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Form **990-PF**Department of the Treasur Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter Social Security numbers on this form as it may be made public.
 Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

2013

For	calen	dar year 2013 or tax year	r beginning_				, and e	nding			
Name of foundation							A Emplo	yer identification	number		
		RTINGA FAMII								<u>-1403397</u>)
Named and discrete Control of the Co						Room/suite		ione number	12.6		
		190TH AVE								<u>1-628-12</u>	. — . —
		own, state or province, cou LA, IA 5021	-	or to	oreign p	ostal code			C If exem	ption application is p	pending, check here
		all that apply:	Initial return			Initial return of a fo	ormer public c	harity	D 1. For	eign organization:	s, check here
-			Final return			Amended return	·	·			
			Address cha	nge_		Name change			2. Fore	ign organizations me ok here and attach co	ering the 85% test, emputation
H (Check	type of organization:	X Section	501(c) <u>(3)</u> e>	empt private foundation			E if priva	ate foundation sta	tus was terminated
		ction 4947(a)(1) nonexem				Other taxable private founda			under	section 507(b)(1))(A), check here
I Fa	air ma	arket value of all assets at e	end of year	JA	_		Accr	ual			60-month termination
•		Part II, col. (c), line 16)		(D	01	her (specify)	haara l		under	section 507(b)(1))(B), check here
	·\$ art l			(Pan	i, coiu	mn (d) must be on cash t					(d) Disbursements
Pa	irt I	(The total of amounts in columecessarily equal the amoun	mns (b), (c), and	i (d) m)	ay not	(a) Revenue and expenses per books	(b) Net in inco		(C)	Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grant	ts, etc., recen	/ed		41,180.				N/A	
	2	Check Interest on savings and temporal	n is not required to	attach (Sch B						
	3	cash investments	orary					0 010			G 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
	4	Dividends and interest fro	om securities			8,213.		<u>8,213.</u>			STATEMENT 1
		Gross rents									
	b	· · -		10		26,637.					-
īe	oa h	Net gain or (loss) from sale of a Gross sales price for all	315		35.	20,037.				<u></u>	
Revenue	7	assets on line 6a Capital gain net income (from		, , ,			2	6,637.		REC	EIVED
æ	8	Net short-term capital gai									
	9	Income modifications	•							MAY MAY	1 6 2014 8
	10a	Gross sales less returns and allowances									2014
		Less Cost of goods sold								OGD	
	i .	Gross profit or (loss)									EN, UI
	11	Other income	.b. 4.4			76,030.	3	4,850.			
	12	Total Add lines 1 throug Compensation of officers, dire		oto.		70,030.		.0 <u>.050</u>			0.
	14	Other employee salaries a		GIC						•	
	1	Pension plans, employee	_								
Ses	160	Legal fees						•			
Ë	b	Accounting fees	ST	TM	2	1,680.		0.			0.
ŭ	C	Other professional fees	ST	MT	3	7,384.		7,384.			0.
iš Š	17	Interest				1 450		127		,	
tra	18	Taxes	ST	MT	4	1,472.		137.			0.
Administrative Expens	19	Depreciation and depletio	n							,	
É	20	Occupancy Travel, conferences, and	meetinge								
and /	21 22	Printing and publications									
ğ		Other expenses									
atin	24	Total operating and adm	inistrative								
Operating		expenses. Add lines 13 ti				10,536.		7,521.			0.
0	25	Contributions, gifts, grant	ts paid			60,220.					60,220.
	26	Total expenses and disb	ursements.					B 604			60 000
	<u> </u>	Add lines 24 and 25				70,756.		<u>7,521.</u>			60,220.
	1	Subtract line 26 from line				E 274					
		Excess of revenue over expen			ts	5,274.	າ	7,329.			-
	ם ן	Net investment income (н перапуе, елге	: -0-)				.,545.	-		

323501 10-10-13 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2013)

SCANNED MAY 20 2014

Cash non-interest-bearing	<u> F0</u>	rm 99	30-PF (2013) POORTINGA FAMILY FOUNDA:			.40339/ Page 2
1 Cash - non-misrest-bearing 2 Savings and temporary cash investments 2 5 , 225 88 , 554 88 ,	F	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-were amounts only	Beginning of year		
2 Sevings and temporary cash investments 3 Accounts receivable ► Less allowance for doubtful accounts ► 4 Prilogies receivable 5 Contris receivable 5 Contris receivable 6 Receivable sout form officiers, directions, trustees, and other disqualited persons 7 One obtained state seventh 1 East, allowance for solo brittle accounts ► 8 New Yorks of sail or use 1 Investments - Usa and state power have 1 Investments - Corporate bronds 1 In	Ξ			(a) Book Value	(b) Book Value	(c) Fair Market Value
Pedgds receivable Less allowance for doubtful accounts New York Pedgds receivable Less allowance for doubtful accounts New York Pedgds receivable New York Pedgds recei		1	Cash - non-interest-bearing			
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24 Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Temporarily restricted 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances 1 Total liabilities and net assets/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) 20 Enter amount from Part I, line 27a 31 Other increases not included in line 2 (itemize) 32 Other increases not included in line 2 (itemize) 33 Decreases not included in line 2 (itemize) 34 Add lines 1, 2, and 3 55 Decreases not included in line 2 (itemize) 55 O. 66 Total net assets or fund balances at end of year (line 4 minus line 5) - Part III, column (b), line 30 66 Total net assets or fund balances at end of year (line 4 minus line 5) - Part III, column (b), line 30 66 Total net assets or fund balances at end of year (line 4 minus line 5) - Part III, column (b), line 30 66 Total net assets or fund balances at end of year (line 4 minus line 5) - Part III, column (b), line 30 66 Total net assets or fund balances at end of year (line 4 minus line 5) - Part III, column (b), line 30 67 Total net assets or fund balances at end of year (line 4 minus line 5) - Part III, column (b), line 30 68 Total net assets or fund balances at end of year (line 4 minus line 5) - Part III, column (b), line 30 68 Total net assets or fund balances at end of year (line 4 minus line 5) - Part III, column (b), line 30 69 Total net assets or fund balances at end of year (line 4 minus line 5) - Part III, column (b), line 30 60 Total net assets or fund balances at end of year (line 4 minus line 5) - Part III, column (b), line 30 60 Total net assets or fund balances at end of year (line 4 minus line 5) - Part III, column (b), line 30 61 Total net assets or fund balances at end of year (line 4 minus line 5) - Part III, column (b), line 30 61 Total net assets or fund balances		ŀ	•			
31 Total liabilities and net assets/tund balances 662,471. 667,745.	ý		•			
31 Total liabilities and net assets/tund balances 662,471. 667,745.	ည					
31 Total liabilities and net assets/tund balances 662,471. 667,745.	ä	25	Temporarily restricted			
31 Total liabilities and net assets/tund balances 662,471. 667,745.	ĕ	26				
31 Total liabilities and net assets/tund balances 662,471. 667,745.	Ĕ	1	Foundations that do not follow SFAS 117, check here		•	
31 Total liabilities and net assets/tund balances 662,471. 667,745.	Ē		and complete lines 27 through 31.			
31 Total liabilities and net assets/tund balances 662,471. 667,745.	S	27	Capital stock, trust principal, or current funds	0.	0.	
31 Total liabilities and net assets/tund balances 662,471. 667,745.	set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
31 Total liabilities and net assets/tund balances 662,471. 667,745.	As	29	Retained earnings, accumulated income, endowment, or other funds	662,471.	667,745.	
31 Total liabilities and net assets/tund balances 662,471. 667,745.	et					
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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 5 O. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 6 6 7, 745.	~			1		
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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 5 O. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 6 6 7, 745.		31	Total liabilities and net assets/fund balances	662.471.	667.745.	
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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 5 O . 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 6 6 7, 745 .						
(must agree with end-of-year figure reported on prior year's return)1662,471.2 Enter amount from Part I, line 27a25,274.3 Other increases not included in line 2 (itemize)30.4 Add lines 1, 2, and 34667,745.5 Decreases not included in line 2 (itemize)50.6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 306667,745.	<u>P</u>	<u>art</u>	III Analysis of Changes in Net Assets of Fund Ba	iances		
(must agree with end-of-year figure reported on prior year's return)1662,471.2 Enter amount from Part I, line 27a25,274.3 Other increases not included in line 2 (itemize)30.4 Add lines 1, 2, and 34667,745.5 Decreases not included in line 2 (itemize)50.6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 306667,745.	1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 3	0		
2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 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 2 5, 274. 3 0. 4 667, 745. 5 0.						662.471.
3 Other increases not included in line 2 (itemize) ► 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 5 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 3 0. 4 667,745. 5 0.		•			 	5.274
4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 6 7, 745.						
5 Decreases not included in line 2 (itemize) 5 0. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 667,745.						
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30			·			
				ımn (h) line 30		
	<u>~</u>	, viai	not dosele or forto odianoso at one or year time a filling into of a diffit coll	Jimi (U), mio OO		Form 990-PF (2013)

Form **990-PF** (2013)

See the Part VI instructions.

	m 990-PF (2013) POORTINGA FAMILY FOUNDATION art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4		1403			Page 4
		13-10	- 566 11	15111	ictio	ns)
18	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.					
	Date of ruling or determination letter:	١.	ļ			47
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1	 			47.
	of Part I, line 27b	l				
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	١.	}			^
_	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	-			$\frac{0.}{47.}$
3	Add lines 1 and 2	3	 	-	=	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				$\frac{0.}{47.}$
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5_				4/.
6	Credits/Payments:					
	2013 estimated tax payments and 2012 overpayment credited to 2013 6a 1,000.	┨	!			
	Exempt foreign organizations - tax withheld at source Toward with earliesters for extension of time to file (Form 9909)	1				
	E Tax paid with application for extension of time to file (Form 8868)	┨				
	Backup withholding erroneously withheld 6d	┨			1 0	00
_	Total credits and payments. Add lines 6a through 6d	7			1,0	00.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				<u> 2.</u>
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			-	51.
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			4	
	Enter the amount of line 10 to be: Credited to 2014 estimated tax ► 451. Refunded ► art VII-A Statements Regarding Activities	11				0.
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene		1		Yes	No
18	any political campaign?	1111	ŀ	1a	100	X
	any political campaigh? Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition	12	ŀ	1b		X
Ľ	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials publishing.		}	IU		
		eu or				
	distributed by the foundation in connection with the activities.		1	1.		x
	Did the foundation file Form 1120-POL for this year? Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		ŀ	1c		
0	(1) On the foundation. \blacktriangleright \$ 0 . (2) On foundation managers. \blacktriangleright \$ 0 .		1			
_	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	•	ŀ			1
e	managers. > \$ 0 .					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		x
2	If "Yes," attach a detailed description of the activities		ŀ			A
•	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	\r				
3	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	וו	l	3		х
4.	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		}	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A [4h		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	74	′ * 	5		X
,	If "Yes," attach the statement required by General Instruction T.		f			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
Ŭ	By language in the governing instrument, or				!	
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state 	law				
	remain in the governing instrument?	,		6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	,	ŀ	7	X	
•	2.1			,		_
R۵	Enter the states to which the foundation reports or with which it is registered (see instructions)					
Jū	IA		— I			
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			8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar	ŀ			
•	year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		x _
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		<u> </u>	10		$\frac{x}{x}$
	and any possess account operations contributed a contributed and including the rest rest and addresses				DE /	

Form **990-PF** (2013)

orm 990-PF (20						26-14033	97	Page 6
	Statements Regarding	-		Form 4/20 May Be	Required (contin	nued)		
	year did the foundation pay or inc	•				i	- 1	
	on propaganda, or otherwise atten	•				es X No		
(2) Influen	ce the outcome of any specific pu	blic election (se	e section 4955); c	or to carry on, directly or indii			}	ļ
any voi	ter registration drive?					es 🔀 No 📗	1	ĺ
(3) Provide	e a grant to an individual for trave	l, study, or other	sımılar purposes	?	Y	es X No	ľ	
(4) Provide	e a grant to an organization other	than a charitable	, etc., organizatio	n described in section				
509(a)	(1), (2), or (3), or section 4940(d)	(2)?			Y	es 🗶 No 📗		- }
(5) Provide	e for any purpose other than religi	ous, charitable,	scientific, literary,	or educational purposes, or		1		
the pre	vention of cruelty to children or a	nımals?			Y	es 🗶 No 📗	ı	
b If any answ	er is "Yes" to 5a(1)-(5), did any of	the transactions	fail to qualify un	der the exceptions described	ın Regulations			
section 53.4	4945 or in a current notice regard	in <mark>g disaster ass</mark> i	stance (see instru	ctions)?		N/A	5b	
Organizatio	ns relying on a current notice rega	arding disaster a	ssistance check h	ere				
c If the answe	er is "Yes" to question 5a(4), does	the foundation (laim exemption f	rom the tax because it mainta	ained .			
	responsibility for the grant?				. —	es 🔲 No		
If "Yes," at	tach the statement required b	v Regulations	section 53 494		•		į	
	ndation, during the year, receive a			, ,				
	penefit contract?	,, -	, , , .	,,	v	es 🗶 No		
•	idation, during the year, pay prem	nums, directly o	r indirectly, on a r	ersonal benefit contract?			6Ь	x
	6b, file Form 8870					 		
	during the tax year, was the found	dation a narty to	a prohibited tay o	helter transaction?	Πv	es X No	1	1
•	the foundation receive any proces	• •	=		L 1		7b	+-
Part VIII	Information About Off				nagers Highl		70	
uit viii	Paid Employees, and	Contractor	s	ees, i ouildation wa	anayers, mym	у		
1 List all offic	ers, directors, trustees, four			compensation	····			
1 2.01 00			90.0 4.12 4.10.1		(c) Compensation	(d) Contributions to	(0)	Expense
	(a) Name and addre	ess		(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	accoi	Expense unt, other
OMANT FIX	DOODUTNOS			to position	enter -0-)	compensation	allo	wances
	POORTINGA	-		PRESIDENT				
	H AVENUE			1 00				^
	A 50219			1.00	0.	0.	├	0.
	ORTINGA			SECRETARY/TRE	SASURER	Į	ł	
	H AVENUE				1			_
	A 50219			1.00	0.	0.	<u> </u>	<u> </u>
MARC POO			·	VICE PRESIDEN	1h.			
	ING SHADOW RD						i	
	LE, AZ 85255			0.25	0.	0.		0.
MICHELLE	OLSON			VICE PRESIDEN	†r		}	
9395 E H	ARVARD AVE				Ì			
				0.25	0.	0.		0.
2 Compensat	ion of five highest-paid emp	loyees (other	than those inc		enter "NONE."			
(a) Nom	e and address of each employee	naid more than 9	50 000	(b) Title, and average	(a) Componentian	(d) Contributions to employee benefit plans and deferred	(e) E	xpense int, other
(a) Nam	e and address of each employee	paid filore than c	550,000	hours per week devoted to position	(c) Compensation	and deferred compensation	allov	wances
NO	NE							
		<u> </u>			1			
					<u> </u>	 -		
					1			
						<u> </u>		
					[
					 			
		-,-			[
	ather employees and ever 650 or	00			<u> </u>			
otal number of	other employees paid over \$50,00	DU					000 D	<u>0</u>
						Form	380-6	F (2013)

Form 990-PF (2013) POORTINGA FAMILY FOUNDATION	26-	1403397	Page 7
Part VIII. Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	n Managers, Highly		
3 Five highest-paid independent contractors for professional services. If none, enter "N	IONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Com	pensation
NONE			
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		•	0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produce	information such as the id, etc.	Expenses	
1 GRANT MAKING TO OTHER CHARITABLE ORGANIZATIONS	5		
			0.
2			
3			<u> </u>
4			
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on line.	s 1 and 2.	Amount	
1 N/A			
2			-
All other program-related investments. See instructions. 3			
Total. Add lines 1 through 3	<u></u> ▶↓		0.

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Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation gualifies for the section

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60,220

3a

3b

4

3

Amounts set aside for specific charitable projects that satisfy the:

Adjusted qualifying distributions. Subtract line 5 from line 4

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Suitability test (prior IRS approval required)

income. Enter 1% of Part I, line 27b

Cash distribution test (attach the required schedule)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
Distributable amount for 2013 from Part XI,	ос.раб	Todio prior to 2012	2012	2010
line 7				37,984
2 Undistributed income, if any, as of the end of 2013				
a Enter amount for 2012 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2013:	1	Í		
a From 2008 50,031.	İ	į		
b From 2009 135,551.				
c From 2010 32,072.				
d From 2011 45,118.	}			
e From 2012	260 772			
f Total of lines 3a through e	262,772.			
4 Qualifying distributions for 2013 from		ļ		
Part XII, line 4: ► \$ 60,220.	·	}		
a Applied to 2012, but not more than line 2a			0.	
b Applied to undistributed income of prior		0		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	0.			
(Election required - see instructions) d Applied to 2013 distributable amount	-	··		37,984.
e Remaining amount distributed out of corpus	22,236.			31,304.
5 Excess distributions carryover applied to 2013	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
	285,008.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract	203,000.			
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which				
the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.1		
e Undistributed income for 2012. Subtract line				
4a from line 2a. Taxable amount - see instr.		1	0.	
f Undistributed income for 2013. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2014				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by]	
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2008		į.	1	
not applied on line 5 or line 7	50,031.			
9 Excess distributions carryover to 2014.		Ì	j	
Subtract lines 7 and 8 from line 6a	234,977.			
10 Analysis of line 9:	1	l	1	
a Excess from 2009 135,551.		1	1	
b Excess from 2010 32,072.	1		}	
c Excess from 2011 45,118.	}	ł) :	
d Excess from 2012 e Excess from 2013 22, 236.		ļ		
6 EALESS HUIII 2013 1 44,430 .	<u> </u>	<u></u>		Form 990-PF (2013)

Form 990-PF (2013) POORTIN	GA FAMILY F	OUNDATION			03397 Page 1
Part XIV Private Operating F			I-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective fo		-	▶ └		
b Check box to indicate whether the foun		ng foundation described		4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2013	(b) 2012	Prior 3 years (c) 2011	(d) 2010	(a) Total
income from Part I or the minimum	(a) 2013	(0) 2012	(6) 2011	(0) 2010	(e) Total
investment return from Part X for			}		İ
each year listed	\		 		
b 85% of line 2a			 	 	
e Qualifying distributions from Part XII,				1)
line 4 for each year listed	 		 		
d Amounts included in line 2c not				İ	1
used directly for active conduct of exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.]		}	ĺ
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on 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			<u> </u>	<u> </u>	
(4) Gross investment income					
Part XV Supplementary Info			if the foundation	had \$5,000 or mo	ore in assets
at any time during t	he year-see instr	uctions.)			
Information Regarding Foundation List any managers of the foundation why ear (but only if they have contributed in SEE STATEMENT 6	o have contributed more		ributions received by the	foundation before the clos	se of any tax
b List any managers of the foundation who ther entity) of which the foundation has			(or an equally large portion	on of the ownership of a pa	artnership or
NONE	-				
2 Information Regarding Contribution Check here ► X if the foundation of	nly makes contributions t	o preselected charitable	organizations and does n	ot accept unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc.					0.
a The name, address, and telephone num	Der or e-mail address of ti	ne person to wnom appii	cations should be addres	ssea:	
b The form in which applications should b	e submitted and informat	ion and materials they st	nould include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographica	l areas, charitable fields,	kınds of institutions, or c	other factors:	

3 Grants and Contributions Paid During the		Payment		
Recipient	If recipient is an individual,	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	CONTRACTOR	
a Paid during the year				
BLANK HOSPITAL ENDOWMENT	N/A	PUBLIC CHARITY	HEALTH CARE	
DES MOINES, IA 50309	-	 		2,50
CENTRAL COLLEGE	N/A	PUBLIC CHARITY	EDUCATION	
PELLA, IA 50219				270
HOPE MINISTRIES	N/A	PUBLIC CHARITY	HEALTH CARE	
DES MOINES, IA 50304		 		300
INTERVARSITY CHRISTIAN FELLOWSHIP	N/A	PUBLIC CHARITY	RELIGIOUS	
PELLA, IA 50219				1,500
		:		
TECHNO SERVE INC.	N/A	PUBLIC CHARITY	HUMAN SERVICES	
WASHINGTON DC 20036				20.000
	NTINUATION SHEE	T(S)	▶ 3a	60 220
b Approved for future payment				
NONE				
				····
Total		L	▶ 3b	0
23611			For	n 990-PF (2013

nter gross amounts unless otherwise indicated.	Unrelated b	usiness income		y section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income
Program service revenue:	code	Amount	code	Amount	Tanction income
	- -				
b	1 1				
·		·····		_	
d	1 T				
e					
p Fees and contracts from government agencies	-		+-+-		
Membership dues and assessments					
Interest on savings and temporary cash					
investments			1 1		
Dividends and interest from securities			14	8,213.	
Net rental income or (loss) from real estate:			- - 	0,2201	
a Debt-financed property					
b Not debt-financed property			7-1-		
Net rental income or (loss) from personal					
property					
Other investment income					
Gain or (loss) from sales of assets other					
than inventory			18	26,637.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue:			} }		
a	_				
b	_				
C					
d	-				
e	- 		. - -	24 050	
Subtotal. Add columns (b), (d), and (e)	<u> </u>		0.	34,850.	
Total. Add line 12, columns (b), (d), and (e)				13	34,850
ee worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Accom	plishment of	Exempt Pu	ırposes	
ine No. Explain below how each activity for which in	come is reported in c	olumn (a) of Part YV	I-A contributed	importantly to the accomp	lichment of
the foundation's exempt purposes (other tha				importantly to the accomp	iisiiiieiit Oi
•			<u> </u>	 	

NO.	the foundation's exempt purposes (other than by providing funds for such purposes).
$\neg \uparrow$	
-+	
+	
$-\!\!\!-\!\!\!\!+$	
- 1.	
$\neg \neg$	
-+	

323621 10-10-13

Form **990-PF** (2013)

Form 990-PF Part XVI				INDATION and Transactions	and Relations		403397 charitabl		age <u>13</u>
1 Did the	organization directly or indi	rectly engage in a	ny of the follows	ng with any other organiza	tion described in sect	ion 501(c) of		Yes	No
	e (other than section 501(c			•		, ,			
a Transfei	s from the reporting found	lation to a noncha	ritable exempt oi	ganization of:				ľ	l
(1) Cas	:h						1a(1)	<u> </u>	X
(2) Oth	er assets						1a(2)		X
b Other tra	ansactions:								
(1) Sal	es of assets to a noncharita	able exempt organ	ızatıon				1b(1)	<u> </u>	X
(2) Pur	chases of assets from a no	oncharitable exem	ot organization				1b(2)	<u> </u>	X
(3) Rer	ital of facilities, equipment,	or other assets					1b(3)	<u> </u>	X
	mbursement arrangements	3					1b(4)	<u> </u>	X
	ins or loan guarantees						1 <u>b(5)</u>	<u> </u>	X
	formance of services or me						<u>1b(6)</u>	-	X
	of facilities, equipment, ma swer to any of the above is						_ <u>1c</u> _	Ļ	<u>X</u>
or service	ces given by the reporting f (d) the value of the goods, (b) Amount involved	foundation. If the f other assets, or s	oundation received	ed less than fair market va	lue in any transaction		ent, show in		
			N/A						
		<u> </u>							
		 							
		 							
		 							
									
		 							
		 							
			·	······································					
									
	undation directly or indirec in 501(c) of the Code (othe	=			nizations described		Yes	X] No
b If "Yes,"	complete the following sch			r	,				
<u> </u>	(a) Name of org	ganization		(b) Type of organization	1	c) Description of relat	ionship		
	N/A				-				
					 				
					 -				
					-				
Unde	er penalties of perjury, I declare	that I have examined	this return, including	l accompanying schedules an	d statements, and to the	pest of my knowledge			
Sign Here	belief, it is the correct, and corr	reference Declaration of		n taxpayer) is based on all infor	mation of which preparer	has any knowledge	May the IRS of return with the shown below Yes	prepare	er l
- Ingli	nature of officer or trustee		Oronoresia s	Date	VTitle	Chack To 1 1 2	TIM		
	Print/Type preparer's na		Preparer's s	yndture	Date	Check if P1 self- employed	TIN		
Paid	JOHN A. SC	HMIDT,	TOURS &	COUNTRA	1	· - 1	200470	177	
Preparer	CPA	OMEN DI		SCHMIDT,	05/08/14		200478		
Use Only		OWEN, NO	ROI, CL	ARK & SMITH	, F.C.	Firm's EIN > 42 -	-11044	13	
	<u> </u>	01 WEST	LAKES P	ARKWAY, SUIT	TE 300				

Phone no. (515) 288-3279 Form **990-PF** (2013)

WEST DES MOINES, IA 50266

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.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Name of the organization **Employer identification number** POORTINGA FAMILY FOUNDATION 26-1403397 Organization type (check one). Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation 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 its Form 990-PF, Part I, line 2, 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) (2013)

Name of organization

Employer identification number

POORTINGA FAMILY FOUNDATION

26-1403397

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	POORTINGA INVESTMENTS, LLC 811 190TH AVENUE PELLA, IA 50219	\$ 40,846.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)

Name of organization

Employer identification number

	INGA FAMILY FOUNDATION		-1403397
rt II	Noncash Property (see instructions) Use duplicate copies of Part II	ıf addıtıonal space is needed	
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	STOCKS OF PUBLICLY TRADED COMPANIES	_	
			09/19/13
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - \$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - \$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_		-	
i		- \$	

Name of orga	nization		Em	ployer identification number	
<u>POÖRTI</u>	NGA FAMILY FOUNDATION		(3) (0)	26-1403397	
Part III	Exclusively religious, charitable, etc., indiverse. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if addition	ndual contributions to section 50 (c) he following line entry. For organizations, contributions of \$1,000 or less for all space is needed.	ns completing Part III, enter the year. (Enter this information once)	sat total more than \$1,000 for the	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Descript	ion of how gift is held	
		(e) Transfer of gift	:		
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transfe	eror to transferee	
(a) No.					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Descripti	on 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) Descripti	on 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	on of how gift is held	
-					
	(e) Transfer of gift				
- -	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
-					
ı					

FORM 990-PF DIVIDENT	S AND INTER	EST FROM SECUR	ITIES ST	TATEMENT 1
GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
UBS - 00390 8 WELLS FARGO - 0945 19,142		0. 8. 7. 8,205.	8.	
TO PART I, LINE 4 19,150	10,93	7. 8,213.	8,213.	
FORM 990-PF	ACCOUNTI	NG FEES	Si	PATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	1,680.	0.		0.
TO FORM 990-PF, PG 1, LN 16B	1,680.	0.		0.
FORM 990-PF C	THER PROFES	SIONAL FEES	rs	'ATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT FEES	7,384.	7,384.		0.
TO FORM 990-PF, PG 1, LN 16C	7,384.	7,384.		0.
FORM 990-PF	TAXES		STATEMENT 4	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAXES ON DIVIDENDS FEDERAL EXCISE TAX	137. 1,335.	137.		0.
-				

FORM 990-PF	CORPORATE STOCK		STATEMENT	5
DESCRIPTION		BOOK VALUE	FAIR MARKET	r
BROKERAGE ACCOUNT II	NVESTMENTS	579,191.	727,94	19.
TOTAL TO FORM 990-P	F, PART II, LINE 10B	579,191.	727,949.	
FORM 990-PF	PART XV - LINE 1A LIST OF FOUNDATION MANAGERS	<u> </u>	STATEMENT	6

NAME OF MANAGER

STANLEY POORTINGA GAYLE POORTINGA

Part XV Supplementary Information 3 Grants and Contributions Paid During the Y				1
. Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
THIRD REFORMED CHURCH	N/A	PUBLIC CHARITY	RELIGIOUS	
PELLA, IA 50219				25,000
WORLD ORPHAN	N/A	PUBLIC CHARITY	RELIGIOUS	
CASTLE ROCK, CO 80104				2,500
FIELDS FOR OUR FUTURE	N/A	PUBLIC CHARITY	RECREATION COMPLEX]
PELLA IA 50219				5,000
PELLA HISTORICAL SOCIETY	N/A	PUBLIC CHARITY	HISTORICAL SOCIETY	
PELLA, IA 50219				2,500
		İ		
JUVENILE DIABETES RESEARCH FOUNDATION	N/A	PUBLIC CHARITY	MEDICAL RESEARCH	
WEST DES MOINES, IA 50265				250
ALZHEIMER'S ASSOCIATION	N/A	PUBLIC CHARITY	MEDICAL RESEARCH	
WEST DES MOINES, IA 56				100
HALIE CODY BENEFIT	N/A	PUBLIC CHARITY	HUMAN SERVICES	
EMMETSBURG IA 50536				300
Total from continuation sheets				35 650