE	YES	SCHOLARSHIP AND EQUIPMENT	\$ 1,500.
CAMPUS CRUSADE FOR CHRIST 100 LAKE HART DR ORLANDO, FL 32832	NONE	YES	MINISTRY TO YOUTH	1,050.
HOPE HAVEN PO BOX 70 ROCK VALLEY, IA 51247	NONE	YES	ASSISTING THE DISABLED	10,000.
RISE MINISTRIES 517 PARK STREET SHELDON, IA 51201	NONE	YES	YOUTH MINISTRY OUTREACH	25,000.
ST PATRICKS SCHOOL 310 10TH STREET SHELDON, IA 51201	NONE	YES	CATHOLIC GRADE SCHOOL	100.
BETHANY CHRISTIAN SERVICE 123 ALBANY AVE SE ORANGE CITY, IA 51041	NONE	YES	ADOPTION, FOSTER CARE	500.
CHILDREN'S WORLD 1221 E 6TH ST SHELDON, IA 51201	NONE	YES	CHILDCARE CENTER BUILDING	2,000.
HAITIAN AMERICAN FRIENDSHIP FOUNDATION 3170 AIRMANS DRIVE FORT MYERS, FL 34946	NONE	YES	MISSIONARIES TO HAITI	2,000.
MISSION TO HAITI P.O. BOX 523157 MIAMI, FL 33152	NONE	YES	SPONSOR CHILDREN IN HAITI	5,000.

2011 °

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# FEDERAL STATEMENTS ARLAN J VAN WYK FAMILY FOUNDATION

PAGE 2

42-1434484

#### STATEMENT 2 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT		AMOUNT		
AMERICAN RED CROSS 4200 WAR EAGLE DRIVE SIOUX CITY, IA 51109	NONE	YES	LOCAL DISASTER RELIEF	\$	1,000.		
BETHEL UNIVERSITY 3900 BETHEL DRIVE ST PAUL, MN 51109	NONE	YES	FACILITY IMPROVEMENTS		10,000.		
CRAIG HOSPITAL FOUNDATION 3425 S CLARKSON ST ENBLEWOOD, CO 80113	NONE	YES	HOUSING ASSISTANCE		2,500.		
SHELDON MINSTERIAL ASSOCIATION 1400 WESTERN AVE SHELDON, IA 51201	NONE	YES	SPONSOR NATIONAL DAY OF PRAYER BREAKFAST		300.		
TRANSPORT FOR CHRIST PO BOX 303 DENVER, PA 17517	NONE	YES	CHAPEL MINISTRY		5,000.		
	TOTAL \$ 65,950.						