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EXTENSION GRANTED TO 11/17/2014 **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. Open to Public Inspection

For Calledray Year 2015 or tax year beginning Same of Sundation BROWNELL PAMILY FOUNDATION # PRANK BROWNELL III James of send for 90 Sen and bed during and delivered to send a derivery 200 S PRONT STREET City or form, state or province, contriby, and 28° or foreign postal code MONTEZUNA, 1A 50171 City or form, state or province, contriby, and 28° or foreign postal code MONTEZUNA, 1A 50171 City or form, state or province, contriby, and 28° or foreign postal code MONTEZUNA, 1A 50171 City or form, state or province, contriby, and 28° or foreign postal code MONTEZUNA, 1A 50171 City or form, state or province, contriby, and 28° or foreign postal code MONTEZUNA, 1A 50171 City or form, state or province, contriby, and 28° or foreign postal code MONTEZUNA, 1A 50171 City or form, state or province, contribution, and the state of order o	Depa	rtmen		nter Social Security numbers o t Form 990-PF and its separate			Open to Public Inspection
Removalue Remo					*******		Coper to rubile inspection
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Reservation B Telephone number Telephone number Color Colo	В	RO	WNELL FAMILY FOUNDATI	ON			
20.0 S FRONT STREET City of town, static or province, country, and 2IP or foreign postal code MONTEQUIAR. TA 50.171 6 Check all that apply: Install return Anneaded return Final return Anneaded return An						42-1276134	
City or town, state or province, country, and ZPP or foreign possal code MONTEZUMA, I A 50171 G Check all thail apply: Initial return Initial return Initial return of a former public chantly Initial return Initial Initia	Nur	nber a	and street (or P O box number if mail is not delivered to	street address)	Room/su	III B Telephone number	
MONTEZUNA TA 50171 Indial return of a former public charity Indial return of a former public charity Indial return Amended return	_2	00	S FRONT STREET			641-623-540	1
Check all that apply:	City	or t	town, state or province, country, and ZIP or fore	ıgn postal code		C If exemption application is pen	ding, check here
Amended return Amen	_M	ON	ITEZUMA, IA 50171				_
Address change Name change Rame change	G (Check	k all that apply: Initial return	Initial return of a f	ormer public charity	D 1 Foreign organizations, of	check here
H. Check byte of organization: Section 4987(a)(1) nonexempt charactele trust Section 4987(a)(1) nonexempt charactele trust Farm maket value of all assets at end of year Jaccounting method: X Cash Accrual (from Part II, co) (c), ine 15) S			= " '	Amended return		2 Foreign organizations meets	ng the 85% test
Section 4947(a)(1) nonexempt charatable trust Other taxable private loundation Inform Part II, col (c), line 16) Accounting method. Cash Accrual (from Part II, col (c), line 16) Other (specify)						check here and attach comp	putation Dutation
Far market value of all assets at end of year J Accounting method: S Cash Accrual If the foundation is in a 60-month termination under section 507(b)(1)(B), check here Accounting method:	H (_					
Total (see the 16) Total (see the 16) Total (specify) Under section 507(b)(1)(8), check here Total (see the 16) Total (see	<u> </u>					under section 507(b)(1)(A	i), check here
155, 612				¬ ·	Accrual		
Part Analysis of Revenue and Expenses (a) Revenue and Expenses (b) (a) Analysis of Revenue and Expenses (b) (a) Analysis of Revenue and Expenses (b) (a) Analysis of Revenue and Expenses (b) Analysis of Revenue and Expenses (c)			Part II, col (c), line 16)	Utner (specify)	hace l	under section 507(b)(1)(B	s), check here
Total date of the contract in columns (b), (c), and (c) may not expenses per books 1 Contributions, girts, grants, etc., received 2 Cheele — If all feedbacks and retreach is attain 6 to 8 3 Interest on atwarps and temporary 4 Lay Soo. 5 Lay STATEMENT 1 5 A Gross rents 1 Description of colors of the color						t (a) Advicated net	(d) Dishursements
1 Contributions, gifts, grants, etc., received 2 Check ▶		47 6 1	(The total of amounts in columns (b), (c), and (d) may				for charitable purposes
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New State New		l '					
4 Dividends and interest from securities 5 a Gross rents b Net rental income or gloss) 6 a Not gain or (loss) from sale of assets not on line 10 b Cross scrible printer for all 24,294. 7 Canala gain ent income (flores) 9 Net Short-term capital gain 9 Income modifications 10a and slowances 10a and slowances 10a and slowances 11 Other income 12 Total, Add lines 1 through 11 13 Compensation of officers, derectors, invatees, etc 14 Other employee scalares and wages 15 Pension plans, employee trenefits 16a Legal fees 9 Accounting fees 16a Legal fees 9 Accounting fees 17 Interest 18 Taxes 19 Depreciation and depletion OGDEN UT 20 Occupancy 21 Travel, conferences, and meetings 22 Pinting and publications 23 Other expenses 23 Contractions of officers, derectors, invatees, etc 401,007. 401,007. 401,007. 502 503 504 505 506 507 507 508 508 508 508 508 508 508 508 508 508		-	Interest on savings and temporary	4,806.	4,80	6. 4.806.S	TATEMENT 1
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b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) 4,809.		l .		26,178.			
		ı	•		3,68	5.	
			Adjusted net income (if negative, enter -0-)		-	4,809.	-

	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		of year
	aı t	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		36,670	
	2	Savings and temporary cash investments	89,250.	111,211	. 118,942.
	3	Accounts receivable ►			
		Less: allowance for doubtful accounts ▶	1,500.		
	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			
		Less: allowance for doubtful accounts		<u> </u>	
şţs	8	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
⋖	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock			
	C	Investments - corporate bonds			
	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			
	1	Other assets (describe)			
	16	Total assets (to be completed by all filers - see the	00 750	147 001	155 612
_	47	Instructions. Also, see page 1, item 1)	90,750.	147,881	. 155,612.
	I	Accounts payable and accrued expenses		·· 	1
	18	Grants payable Deferred revenue			1
Liabilities	19	ľ			-
ij	20	Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable			1
Ë	I	Other liabilities (describe)			1
		Cities industrials (accounts)			1
	23	Total liabilities (add lines 17 through 22)	0.	0	
_		Foundations that follow SFAS 117, check here	-		7
		and complete lines 24 through 26 and lines 30 and 31.			
Ses	24	Unrestricted			
aŭ	25	Temporarily restricted			7
Ba	26	Permanently restricted [
Fund Balance		Foundations that do not follow SFAS 117, check here			
Ę		and complete lines 27 through 31.			
So	27	Capital stock, trust principal, or current funds	0.	0	
ssets	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0	
⋖	29	Retained earnings, accumulated income, endowment, or other funds	90,750.	147,881	- 1
Net	30	Total net assets or fund balances	90,750.	147,881	<u>•</u>
_	31	Total liabilities and net assets/fund balances	90,750.	147,881	•
P	art	III Analysis of Changes in Net Assets or Fund Ba	alances		
<u></u>	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30	1	
1		st agree with end-of-year figure reported on prior year's return)	••		90,750.
2		r amount from Part I, line 27a		. 2	
		r increases not included in line 2 (itemize)	SEE STA	•	
		lines 1, 2, and 3	<u> </u>	4	4 4 - 4 4 4
		eases not included in line 2 (itemize)			
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	. 6	
_				· · · · · · · · · · · · · · · · · · ·	Form 990-PF (2013)

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	ribe the kind(s) of property sold (e irehouse; or common stock, 200 sl		· moonie	(b) How acquire P - Purchase D - Donation		Date acquired io., day, yr.)	(d) Date sold (mo., day, yr.)
1a GNMA SECURITIE	S	 -		P	01	/01/12	12/31/13
b						, , , , , , , ,	
С							
<u>d</u>							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
<u>e</u>							
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			h) Gain or (loss plus (f) minus	
a 24,294.	***		24,27	3.			21.
b							
С							
d							
<u>e</u>		<u></u>					
Complete only for assets showin	g gain in column (h) and owned by	y the foundation	n on 12/31/69			is (Col. (h) gain	
(1) F.M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		col (j), if any			but not less that sses (from col. (
a							21.
b							
C							
d							
e							
2 Capital gain net income or (net ca	pital loss) { If gain, also ento			} 2			21.
3 Net short-term capital gain or (los							
If gain, also enter in Part I, line 8,		and (0).					
If (loss), enter -0- in Part I, line 8	. ,			<i>f</i> 3			0.
Part V Qualification U	nder Section 4940(e) fo	r Reduced	Tax on Net	Investment	t Incom	е	
(For optional use by domestic private	foundations subject to the section	1 4940(a) tax or	net investment in	come.)			
If conting 4040(d)(2) applies leave th	ua nort blank						
If section 4940(d)(2) applies, leave th	is part blank.						
Was the foundation liable for the sect	ion 4942 tax on the distributable a	mount of any ye	ear in the base per	od?			Yes X No
If "Yes," the foundation does not qual							
1 Enter the appropriate amount in e	each column for each year; see the	instructions be	fore making any ei	ntries.			/4/
Base period years	(b)		Makinalina at mai	(c)		Distrib	(d) ution ratio
Calendar year (or tax year beginning	 		Net value of nor			(col. (b) dıv	ided by col. (c))
2012		77,692.		60,			7.951594
2011	5;	23,741.		147,			3.555559
2010		96,742.		431,		-	1.152127
2009		30,142.		431,			.996435
2008	6	71,034.		304,	972.	· · ·	2.200313
					- 1		
2 Total of line 1, column (d)					ļ_	2	<u> 15.856028</u>
3 Average distribution ratio for the 5		I on line 2 by 5,	or by the number	of years			
the foundation has been in exister	ice if less than 5 years				ļ	3	<u>3.171206</u>
						1	
4 Enter the net value of noncharitab	e-use assets for 2013 from Part X	, line 5				4	116,788.
5 Multiply line 4 by line 3						5	<u>370,359.</u>
					ļ		
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)					6	<u>37.</u>
7 Add lines 5 and 6						7	370,396.
6 Para a alt a transition	B (20)						101 00-
8 Enter qualifying distributions from	· ·				<u></u>	8	401,007.
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, lin	e 1b, and comp	lete that part using	g a 1% tax rate.			

Form 990-PF (2013)	4040(a) 4040(b) 4040(a) or 4		1276134		Page 4
		1940 -	See msu (ictio	115)
1a Exempt operating foundations described in section 4940(d)(2), check here ▶ a					
Date of ruling or determination letter: (attach copy of letter is b. Domestic foundations that meet the section 4940(e) requirements in Part V, check her		١. ١			37.
	e PLA I and enter 1%	1			3/.
of Part I, line 27b	or 49/ of Dort Line 12 and 7h				
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter		,			Λ
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations on	ny. Others enter -u-)	2			$\frac{0.}{37.}$
3 Add lines 1 and 2	al. Others and a O.V	3			
Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations of The based on income taxable foundations of the section 4947(a)(1) trusts and taxable foundations of the section 4947(a)(a)(b)(a)(a)(b)(a)(a)(b)(a)(a)(b)(a)(a)(a)(b)(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)	•	4			$\frac{0.}{37.}$
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5			<u> 37.</u>
6 Credits/Payments:					
a 2013 estimated tax payments and 2012 overpayment credited to 2013	6a				
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			0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is	s attached	8			
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	•	9			<u>37.</u>
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpa	iid , 🕨	10			
11 Enter the amount of line 10 to be: Credited to 2014 estimated tax	Refunded ▶	11			
Part VII-A Statements Regarding Activities					
1a During the tax year, did the foundation attempt to influence any national, state, or local	legislation or did it participate or intervene	ın		Yes	No
any political campaign?			1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political p	urposes (see instructions for the definition)?	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activitie	es and copies of any materials publishe	ed or			
distributed by the foundation in connection with the activities.					
c Did the foundation file Form 1120-POL for this year?			1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during	ig the year:				
(1) On the foundation. \blacktriangleright \$ (2) On foundation management	agers. ► \$ 0 .				
e Enter the reimbursement (if any) paid by the foundation during the year for political exp	penditure tax imposed on foundation				
managers ► \$O.					
2 Has the foundation engaged in any activities that have not previously been reported to	the IRS?		2		X
If "Yes," attach a detailed description of the activities					
3 Has the foundation made any changes, not previously reported to the IRS, in its govern	ning instrument, articles of incorporation, o	or			
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the ch	nanges		3		<u> </u>
4a Did the foundation have unrelated business gross income of \$1,000 or more during th	e year?		4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/	'A 4b		<u> </u>
5 Was there a liquidation, termination, dissolution, or substantial contraction during the	year?		5		<u> </u>
If "Yes," attach the statement required by General Instruction T					
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisf	ied either:				
 By language in the governing instrument, or 					
 By state legislation that effectively amends the governing instrument so that no mani- 	datory directions that conflict with the state	law			
remain in the governing instrument?			6	Х	ļ
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	,	7	Х	
8a Enter the states to which the foundation reports or with which it is registered (see instr	uctions) NONE				
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	Х	
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			<u> </u>
year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Ye			9		X
10 Did any persons become substantial contributors during the tax year? if "Yes" attach a s			10		X

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Pi	art 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?	13	X	
	Website address ► N/A			
14	The books are in care of \blacktriangleright FRANK BROWNELL, III Telephone no. \blacktriangleright 641-6		<u>401</u>	
	Located at ► 200 S FRONT STREET, MONTEZUMA, IA ZIP+4 ►5	<u> </u>		
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		/A	_:-
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank,	1	Yes	
	securities, or other financial account in a foreign country?	16		<u>X</u>
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign			
Б	country art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
			V	NI-
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	\vdash	Yes	No
18	a 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? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1 1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(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.)			
t	of any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1 1		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	16		
	Organizations relying on a current notice regarding disaster assistance check here			
(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 2013?	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)):			
ä	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2013? Yes X No			
	If "Yes," list the years ▶,,,,,			
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
(of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	1 1		
	<u> </u>	1 1		
38	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year? Yes X No			
t	of "Yes," did it have excess business holdings in 2013 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,	,		
4.	Form 4720, to determine if the foundation had excess business holdings in 2013) N/A Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	3b		X
	o Did the foundation invest during the year any amount in a mariner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	4a		
	had not been removed from jeopardy before the first day of the tax year beginning in 2013?	46		x
		. 70 1		41

BROWNELL FAMILY FOUNDATION Form 990-PF (2013) % FRANK BROWNELL, III 42-1276134 Page 6 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: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 509(a)(1), (2), or (3), or section 4940(d)(2)? (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 X 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 5b 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 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 Yes X No a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b X If "Yes" to 6b, file Form 8870 Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? 7b Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred (e) Expense account, other (c) Compensation (b) Title, and average hours per week devoted (If not paid, enter -0-) (a) Name and address to position allowances FRANK R BROWNELL III TRUSTEE 200 S FRONT STREET MONTEZUMA, IA 50171 0.00 0 0 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to (e) Expense account, other (b) Title, and average loyee benefit plans and deferred (a) Name and address of each employee paid more than \$50,000 hours per week devoted to position (c) Compensation allowances NONE

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

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NO	NE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	<u> </u>	
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in number of organizations and other beneficiaries served, conferences convened, research papers produced,	oformation such as the	Expenses
	etc.	
1N/A		
The state of the s		
2		
2		
3		•
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 lines 1	1 and 2.	Amount
1 <u>N/A</u>		
2		
All all and a second at the se		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	•	0.

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
·	Average monthly fair market value of securities	1a	68.945.
b	Average of monthly cash balances	1b	68,945. 49,621.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	118,566.
	Reduction claimed for blockage or other factors reported on lines 1a and		
•	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	118,566.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,778.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	116,788.
6	Minimum investment return. Enter 5% of line 5	6	5,839.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are	nd certain	
_	foreign organizations check here and do not complete this part.)	1	
1	Minimum investment return from Part X, line 6	1	5,839.
2a	Tax on investment income for 2013 from Part VI, line 5		
b	Income tax for 2013. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	37.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	5,802.
4	Recoveries of amounts treated as qualifying distributions	4	30,953.
5	Add lines 3 and 4	5	36,755.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	<u>36,755.</u>
<u> </u>	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	401,007.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		·
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	401,007.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income Enter 1% of Part I, line 27b	5	37.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	400,970.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	ualifies fo	
	4940(e) reduction of tax in those years.		

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Part XIII Undistributed Income (se	ee instructions)			
	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2012	2012	2013
1 Distributable amount for 2013 from Part XI, line 7				_ 36,755.
2 Undistributed income, if any, as of the end of 2013				00//001
a Enter amount for 2012 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2013:				
a From 2008				
b From 2009 408,568.			:	
c From 2010 475,197.				
dFrom 2011 516,434. eFrom 2012 369,570.				
f Total of knes 3a through e	1,769,769.			
4 Qualifying distributions for 2013 from	1,109,109.			<u> </u>
Part XII, line 4: ► \$ 401,007.				
a Applied to 2012, but not more than line 2a			0.	
b Applied to undistributed income of prior			•	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2013 distributable amount				36,755.
e Remaining amount distributed out of corpus	364,252.			
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,134,021.			· · · · · · · · · · · · · · · · · · ·
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2012. Subtract line				,
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2013. Subtract				
lines 4d and 5 from line 1. This amount must				0
be distributed in 2014				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	0.			
section 170(b)(1)(F) or 4942(g)(3) 8 Excess distributions carryover from 2008				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2014.				
Subtract lines 7 and 8 from line 6a	2,134,021.			
10 Analysis of line 9:				
a Excess from 2009 408, 568.				
b Excess from 2010 475, 197.				
c Excess from 2011 516, 434.				
d Excess from 2012 369,570.				
e Excess from 2013 364, 252.				5 000 PE (0) (0)

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Part XIV Private Operating			I-A, question 9)	N/A	
1 a lf-the foundation has received a ruling					
foundation, and the ruling is effective	for 2013, enter the date of	the ruling	▶ ∟_		
b Check box to indicate whether the fou-		ing foundation described		4942(j)(3)_or49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
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			1		
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:					
a "Assets" alternative test - enter:				1	
(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 Inf	ormation (Comple	ete this part only	if the foundatio	n had \$5,000 or me	ore in assets
at any time during					J. 0 II. 400010
 Information Regarding Foundation List any managers of the foundation w 	=	than 70/ of the total cont	ributions reserved by th	a favordation hafara the ala	an of any toy
year (but only if they have contributed			ributions received by th	e touridation defore the cio	se of any tax
, , ,					
NONE	100/ (4)		/		- 4b
b List any managers of the foundation w other entity) of which the foundation h			or an equally large por	ion of the ownership of a p	armersnip or
• •	as a 1070 of greater fixere	· · · · · · · · · · · · · · · · · · ·			
NONE					
2 Information Regarding Contribu					
Check here ► X if the foundation					
the foundation makes gifts, grants, etc					<u> 1 </u>
a The name, address, and telephone nu	nber or e-mail address of	the person to whom appli	cations should be addr	essed.	
b The form in which applications should	be submitted and informa	ition and materials they st	nould include:		
c Any submission deadlines:	-				
d Any restrictions or limitations on awar	ds, such as by geographic	al areas, charitable fields,	kinds of institutions, or	other factors	

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Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year FUND DRIVE ABOVE + BEYOND CANCER N/A 1915 GRAND AVENUE 1,000. DES MOINES, IA 50309 CIVIC CENTER OF DES MOINES N/A ANNUAL FUND DRIVE 221 WALNUT ST DES MOINES, IA 50309 500. N/A FUND DRIVE DAV 1112 WEST KIMBERLY ROAD DAVENPORT, IA 52806 100. DENVER MUSEUM OF NATURAL SCIENCE ANNUAL PLEDGE N/A 2001 COLORADO BLVD 10,000. DENVER CO 50205 DES MOINES METRO OPERA OPERA FUND DRIVE N/A 106 W BOSTON AVE INDIANOLA, IA 50125 100 000. SEE CONTINUATION SHEET(S ➤ 3a Total 401,007. b Approved for future payment NONE **▶** 3b Total

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Part XVI-A	Analysis	of Income	-Producina	Activities
I GILATIA	Allalysis		1 Todacing	ACCITICO

Enter gross amounts unless otherwise indicated.	Unrelated t	ousiness income		by section 512, 513, or 514	(e)
·	(a) Business	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	code		code		
a	_				
b	-				
c	I I				
d	1				
e					
fg Fees and contracts from government agencies					
•					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					4 806
investments 4 Dividends and interest from securities	-				4,806. 3.
5 Net rental income or (loss) from real estate:					
· ·			 		
 a Debt-financed property b Not debt-financed property 		J			
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					····
than inventory					21.
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
С	1				
d					
e					
12 Subtotal. Add columns (b), (d), and (e)).	0.	4,830.
13 Total. Add line 12, columns (b), (d), and (e)	•		•	13	4,830.
(See worksheet in line 13 instructions to verify calculations.)	1				
Part XVI-B Relationship of Activities	.	anlichment of	Evennt D	urnoses	
Part AVI-B Relationship of Activities	to the Accom	ipiisiiiieiit oi			
Line No Explain below how each activity for which in the foundation's exempt purposes (other than				d importantly to the accomp	olishment of
	an by providing lund	S for Sucii purposes)	<u> </u>		
3 N/A					
4 N/A			-		
	v-·				

Line No ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
3	N/A
4	N/A
-	
	-
2621	- 000 DF -

% FRANK BROWNELL, III 42-1276134 Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No 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? a Transfers from the reporting foundation to a noncharitable exempt organization of: 1a(1) X (2) Other assets 1a(2) b Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d 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. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described ☐ Yes X No in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A of perjury, I declare that I have ex nined this return, including accompanying schedules and statements, and to the best of my knowledge May the IRS discuss this return with the preparer shown below (see instr)? ion of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Sign Here TRUSTEE X Yes Signature of officer or trustee Title Print/Type preparer's name Preparer's signature Date Check [PTIN self- employed RONALD L. HINTZ, Paid 11/7/,4 HINTZ CPA RONALD L. P01060958 Preparer Firm's name ► CLIFTONLARSONALLEN LLP Firm's EIN \triangleright 41-0746749 **Use Only**

Form 990-PF (2013)

515-222-4400

IA 50266-1411

Firm's address ► 2700 WESTOWN PARKWAY STE 400 WEST DES MOINES ,

Phone no

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

Name of the organization

BROWNELL FAMILY FOUNDATION

% FRANK BROWNELL, III

Employer identification number

	ક	FRANK BROWNELL, III	42-1276134						
Organiza	ation type (check o	ne)							
Filers of:	of: Section:								
Form 990	O 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	X 501(c)(3) exempt private foundation							
		4947(a)(1) nonexempt charitable trust treated as a private foundation							
		501(c)(3) taxable private foundation							
	nly a section 501(c)	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Ri	ule See instructions						
X		n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in ri lete Parts I and II	noney or property) from any one						
Special I	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 lf 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
BROWNELL FAMILY FOUNDATION
\$ FRANK BROWNELL, III

Employer identification number

42-1276134

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	BROWNELLS INC 200 S FRONT MONTEZUMA, IA 50171	\$ <u>425,000</u> .	Person X 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 Oncash Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Oncash Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Oncash Occash (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
BROWNELL FAMILY FOUNDATION
% FRANK BROWNELL, III

Employer identification number

42-1276134

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
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2013) Page 4 Name of organization Employer identification number BROWNELL FAMILY FOUNDATION FRANK BROWNELL. 42-1276134 Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the Part III 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) \$5 Use duplicate copies of Part III if additional space is needed (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor FRANK LLOYD WRIGHT FOUNDATION N/A ANNUAL FUND DRIVE PO BOX 4430 100. SCOTTSDALE, AZ 85261-4430 FRIENDS OF LOWELL OBSERVATORY ANNUAL FUND DRIVE N/A 1400 WEST MARS HILL RD 100. FLAGSTAFF, AZ 86001 GREATER POWESHIEK COMMUNITY N/A AQUATIC CENTER FUND FOUNDATION PLEDGE PO BOX 344 10,000. GRINNELL, IA 50112 GRMC (GRINNELL REGIONAL MEDICAL N/A ANNUAL FUND DRIVE CENTER) 210 4TH AVE 12,000. GRINNELL, IA 50112 HILLCREST FAMILY SERVICES N/A FUND DRIVE 2005 ASBURY ROAD DUBUQUE IA 52001 2,000. HILLCREST FAMILY SERVICES N/A SPIRITUAL LIFE CENTER 2005 ASBURY ROAD DUBUQUE, IA 52001 10,000. METHODIST CHURCH N/A ANNUAL PLEDGE PO BOX 460 MONTEZUMA IA 50171 45,000. METHODIST CHURCH N/A LANDSCAPING PROJECT PO BOX 460 1,161. MONTEZUMA, IA 50171 METROPOLITAN OPERA ANNUAL PLEDGE N/A LINCOLN CENTER NEW YORK, NY 10023 1,000. MINIATURE HEREFORD BREEDERS N/A GENERAL FUND ASSOCIATION 720 COUNTY ROAD 26 TEKAMAH, NE 68061-5033 1,000. Total from continuation sheets 289 407.

% FRANK BROWNELL, III 42-1276134 Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual. Recipient show any relationship to Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient MONTEZUMA COMMUNITY FOUNDATION N/A ANNUAL PLEDGE PO BOX 132 MONTEZUMA IA 50171 1,000. MONTEZUMA FIRE DEPARTMENT ANNUAL PLEDGE N/A PO BOX 132 MONTEZUMA, IA 50171 3,000. MONTEZUMA FIRE DEPARTMENT EQUIPMENT FUND DRIVE N/A 503 EAST MAIN STREET 5,000. MONTEZUMA, IA 50171 MONTEZUMA FOOD PANTRY N/A ANNUAL PLEDGE PO BOX 189 MONTEZUMA, IA 50171 4,000. MONTEZUMA LIONS CLUB FUND DRIVE N/A 1505 HIGHWAY 85 MONTEZUMA, IA 50171 441. MONTEZUMA SCHOOL N/A ACADEMIC FAIR/SCHOOL 504 NORTH 4TH STREET FACILITIES 7,500. MONTEZUMA, IA 50171 MONTEZUMA SCHOOL N/A WALK-A-THON 504 NORTH 4TH STREET MONTEZUMA IA 50171 5,000. MUSEUM OF FUR TRADE N/A GENERAL FUND 6321 HIGHWAY 20 1,000. CHADRON, NE 69337

N/A

N/A

ANNUAL FUND DRIVE

ANNUAL FUND DRIVE

MZURI WILDLIFE FOUNDATION

SAN FRANCISCO CA 94126

FRIENDSHIP, ID 47021

NATIONAL MUZZLE LOADING RIFLE

Total from continuation sheets

PO BOX 2347

ASSOCIATION PO BOX 67

2,000.

1,000.

% FRANK BROWNELL. III

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor ANNUAL FUND DRIVE NRA FAMILY SPORTFEST PLEASANT VALLEY N/A TROUT & GAME 1208 SALT POINTE TURNPIKE PLEASANT VALLEY NY 12569 86,885. YOUTH SCHOLARSHIP NRA FOUNDATION N/A AWARDS 11250 WAPLES MILL ROAD 25,000. FAIRFAX, VA 22030 NRA FOUNDATION N/A THE NRA WHITTINGTON 11250 WAPLES MILL ROAD CENTER 1,000. FAIRFAX, VA 22030 PHI BETA KAPPA SOCIETY N/A SOCIETY'S PROGRAM PO BOX 97269 WASHINGTON, DC 20077 50. GREATER POWESHIEK COMMUNITY N/A FUND DRIVE FOUNDATION PO BOX 344 GRINNELL, IA 50112 6,000. POWESHIEK COUNTY MENTAL HEALTH N/A ANNUAL FUND DRIVE 200 4TH AVE W 5,000. GRINNELL, IA 50112 POWESHIEK COUNTY PHEASANTS FOREVER N/A ANNUAL FUND DRIVE 1783 BUERKLE CIRCLE 15,000. ST PAUL, MN 55110 ROCKY MOUNTAIN ELK FOUNDATION N/A SPONSORSHIP 5705 GRANT CREEK MISSOULA MT 59808 1,000. SHRINERS HOSPITALS FOR CHILDREN N/A EAST-WEST SHRINE GAME 2900 ROCKY POINT DRIVE 70. TAMPA FL 33607 THOMAS GILCREASE MUSEUM N/A ANNUAL FUND DRIVE 1400 N. GILCREASE MUSEUM ROAD TULSA OK 74127 100. Total from continuation sheets

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual. Recipient show any relationship to Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient UNIVERSITY OF IOWA CENTER FOR THE ANNUAL GIFT N/A BOOK FUND 205 GILMORE HALL IOWA CITY, IA 52244 15,000. UNIVERSITY OF IOWA DIRECTORS CLUB N/A ANNUAL FUND DRIVE U OF IA FDN, PO BOX 4550 IOWA CITY, IA 52244 1,000. UNIVERSITY OF IOWA HANCHER FUND N/A ANNUAL FUND DRIVE PO BOX 4550 IOWA CITY, IA 52244 2,000. UNIVERSITY OF IOWA SCHOOL FOR N/A ANNUAL FUND DRIVE **JOURNALISM** PO BOX 4550 IOWA CITY, IA 52244 2,000. NRA FOUNDATION YOUTH HUNTER EDUCATION N/A 11250 WAPLES MILL ROAD CHALLENGE FAIRFAX, VA 22030 500. NORTHWESTERN BIENEN SCHOOL OF MUSIC N/A BAND TOUR 633 CLARK STREET EVANSTON IL 60208 1,000, ROCK IN PREVENTION N/A FUND DRIVE 7628 HICKMAN ROAD WINDSOR HEIGHTS, IA 50324 15,000. UNIVERSITY OF IOWA CHILDREN'S N/A LADIES FOOTBALL HOSPITAL. ACADEMY 200 HAWKINS DRIVE IOWA CITY, IA 52242 500. Total from continuation sheets

FORM 990-PF INTERE	ST ON SAVII	NGS AND TEM	PORARY	CASH I	NVESTMENTS	STA	TEMENT	
SOURCE	REVE	(A) REVENUE PER BOOKS		(B) NVESTMENT NCOME	(C) ADJUSTED NET INCOME 205.			
FIRST AMERICAN BANK FIRST AMERICAN WEAL MANAGEMENT GROUP		205.	205. 4,601.					
TOTAL TO PART I, LI		4,806.		4,806.		4,806.		
FORM 990-PF	DIVIDENDS	S AND INTER	EST FRO	OM SECU	RITIES	STA'	PEMENT	2
SOURCE	GROSS E AMOUNT		CAPITAL GAINS RE DIVIDENDS PER		(B) NET INVES MENT INCO			
FEDERATED MONEY MARKET FUND	3	•	0.	3		3.		3.
TO PART I, LINE 4 3.		•	3.		•	3.	3.	
FORM 990-PF		OTHER E	XPENSE	S		STA	rement	3
DESCRIPTION		(A) EXPENSES PER BOOKS	NET I	B) NVEST- INCOME	(C) ADJUSTED NET INCOM		(D) CHARITAI PURPOSI	
BANK CHARGES ACCOUNTING FEES	-	245. 900.		245. 900.	· 	0.		0.
TO FORM 990-PF, PG	- 1, LN 23	1,145.		1,145.		0.		0.

FORM 990-PF	OTHER :	INCREASES	IN NET	ASSETS	OR FUND	BALANCES	STATEMENT	4
DESCRIPTION AMOUNT								
RECOVERIES OF AMOUNTS TREATED AS QUALIFYING DISTRIBUTIONS						30,953.		
TOTAL TO FORM 990-PF, PART III, LINE 3					30,953.			

Form 8	868 (Rev 1-2014)						Page 2	
If yo	u are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II and check this	box		>	X	
	Only complete Part II if you have already been granted an a			led Form	8868			
If yo	u are filing for an Automatic 3-Month Extension, comple							
Part	II Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no c	opies nee	ded).		
			Enter filer's	identifyir	ng number, s	see inst	ructions	
Туре о	r Name of exempt organization or other filer, see instru	ctions		Employe	mployer identification number			
print	BROWNELL FAMILY FOUNDATION							
File by th	8 FRANK BROWNELL, III				42-12	7613	4	
due date	Number, street, and room or suite no. If a P.O. box, s	ee instruc	tions	Social se	curity number			
filing you return Se	1900 d BDONM dMDBBM				,	` '		
nstructio		oreign add	ress, see instructions					
	MONTEZUMA, IA 50171							
			· · · · · · · · · · · · · · · · · · ·					
Enter ti	ne Return code for the return that this application is for (file	a senara	te application for each return)				0 4	
	the flotarii dodd for the fotarii that this application is for this	a ocpaia	te application for each return)				0 3	
Applic	ation	Return	Application				Return	
ls For	ation	Code	Is For					
	90 or Form 990-EZ	01	IS FUI				Code	
Form 9		02	Form 1041 A					
	720 (Individual)		Form 1041-A				08	
	· · · · · · · · · · · · · · · · · · ·	03	Form 4720 (other than individual)					
Form 9		04	Form 5227		10			
	90-T (sec 401(a) or 408(a) trust)	05	Form 6069				11	
	90-T (trust other than above)	06	Form 8870				12	
STOP!	Do not complete Part II if you were not already granted		natic 3-month extension on a previ	ously file	d Form 886	В.		
_	FRANK BROWNELL		1601mmmmm					
	books are in the care of \triangleright 200 S FRONT STI	KEET -		171				
	phone No ► 641-623-5401		Fax No 🕨		 			
	e organization does not have an office or place of business							
_	is is for a Group Return, enter the organization's four digit	1	· · · · · · · · · · · · · · · · · · ·		_	-		
xoc				all memb	ers the exter	nsion is	<u>for</u>	
	request an additional 3-month extension of time until	NOVEMI	BER 15, 2014.					
	or calendar year 2013 , or other tax year beginning $_$, and ending	<u> </u>				
6 11	the tax year entered in line 5 is for less than 12 months, c	heck reas	on. L Initial return L	Fınal r	eturn			
	Change in accounting period							
	State in detail why you need the extension							
	ADDITIONAL TIME IS NECESSARY ?	ro gar	THER INFORMATION TO) FIL	E A CO	MPLE	TE	
<u> 7</u>	AND ACCURATE RETURN		*****					
8a If	this application is for Forms 990·BL, 990·PF, 990·T, 4720,	, or 6069, enter the tentative tax, less any						
ņ	onrefundable credits. See instructions			8a	\$		0.	
b If	this application is for Forms 990-PF, 990-T, 4720, or 6069	, enter any	y refundable credits and estimated]				
ta	ax payments made Include any prior year overpayment all	owed as a	credit and any amount paid					
_5	previously with Form 8868	8b	\$		0.			
c E	Balance due. Subtract line 8b from line 8a. Include your pa							
E	EFTPS (Electronic Federal Tax Payment System) See instructions						0.	
			st be completed for Part II o	nly.	\$			
Jnder p t is true	enalties of perjury, I declare that I have examined this form, includ , correct, and complete, and that I am authorized to prepare this fo	ing accomp	•	-	f my knowledç	je and be	hef,	
Signatui	re ▶ Title ▶ (מסי		Data				
<i>n</i> gnatul	Title V	- L F		Date				

Form **8868** (Rev 1-2014)