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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

**2012**

Open to public inspection

For calendar year 2012 or tax year beginning

, and ending

Name of foundation <b>HERRIG CHARITABLE FOUNDATION</b>		A Employer identification number <b>42-6430625</b>
Number and street (or P.O. box number if mail is not delivered to street address) <b>3388 KENNEDY CIRCLE</b>	Room/suite	B Telephone number <b>(563) 556-0434</b>
City or town, state, and ZIP code <b>DUBUQUE, IA 52002</b>		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		D 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) <b>\$ 2,585,477.</b> (Part I, column (d) must be on cash basis)	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)	E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received	11,700.			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	33.	33.		
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income (or loss)				
	6a Net gain (or loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain, net income (from Part IV, line 2)		0.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss)					
11 Other income	597,697.	597,697.	0.		
12 Total. Add lines 1 through 11	609,430.	597,730.	0.		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees				
	b Accounting fees STMT 3	4,571.	4,571.	0.	0.
	c Other professional fees STMT 4	48,000.	48,000.	0.	0.
	17 Interest	376,734.	376,734.	0.	0.
	18 Taxes				
	19 Depreciation and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses STMT 5	8,608.	8,608.	0.	0.
	24 Total operating and administrative expenses. Add lines 13 through 23	437,913.	437,913.	0.	0.
	25 Contributions, gifts, grants paid	445,417.			445,417.
26 Total expenses and disbursements. Add lines 24 and 25	883,330.	437,913.	0.	445,417.	
27 Subtract line 26 from line 12	-273,900.				
a Excess of revenue over expenses and disbursements		159,817.			
b Net investment income (if negative, enter -0-)					
c Adjusted net income (if negative, enter -0-)			0.		

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LHA For Paperwork Reduction Act Notice, see instructions.

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**Part II Balance Sheets**

Attached schedules and amounts in the description column should be for end-of-year amounts only

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	1 Cash - non-interest-bearing	8,529.	17,622.	17,622.
	2 Savings and temporary cash investments			
	3 Accounts receivable			
	Less: allowance for doubtful accounts			
	4 Pledges receivable			
	Less: allowance for doubtful accounts			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable	30,000.		
	Less: allowance for doubtful accounts	0.	30,000.	30,000.
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
<b>Liabilities</b>	11 Investments - land, buildings, and equipment basis			
	Less: accumulated depreciation			
	12 Investments - mortgage loans			
	13 Investments - other			
	14 Land, buildings, and equipment basis			
	Less: accumulated depreciation			
	15 Other assets (describe <b>STATEMENT 7</b> )	3,009,582.	2,537,855.	2,537,855.
	16 <b>Total assets</b> (to be completed by all filers)	3,048,111.	2,585,477.	2,585,477.
	17 Accounts payable and accrued expenses			
	18 Grants payable			
<b>Net Assets or Fund Balances</b>	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons	400,000.	1,235,557.	<b>STATEMENT 8</b>
	21 Mortgages and other notes payable	8,959,392.	8,647,301.	<b>STATEMENT 9</b>
	22 Other liabilities (describe )			
	23 <b>Total liabilities</b> (add lines 17 through 22)	9,359,392.	9,882,858.	
<b>Net Assets or Fund Balances</b>	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. <input type="checkbox"/>			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> <b>X</b>			
	27 Capital stock, trust principal, or current funds	-6,311,281.	-7,297,381.	
	28 Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
	29 Retained earnings, accumulated income, endowment, or other funds	0.	0.	
30 <b>Total net assets or fund balances</b>	-6,311,281.	-7,297,381.		
31 <b>Total liabilities and net assets/fund balances</b>	3,048,111.	2,585,477.		

**Part III Analysis of Changes in Net Assets or Fund Balances**

1 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	-6,311,281.
2 Enter amount from Part I, line 27a	2	-273,900.
3 Other increases not included in line 2 (itemize) <b>LIFE INSURANCE PROCEEDS</b>	3	1,052,528.
4 Add lines 1, 2, and 3	4	-5,532,653.
5 Decreases not included in line 2 (itemize) <b>SEE STATEMENT 6</b>	5	1,764,728.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	-7,297,381.

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**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a			
b	NONE		
c			
d			
e			

  

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

  

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			
b			
c			
d			
e			

  

2 Capital gain net income or (net capital loss)	<div style="display: flex; align-items: center;"> <div style="border-left: 1px solid black; border-right: 1px solid black; padding: 0 5px;">           If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7         </div> <div style="margin: 0 5px;">}</div> </div>	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 8, column (c) If (loss), enter -0- in Part I, line 8		3	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2011	403,251.	-5,387,805.	.000000
2010	148,123.	-4,643,190.	.000000
2009	172,444.	-3,812,101.	.000000
2008	219,340.	-3,125,174.	.000000
2007	256,609.	-1,553,816.	.000000

  

2 Total of line 1, column (d)	2	.000000
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	.000000
4 Enter the net value of noncharitable-use assets for 2012 from Part X, line 5	4	-4,881,137.
5 Multiply line 4 by line 3	5	0.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	1,598.
7 Add lines 5 and 6	7	1,598.
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions	8	445,417.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)		1	1,598.
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		2	0.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		3	1,598.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0.
3 Add lines 1 and 2		5	1,598.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			
6 Credits/Payments			
a 2012 estimated tax payments and 2011 overpayment credited to 2012	6a	1,666.	
b Exempt foreign organizations - tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7	1,666.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> 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	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	68.	
11 Enter the amount of line 10 to be Credited to 2013 estimated tax	11	0.	

**Part VII-A Statements Regarding Activities**

	Yes	No
1a 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?		X
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 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.		X
1c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ 0. (2) On foundation managers <input type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		X
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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	X	
b If "Yes," has it filed a tax return on Form 990-T for this year?	X	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		X
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?		X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV.	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> IA		
b 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 General Instruction G? If "No," attach explanation	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 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

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**Part 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 section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	13	X	
14	The books are in care of ► LARRY HERRIG Telephone no ► (563) 556-0434 Located at ► 3388 KENNEDY CIRCLE, DUBUQUE, IA ZIP+4 ► 52002			
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 ► 15 N/A			
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes," enter the name of the foreign country ►	16	Yes	No X

**Part 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.

	Yes	No
1a 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 termination of government service, if terminating within 90 days) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here N/A	1b	
c 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 2012? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ►		
b 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	
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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If "Yes," did it have excess business holdings in 2012 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 2012.) N/A	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
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 2012?	4b	X

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**Part VII-B** Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No**b** If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

N/A

Organizations relying on a current notice regarding disaster assistance check here

▶ ☐**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If "Yes" to 6b, file Form 8870.

6b

X

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?☐ Yes ☒ No**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1** List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
LARRY HERRIG	TRUSTEE			
3388 KENNEDY CIRCLE				
DUBUQUE, IA 52002	15.00	0.	0.	0.

**2** Compensation of five highest-paid employees (other than those included on line 1). If none, enter "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 account, other allowances
NONE				

Total number of other employees paid over \$50,000

0

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**Part X** Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities	<b>1a</b>	2,161,383.
<b>b</b>	Average of monthly cash balances	<b>1b</b>	19,142.
<b>c</b>	Fair market value of all other assets	<b>1c</b>	701,998.
<b>d</b>	Total (add lines 1a, b, and c)	<b>1d</b>	2,882,523.
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1e</b>	0.
<b>2</b>	Acquisition indebtedness applicable to line 1 assets	<b>2</b>	7,837,992.
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	-4,955,469.
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	<b>4</b>	-74,332.
<b>5</b>	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	-4,881,137.
<b>6</b>	Minimum investment return. Enter 5% of line 5	<b>6</b>	-244,057.

**Part XI** Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part)

<b>1</b>	Minimum investment return from Part X, line 6	<b>1</b>	-244,057.
<b>2a</b>	Tax on investment income for 2012 from Part VI, line 5	<b>2a</b>	1,598.
<b>b</b>	Income tax for 2012. (This does not include the tax from Part VI.)	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b	<b>2c</b>	1,598.
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1	<b>3</b>	0.
<b>4</b>	Recoveries of amounts treated as qualifying distributions	<b>4</b>	0.
<b>5</b>	Add lines 3 and 4	<b>5</b>	0.
<b>6</b>	Deduction from distributable amount (see instructions)	<b>6</b>	0.
<b>7</b>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	<b>7</b>	0.

**Part XII** Qualifying Distributions (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	<b>1a</b>	445,417.
<b>b</b>	Program-related investments - total from Part IX-B	<b>1b</b>	0.
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required)	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule)	<b>3b</b>	
<b>4</b>	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	445,417.
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	<b>5</b>	1,598.
<b>6</b>	Adjusted qualifying distributions. Subtract line 5 from line 4	<b>6</b>	443,819.

**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.

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

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
<b>1</b> Distributable amount for 2012 from Part XI, line 7				0.
<b>2</b> Undistributed income, if any, as of the end of 2012				
<b>a</b> Enter amount for 2011 only			0.	
<b>b</b> Total for prior years		0.		
<b>3</b> Excess distributions carryover, if any, to 2012:				
<b>a</b> From 2007	256,609.			
<b>b</b> From 2008	219,340.			
<b>c</b> From 2009	172,444.			
<b>d</b> From 2010	148,123.			
<b>e</b> From 2011	403,585.			
<b>f</b> Total of lines 3a through e	1,200,101.			
<b>4</b> Qualifying distributions for 2012 from Part XII, line 4 ▶ \$	445,417.			
<b>a</b> Applied to 2011, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior years (Election required - see instructions)		0.		
<b>c</b> Treated as distributions out of corpus (Election required - see instructions)	0.			
<b>d</b> Applied to 2012 distributable amount				0.
<b>e</b> Remaining amount distributed out of corpus	445,417.			
<b>5</b> Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,645,518.			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b		0.		
<b>c</b> 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.		
<b>d</b> Subtract line 6c from line 6b Taxable amount - see instructions		0.		
<b>e</b> Undistributed income for 2011 Subtract line 4a from line 2a Taxable amount - see instr			0.	
<b>f</b> Undistributed income for 2012 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2013				0.
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
<b>8</b> Excess distributions carryover from 2007 not applied on line 5 or line 7	256,609.			
<b>9</b> Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	1,388,909.			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2008	219,340.			
<b>b</b> Excess from 2009	172,444.			
<b>c</b> Excess from 2010	148,123.			
<b>d</b> Excess from 2011	403,585.			
<b>e</b> Excess from 2012	445,417.			

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

N/A

- 1 a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2012, enter the date of the ruling

**b Check box to indicate whether the foundation is a private operating foundation described in section**

☐ 4942(j)(3) or ☐ 4942(j)(5)

- 2 a** Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

**b 85% of line 2a**

**c** Qualifying distributions from Part XII,  
line 4 for each year listed

**d** Amounts included in line 2c not used directly for active conduct of exempt activities

**e Qualifying distributions made directly for active conduct of exempt activities.**

**Subtract line 2d from line 2c**

**3** Complete 3a, b, or c for the alternative test relied upon

(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 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 (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)**

## 1 Information Regarding Foundation Managers:

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

NONE

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

**a The name, address, and telephone number or e-mail of the person to whom applications should be addressed**

SEE STATEMENT 10

**b The form in which applications should be submitted and information and materials they should include**

**c Any submission deadlines**

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

**Part XV** Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

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
<b>a Paid during the year</b>				
AREA RESIDENTIAL CARE 3355 KENNEDY CIRCLE DUBUQUE, IA 52002		PUBLIC CHARITY	CHARITABLE	250.
AMERICAN SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS (ASPCA) 424 E 92ND ST NEW YORK, NY 10128		PUBLIC CHARITY	CHARITABLE	1,000.
BIG BROTHERS, BIG SISTERS 230 NORTH 13TH ST PHILADELPHIA, PA 19107		PUBLIC CHARITY	CHARITABLE	250.
BIOMIMICRY GROUP 140 S 4TH STREET W MISSOULA, MT 59801		PUBLIC CHARITY	CHARITABLE	20,073.
BROADWAY CARES 165 WEST 46TH ST, SUITE 1300 NEW YORK, NY 10036		PUBLIC CHARITY	CHARITABLE	1,000.
<b>Total</b>	<b>SEE CONTINUATION SHEET(S)</b>			<b>445,417.</b>
<b>b Approved for future payment</b>				
NONE				
<b>Total</b>				<b>0.</b>



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

		Yes	No
<b>1</b>	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		
<b>a</b>	Transfers from the reporting foundation to a noncharitable exempt organization of		
	(1) Cash	1a(1)	X
	(2) Other assets	1a(2)	X
<b>b</b>	Other transactions		
	(1) Sales of assets to a noncharitable exempt organization	1b(1)	X
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)	X
	(3) Rental of facilities, equipment, or other assets	1b(3)	X
	(4) Reimbursement arrangements	1b(4)	X
	(5) Loans or loan guarantees	1b(5)	X
	(6) Performance of services or membership or fundraising solicitations	1b(6)	X
<b>c</b>	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c	X
<b>d</b>	If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.		

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

☐ Yes ☒ No

**b If "Yes," complete the following schedule**

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

**Sign  
Here**

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 taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer or trustee

11/15/23  
Date

**TRUSTEE**  
Title

May the IRS discuss this return with the preparer shown below (see instr)?

☒ Yes ☐ No

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	KATIE J THOMAS, CPA	KATIE J THOMAS, C	11/15/13		P00874174
	Firm's name ▶ HONKAMP KRUEGER & CO., P.C.			Firm's EIN ▶ 42-0946155	
	Firm's address ▶ P O BOX 699 DUBUQUE, IA 52004-0699			Phone no (563) 556-0123	

Form **990-PF** (2012)

**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

**2012**

Name of the organization

Employer identification number

HERRIG CHARITABLE FOUNDATION

42-6430625

Organization type (check one):

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

☐ 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

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**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**

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

- ☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations 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.
- ☐ 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, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ► \$

**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).

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) (2012)

Name of organization

Employer identification number

**HERRIG CHARITABLE FOUNDATION****42-6430625****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	CHARLES AND LINDA GIESE 940 PRINCE PHILLIP DRIVE DUBUQUE, IA 52003	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)



Name of organization

Employer identification number

HERRIG CHARITABLE FOUNDATION

42-6430625

**Part II Noncash Property** (see instructions). Use duplicate copies of Part 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
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Name of organization

Employer identification number

## HERRIG CHARITABLE FOUNDATION

42-6430625

**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 columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once.) ▶ \$

Use duplicate copies of Part III if additional space is needed.

(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
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

**Part XV Supplementary Information****3 Grants and Contributions Paid During the Year (Continuation)**

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
DUBUQUE CORNERSTONE 205 BLUFF ST DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	1,000.
DUBUQUE FOOD PANTRY 1598 JACKSON ST DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	1,000.
FOOD FOR THE POOR 6401 LYONS ROAD COCONUT CREEK, FL 33073		PUBLIC CHARITY	CHARITABLE	4,950.
GALENA ARC 413 SOUTH BENCH ST GALENA, IL 61036		PUBLIC CHARITY	CHARITABLE	1,500.
HILLCREST FAMILY SERVICES 2005 ASBURY ROAD DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	1,000.
RIVERVIEW CENTER 2600 DODGE ST DUBUQUE, IA 52003		PUBLIC CHARITY	CHARITABLE	5,000.
ST JOSEPH THE WORKER 2105 ST JOSEPH ST DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	250.
THE SALVATION ARMY 1099 IOWA STREET DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	1,000.
UNIVERSITY OF DUBUQUE 2000 UNIVERSITY AVENUE DUBUQUE, IA 52003		PUBLIC CHARITY	CHARITABLE	250.
UNIVERSITY OF IOWA FOUNDATION P O BOX 4550 IOWA CITY, IA 52244-4550		PUBLIC CHARITY	CHARITABLE	35,490.
<b>Total from continuation sheets</b>				<b>422,844.</b>

**Part XV** Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

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
VISITING NURSE ASSOCIATION 1454 IOWA STREET DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	250.
ALBRECHT ACRES 14837 SHERRILL ROAD SHERRILL, IA 52073		PUBLIC CHARITY	CHARITABLE	5,500.
DUBUQUE COMMUNITY ICE AND RECREATION CENTER 1800 ADMIRAL SHEEHY DRIVE DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	5,000.
DUBUQUE COUNTY FAIR ASSOCIATION 14569 OLD HIGHWAY ROAD DUBUQUE, IA 52002		PUBLIC CHARITY	CHARITABLE	250.
DUBUQUE COUNTY RIGHT TO LIFE 2205 CARTER ROAD DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	5,000.
ARCHDIOCESE OF DUBUQUE 1229 MT LORETTA AVE DUBUQUE, IA 52003		PUBLIC CHARITY	CHARITABLE	184,504.
BETHANY HOME 1005 LINCOLN AVE DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	1,000.
DUBUQUE HUMANE SOCIETY 175 NORTH CRESCENT RIDGE DUBUQUE, IA 52003		PUBLIC CHARITY	CHARITABLE	5,000.
DUBUQUE MUSEUM OF ART 701 LOCUST ST DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	500.
DUBUQUE RESCUE MISSION 398 MAIN ST DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	600.
Total from continuation sheets				

**Part XV Supplementary Information****3 Grants and Contributions Paid During the Year (Continuation)**

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
BOY SCOUTS OF AMERICA 10601 MILITARY RD DUBUQUE, IA 52003-8978		PUBLIC CHARITY	CHARITABLE	250.
HILLCREST FAMILY SERVICES 2005 ASBURY ROAD DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	200.
HILLS AND DALES 1101 DAVIS ST DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	3,500.
BOYS & GIRLS CLUB OF GREATER DUBUQUE 1299 LOCUST ST DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	17,500.
HOSPICE OF DUBUQUE 1670 JOHN F KENNEDY ROAD DUBUQUE, IA 52002		PUBLIC CHARITY	CHARITABLE	500.
IOWA COLLEGE FOUNDATION P O BOX 4550 IOWA CITY, IA 52244-4550		PUBLIC CHARITY	CHARITABLE	1,000.
CATHOLIC CHARITIES 1229 MT LORETTA AVE DUBUQUE, IA 52003		PUBLIC CHARITY	CHARITABLE	1,000.
LORAS COLLEGE 1450 ALTA VISTA ST DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	14,000.
MARIA HOUSE 1561 JACKSON ST DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	5,000.
COMMUNITY FOUNDATION OF GREATER DUBUQUE 700 LOCUST ST DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	12,800.
Total from continuation sheets				

**Part XV Supplementary Information****3 Grants and Contributions Paid During the Year (Continuation)**

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
MULTICULTURAL FAMILY CENTER 1157 CENTRAL AVE DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	250.
NATIONAL MULTIPLE SCLEROSIS ASSOCIATION 733 THIRD AVE NEW YORK, NY 10017		PUBLIC CHARITY	CHARITABLE	1,000.
NATIVITY PARISH 1225 ALTA VISTA ST DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	2,500.
COVENANT HOUSE 5931 E COLONIAL DRIVE ORLANDO, FL 32807-3452		PUBLIC CHARITY	CHARITABLE	250.
OPERATION NEW VIEW 1473 CENTRAL AVE DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	1,000.
OPERATION WE CARE P O BOX 1306 PONCHATOU LA, LA 70454		PUBLIC CHARITY	CHARITABLE	1,000.
OUTREACHERS - WORLDWIDE MINISTRY 100 WILTON BOULEVARD NEW CASTLE, DE 19720		PUBLIC CHARITY	CHARITABLE	22,950.
PRESENTATION SISTERS 2360 CARTER RD DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	250.
DUBUQUE CITY YOUTH BALLET 135 W 8TH ST DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	1,000.
DOMESTIC VIOLENCE PROGRAM 2600 DODGE ST DUBUQUE, IA 52003		PUBLIC CHARITY	CHARITABLE	1,000.
Total from continuation sheets				

**Part XV Supplementary Information****3 Grants and Contributions Paid During the Year (Continuation)**

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
SHALOM CENTER 1001 DAVIS STREET DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	11,000.
SISTERS OF ST FRANCIS 3390 WINDSOR AVE DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	250.
ST MARKS COMMUNITY CENTER 1201 LOCUST ST DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	1,000.
IOWA SCHOLARSHIP FUND P O BOX 4550 IOWA CITY, IA 52244-4550		PUBLIC CHARITY	CHARITABLE	4,700.
FINLEY HEALTH FOUNDATION 350 N GRANDVIEW AVE DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	6,500.
STONEHILL CARE CENTER 3485 WINDSOR AVENUE DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	7,700.
MERCY MEDICAL CENTER 250 MERCY DR DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	250.
NEW AVENUES FOR YOUTH 314 SW 9TH AVE PORTLAND, OR 97205		PUBLIC CHARITY	CHARITABLE	11,400.
TOYS FOR TOTS FOUNDATION 18251 QUANTICO GATEWAY DR TRIANGLE, VA 22172		PUBLIC CHARITY	CHARITABLE	1,000.
PROJECT CONCERN 1789 ELM ST #B DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	2,000.
Total from continuation sheets				

**Part XV Supplementary Information****3 Grants and Contributions Paid During the Year (Continuation)**

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
UNITED WAY 215 WEST 6TH ST DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	1,000.
ST ANTHONY'S 1870 ST AMBROSE ST DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	250.
ST COLUMBKILLE'S 1220 RUSH ST DUBUQUE, IA 52001		PUBLIC CHARITY	CHARITABLE	2,300.
ST MARY'S HOME 2671 OWN CT DUBUQUE, IA 52002		PUBLIC CHARITY	CHARITABLE	27,500.
Total from continuation sheets				



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FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

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SOURCE	AMOUNT
AMERICAN TRUST & SAVINGS BANK	33.
TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A	33.

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FORM 990-PF OTHER INCOME STATEMENT 2

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DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
ANNUITY PAYMENTS	597,697.	597,697.	0.
TOTAL TO FORM 990-PF, PART I, LINE 11	597,697.	597,697.	0.

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FORM 990-PF ACCOUNTING FEES STATEMENT 3

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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	4,571.	4,571.	0.	0.
TO FORM 990-PF, PG 1, LN 16B	4,571.	4,571.	0.	0.

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FORM 990-PF OTHER PROFESSIONAL FEES STATEMENT 4

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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TRUSTEE FEES	48,000.	48,000.	0.	0.
TO FORM 990-PF, PG 1, LN 16C	48,000.	48,000.	0.	0.

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FORM 990-PF	OTHER EXPENSES	STATEMENT	5
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BANK FEES	1,913.	1,913.	0.	0.
DUES & SUBSCRIPTIONS	695.	695.	0.	0.
ADVERTISING	6,000.	6,000.	0.	0.
TO FORM 990-PF, PG 1, LN 23	8,608.	8,608.	0.	0.

FORM 990-PF	OTHER DECREASES IN NET ASSETS OR FUND BALANCES	STATEMENT	6
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DESCRIPTION	AMOUNT
LIFE INSURANCE PREMIUMS PAID	381,075.
DECREASE IN CASH SURRENDER VALUE OF LIFE INSURANCE POLICIES	7,647.
PRIOR PERIOD ADJUSTMENT - STATE CENTRAL BANK LOAN	1,376,006.
TOTAL TO FORM 990-PF, PART III, LINE 5	1,764,728.

FORM 990-PF	OTHER ASSETS	STATEMENT	7
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DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
LIFE INSURANCE POLICIES	675,821.	668,174.	668,174.
ANNUITIES	2,333,761.	1,869,681.	1,869,681.
TO FORM 990-PF, PART II, LINE 15	3,009,582.	2,537,855.	2,537,855.

FORM 990-PF

LOANS PAYABLE TO OFFICERS, DIRECTORS, ETC.

STATEMENT 8

LENDER'S NAME AND TITLE

LARRY HERRIG

<u>DATE OF NOTE</u>	<u>MATURITY DATE</u>	<u>INTEREST RATE</u>	<u>TERMS OF REPAYMENT</u>
01/01/11		6.00%	INTEREST ONLY PAYMENTS

SECURITY PROVIDED BY BORROWERPURPOSE OF LOANALL EXISTING & FUTURE SECURITY  
INTERESTS

PURCHASE ANNUITIES

<u>DESCRIPTION OF CONSIDERATION</u>	<u>FMV OF CONSIDERATION</u>	<u>ORIGINAL LOAN AMOUNT</u>	<u>BALANCE DUE</u>
	0.	400,000.	1,235,557.

TOTAL TO FORM 990-PF, PART II, LINE 20, COLUMN B

1,235,557.

FORM 990-PF

OTHER NOTES AND LOANS PAYABLE

STATEMENT 9

LENDER'S NAME	TERMS OF REPAYMENT	SECURITY PROVIDED BY BORROWER
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STATE CENTRAL BANK

LINE OF CREDIT

LIFE INSURANCE POLICY

DATE OF NOTE	MATURITY DATE
-----------------	------------------

ORIGINAL LOAN AMOUNT
-------------------------

INTEREST RATE
------------------

PURPOSE OF LOAN

11/10/06

1,100,000.

5.00%

PURCHASE INSURANCE POLICY

RELATIONSHIP OF LENDER

NONE

DESCRIPTION OF CONSIDERATION

FMV OF CONSIDERATION
-------------------------

BALANCE DUE

0.

809,308.

LENDER'S NAME

TERMS OF REPAYMENT

SECURITY PROVIDED BY BORROWER

ARCHDIOCESE OF DUBUQUE

INTEREST ONLY  
PAYMENTS

ANNUITIES

DATE OF NOTE	MATURITY DATE
-----------------	------------------

ORIGINAL LOAN AMOUNT
-------------------------

INTEREST RATE
------------------

PURPOSE OF LOAN

08/15/03

2,000,000.

8.50%

PURCHASE ANNUITY

RELATIONSHIP OF LENDER

NONE

DESCRIPTION OF CONSIDERATION

FMV OF CONSIDERATION
-------------------------

BALANCE DUE

0.

2,000,000.

<u>LENDER'S NAME</u>	<u>TERMS OF REPAYMENT</u>	<u>SECURITY PROVIDED BY BORROWER</u>
ST MARY'S HOME	INTEREST ONLY PAYMENTS	ANNUITIES

<u>DATE OF NOTE</u>	<u>MATURITY DATE</u>	<u>ORIGINAL LOAN AMOUNT</u>	<u>INTEREST RATE</u>	<u>PURPOSE OF LOAN</u>
11/10/03		500,000.	6.00%	PURCHASE ANNUITY

RELATIONSHIP OF LENDER

NONE

<u>DESCRIPTION OF CONSIDERATION</u>	<u>FMV OF CONSIDERATION</u>	<u>BALANCE DUE</u>
	0.	500,000.

<u>LENDER'S NAME</u>	<u>TERMS OF REPAYMENT</u>	<u>SECURITY PROVIDED BY BORROWER</u>
DUBUQUE BANK AND TRUST COMPANY	INTEREST ONLY PAYMENTS	ANNUITIES

<u>DATE OF NOTE</u>	<u>MATURITY DATE</u>	<u>ORIGINAL LOAN AMOUNT</u>	<u>INTEREST RATE</u>	<u>PURPOSE OF LOAN</u>
09/27/06		2,000,000.	6.50%	PURCHASE ANNUITIES

RELATIONSHIP OF LENDER

NONE

<u>DESCRIPTION OF CONSIDERATION</u>	<u>FMV OF CONSIDERATION</u>	<u>BALANCE DUE</u>
	0.	894,459.

<u>LENDER'S NAME</u>	<u>TERMS OF REPAYMENT</u>	<u>SECURITY PROVIDED BY BORROWER</u>
STATE CENTRAL BANK	INTEREST ONLY PAYMENTS	ANNUITIES

<u>DATE OF NOTE</u>	<u>MATURITY DATE</u>	<u>ORIGINAL LOAN AMOUNT</u>	<u>INTEREST RATE</u>	<u>PURPOSE OF LOAN</u>
09/15/08		2,000,000.	6.50%	PURCHASE ANNUITIES

RELATIONSHIP OF LENDER

NONE

<u>DESCRIPTION OF CONSIDERATION</u>	<u>FMV OF CONSIDERATION</u>	<u>BALANCE DUE</u>
	0.	2,694,726.

<u>LENDER'S NAME</u>	<u>TERMS OF REPAYMENT</u>	<u>SECURITY PROVIDED BY BORROWER</u>
PREMIER BANK	INTEREST ONLY PAYMENTS	ANNUITIES

<u>DATE OF NOTE</u>	<u>MATURITY DATE</u>	<u>ORIGINAL LOAN AMOUNT</u>	<u>INTEREST RATE</u>	<u>PURPOSE OF LOAN</u>
12/31/08	10/05/12	350,000.	6.15%	PURCHASE ANNUITIES

RELATIONSHIP OF LENDER

NONE

<u>DESCRIPTION OF CONSIDERATION</u>	<u>FMV OF CONSIDERATION</u>	<u>BALANCE DUE</u>
	0.	297,143.

LENDER'S NAME	TERMS OF REPAYMENT	SECURITY PROVIDED BY BORROWER
JIM KLAUER	2 PAYMENTS, 60,000 AND 77,800	CONSECO TERM LIFE INSURANCE POLICY

DATE OF NOTE	MATURITY DATE	ORIGINAL LOAN AMOUNT	INTEREST RATE	PURPOSE OF LOAN
06/14/10	12/31/11	130,000.	6.00%	PAY LIFE INSURANCE PREMIUM

RELATIONSHIP OF LENDER

NONE

DESCRIPTION OF CONSIDERATION	FMV OF CONSIDERATION	BALANCE DUE
	0.	0.

LENDER'S NAME	TERMS OF REPAYMENT	SECURITY PROVIDED BY BORROWER
PREMIER BANK	INTEREST ONLY PAYMENTS	ANNUITIES

DATE OF NOTE	MATURITY DATE	ORIGINAL LOAN AMOUNT	INTEREST RATE	PURPOSE OF LOAN
12/31/08	09/24/12	1,500,000.	5.90%	PURCHASE ANNUITIES

RELATIONSHIP OF LENDER

NONE

DESCRIPTION OF CONSIDERATION	FMV OF CONSIDERATION	BALANCE DUE
	0.	1,451,665.

TOTAL TO FORM 990-PF, PART II, LINE 21, COLUMN B

8,647,301.

FORM 990-PF

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

STATEMENT 10

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

LARRY HERRIG  
3388 KENNEDY CIRCLE  
DUBUQUE, IA 52002

TELEPHONE NUMBER

(563)583-6538

FORM AND CONTENT OF APPLICATIONS

THIS APPLICATION SHOULD INCLUDE ALL NECESSARY INFORMATION CONCERNING THE REASON FOR REQUESTING THE GRANT, LOAN, ETC, INCLUDING WHERE YOU CAN BE REACHED.

ANY SUBMISSION DEADLINES

N/A

RESTRICTIONS AND LIMITATIONS ON AWARDS

GRANTS WILL BE MADE TO ORGANIZATIONS THAT ARE EXEMPT UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND ARE NOT PRIVATE FOUNDATIONS AS DEFINED IN IRC SECTION 509(A).