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Form **990-PF** 

Department of the Treasury Internal Revenue Service

# EXTENSION GRANTED TO 11/15/2014 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.

2013
Open to Public Inspection

For calendar year 2013 or tax year beginning		, and ending		
Name of foundation			A Employer identification	number
F WILLIAM BECKWITH CHARITA	BLE FOUNDATION		42-1448419	
Number and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
1502 220TH STREET	· - · · · ·	<u> </u>	515-432-91	
City or town, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is p	ending, check here
BOONE, IA 50036	I had a bank and a second		D 4 Farmer annumber	ahaali bara
G Check all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	s, check here
Final return Address change	X Name change		Foreign organizations me check here and attach co	eting the 85% test,
H Check type of organization: X Section 501(c)(3) ex			1	
	Other taxable private founda	tion	E If private foundation sta under section 507(b)(1)	
Fair market value of all assets at end of year J Accounting	· —	Accrual	F If the foundation is in a	• •
(from Part II, col. (c), line 16)	ther (specify)		under section 507(b)(1)	
▶\$ 4,523,603. (Part I, colu	mn (d) must be on cash b	oasis.)		
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received	299,597.	-	N/A	(000) 2000 011199
2 Check In it the foundation is not required to attach Sch 8	233,337.		21/22	
Interest on savings and temporary cash investments	156.	156.		STATEMENT 1
4 Dividends and interest from securities	94,880.	94,880.		STATEMENT 2
5a Gross rents				
Net rental income or (loss)			R	ECEIVED
θa Net gain or (loss) from sale of assets not on line 10	298,485.			70
b Gross sales price for all 876,974.			÷ 0(	T 2 8 2014   S
7 Capital gain net income (from Part IV, line 2)		298,485.	<u> </u>	2 0 29 17
6a. Net gain or (loss) from sale of assets not on line 10 b. Gross sales price for all 876,974. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications				
Gross sales less returns				
and allowances		· · · · · ·		
b Less Cost of goods sold c Gross profit or (loss)				
c Gross profit or (loss)				
12 Total. Add lines 1 through 11	693,118.	393,521.		
13 Compensation of officers, directors, trustees, etc	0.	0.	,	0.
14 Other employee salaries and wages				
15 Pension plans, employee benefits				ļ
16a Legal fees	0.505	0.605		
b Accounting fees STMT 3	2,625.	2,625.		0.
c Other professional fees STMT 4	28,617.	28,617.	•	0.
9 17 Interest 18 Taxes STMT 5	1,031.	1,031.		0.
19 Depreciation and depletion	1,051.	1,031	<u> </u>	
E 20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses				
분 24 Total operating and administrative				_
b Accounting fees STMT 3 c Other professional fees STMT 4  17 Interest 18 Taxes STMT 5  19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23	32,273.	32,273.	•	0.
25 Contributions, gins, grants paid	200,000.			200,000.
26 Total expenses and disbursements.	020 072	22 272		200 000
Add lines 24 and 25	232,273.	32,273		200,000.
27 Subtract line 26 from line 12:	460,845.			
a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)	400,043.	361,248		
c Adjusted net income (if negative, enter -0-)		301,240	N/A	<del></del>
323501 10-10-13 LHA For Paperwork Reduction Act Notice, see	instructions.	·	<u> </u>	Form <b>990-PF</b> (2013)

For	m 99	0-PF (2013) F WILLIAM BECKWITH CHAR		ION 42-1	448419	Page 2
Г	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of		
<u></u>	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market \	
	1	Cash - non-interest-bearing	74,797.	80,078.	80,	078.
	2	Savings and temporary cash investments				
	3	Accounts receivable				
		Less: allowance for doubtful accounts ▶				<u>.</u>
	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 ▶				
ţ	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
Ř	10a	Investments - U.S. and state government obligations				<del></del>
	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 STMT 6	3,470,393.	3,925,957.	4,443	<u>,525.</u>
	14	Land, buildings, and equipment basis ▶				
		Less accumulated depreciation				
	15	Other assets (describe ►)				
	16	Total assets (to be completed by all filers - see the				
	ļ	instructions. Also, see page 1, item 1)	3,545,190.	4,006,035.	4,523	<u>,603.</u>
	17	Accounts payable and accrued expenses				
	18	Grants payable				
S	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
jab	21	Mortgages and other notes payable				
_	22	Other liabilities (describe 🕨)				
	ŀ					
	23	Total liabilities (add lines 17 through 22)	0.	0.		
		Foundations that follow SFAS 117, check here				
S	1	and complete lines 24 through 26 and lines 30 and 31.	0 545 400	4 006 005		
Net Assets or Fund Balances	24	Unrestricted	3,545,190.	4,006,035.		
aja.	25	Temporarily restricted				
B	26	· · · · · · · · · · · · · · · · · · ·				
Š		Foundations that do not follow SFAS 117, check here				
F		and complete lines 27 through 31.				
ţŝ	27	· · · · · · · · · · · · · · · · · · ·				
SSe	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
Ϋ́	29	Retained earnings, accumulated income, endowment, or other funds	2 545 100	4 006 025		
ž	30	Total net assets or fund balances	3,545,190.	4,006,035.		
	<u> </u>		2 545 100	4 006 025		
_	31	Total liabilities and net assets/fund balances	3,545,190.	4,006,035.		
F	art	III Analysis of Changes in Net Assets or Fund B	alances			
-	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		<del>_</del> .	
1			30		3,545	190.
0	-	st agree with end-of-year figure reported on prior year's return) r amount from Part I, line 27a		2		,845.
		r increases not included in line 2 (itemize)		. 2	<u> </u>	0.
		lines 1, 2, and 3	· · -	4	4,006	
		eases not included in line 2 (itemize)		4		0.
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	4,006	
<u> </u>	10.0	The access of fairs ballations at one of your finite a finite of the of			Form <b>990</b> -	

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200,000.

8 Enter qualifying distributions from Part XII, line 4

See the Part VI instructions.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

	990-PF (2013) F WILLIAM BECKWITH CHARITABLE FOUNDATION 42-1448 t VI   Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in			age 4 IS)
1a E	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%		3,6	<u>12.</u>
	of Part I, line 27b			
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			_
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<del></del> ,	3,6	0.
	Add lines 1 and 2	<del></del>	3,0	0.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	<del></del> :	3,6	
			3,0	<u> 14.</u>
	Credits/Payments: 2013 estimated tax payments and 2012 overpayment credited to 2013 6a 2,646.			
	2013 estimated tax payments and 2012 overpayment credited to 2013  Exempt foreign organizations - tax withheld at source  6b  6a  2,646.			
	Tax paid with application for extension of time to file (Form 8868)  6c			
	Backup withholding erroneously withheld  6d			
	Total credits and payments. Add lines 6a through 6d		2,6	46.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8		<u>- , , ,                                </u>	
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed SEE STATEMENT 7 > 9		9	66.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid .			
	Enter the amount of line 10 to be: Credited to 2014 estimated tax			
	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
ä	any political campaign?	1a		<u>X</u>
b i	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	1b		X
1	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
(	distributed by the foundation in connection with the activities.			
c l	Did the foundation file Form 1120-POL for this year?	1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0 .			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		1	
	managers. ► \$0 .	_		
	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		<u>X</u>
	If "Yes," attach a detailed description of the activities.			
	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			v
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?  If "Yes," has it filed a tax return on Form 990-T for this year?  N/A	4a		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	4b 5		Х
	If "Yes," attach the statement required by General Instruction T.			43
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	6	X	
	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	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			Ì
	IA			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
1	of each state as required by General Instruction G? If "No," attach explanation	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			1
	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	10		X
	For	ո <b>990</b>	-PF	(2013)

	990-PF (2013) F WILLIAM BECKWITH CHARITABLE FOUNDATION 42-144  rt VII-A   Statements Regarding Activities (continued)	18419		Page <b>5</b>
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		<u>X</u>
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_		<u>X</u>
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 ▶ F. WILLIAM BECKWITH Telephone no. ▶ 515-			
	Located at ►PO BOX 70, BOONE, IA ZIP+4 ►	<u> 50036</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		. >	Ш
	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	No
	securities, or other financial account in a foreign country?	16	<u> </u>	<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	ļ		
Pa	country  art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			}
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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"		Ì	
	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	o if any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			}
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1 <u>b</u>	<del> </del>	<del> </del>
	Organizations relying on a current notice regarding disaster assistance check here	۱ ۱		
(	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	40		x
_	before the first day of the tax year beginning in 2013?	1c	<del>                                     </del>	
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)):  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	-		ľ
•	before 2013?	. 1		
	If "Yes," list the years  ,,,,,,,,			
	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.)  N/A	2b		l
	the provisions of section 4942(a)(2) are being applied to <b>any of</b> the years listed in 2a, list the years here.			
	•	1		
3	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?	)		
- 1	b If "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,			
	Form 4720, to determine if the foundation had excess business holdings in 2013.)  N/A		<del> </del>	<del> </del>
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	-	<u> </u>
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
_	had not been removed from jeopardy before the first day of the tax year beginning in 2013?	4b	<u> </u>	<u>X</u>
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orm 990-PF (2013) F WILLIAM BECKWITH CHARI			42-144841	.9 Page 6
Part VII-B   Statements Regarding Activities for Which F  5a During the year did the foundation pay or incur any amount to:  (1) Carry on propaganda, or otherwise attempt to influence legislation (section Influence the outcome of any specific public election (see section 4955); or any voter registration drive?  (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 509(a)(1), (2), or (3), or section 4940(d)(2)?  (5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals?  b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unit section 53.4945 or in a current notice regarding disaster assistance (see instru Organizations relying on a current notice regarding disaster assistance check in expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53.494.  6a Did the foundation, during the year, receive any funds, directly or indirectly, to	r to carry on, directly or indirectly or ind	ectly,  Perfor Property Area (continuous)  Property Area (	s X No	
a personal benefit contract?		└── Ye	s X No	
<ul> <li>b Did the foundation, during the year, pay premiums, directly or indirectly, on a party to 6b, file Form 8870</li> <li>7a At any time during the tax year, was the foundation a party to a prohibited tax so if "Yes," did the foundation receive any proceeds or have any net income attributed the foundation About Officers, Directors, Trust</li> </ul>	shelter transaction? utable to the transaction?		s X No N/A 7	
Paid Employees, and Contractors	companyation			
List all officers, directors, trustees, foundation managers and their  (a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
F. WILLIAM BECKWITH 1502 220TH STREET BOONE, IA 50036	PRES/TREAS	0.	0.	0.
2 Compensation of five highest-paid employees (other than those in	luded on line 1). If none.	enter "NONE."		
(a) Name and address of each employee paid more than \$50,000  NONE	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Total number of other employees paid over \$50,000			Form	0 990-PF (2013)

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)		1448419 Page 7
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		
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities		<b>D</b>
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	nformation such as the , etc.	Expenses
1 IOWA GROCERS EDUCATION FOUNDATION - SCHOLARSHI		200,000.
2		200,000
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 N/A	1 and 2.	Amount
		-
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0 • Form <b>990-PF</b> (2013)
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6

196,388.

6 Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

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

F WILLIAM BECKWITH CHARITABLE FOUNDATION 42-1448419 Form 990-PF (2013) Page 9 Part XIII Undistributed Income (see instructions) (a) (b) (c) (d) Years prior to 2012 2012 2013 Corpus Distributable amount for 2013 from Part XI, 204,289. line 7 2 Undistributed income, if any, as of the end of 2013 70,522. a Enter amount for 2012 only b Total for prior years: 0 3 Excess distributions carryover, if any, to 2013: a From 2008 **b** From 2009 c From 2010 d From 2011 e From 2012 0 f Total of lines 3a through e 4 Qualifying distributions for 2013 from 200,000. Part XII, line 4: ► \$\_ 70,522 a Applied to 2012, but not more than line 2a b Applied to undistributed income of prior 0 years (Election required - see instructions) c Treated as distributions out of corpus 0 (Election required - see instructions) 129,478. d Applied to 2013 distributable amount 0 e Remaining amount distributed out of corpus 0. 0 . Excess distributions carryover applied to 2013 (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: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 0 b Prior years' undistributed income. Subtract 0. line 4b from line 2b 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 0

assessed d Subtract line 6c from line 6b. Taxable amount - see instructions

e Undistributed income for 2012. Subtract line 4a from line 2a. Taxable amount - see instr.

f Undistributed income for 2013. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2014

7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)

8 Excess distributions carryover from 2008 not applied on line 5 or line 7

Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a

10 Analysis	of line 9:
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a Excess from 2009

b Excess from 2010

c Excess from 2011

d Excess from 2012

	е	Excess	from	201
--	---	--------	------	-----

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74,811.

0

0

0

0.

0.

			<u> FOUNDATIO</u>		48419 Page 10
Part XIV   Private Operating Fo	oundations (see ins	structions and Part V	I-A, question 9)	N/A	
1 a If the foundation has received a ruling or	determination letter that	it is a private operating			
foundation, and the ruling is effective for	2013, enter the date of t	he ruling	▶ └		
<b>b</b> Check box to indicate whether the found	ation is a private operatir	g foundation described		4942(j)(3) or4	942())(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>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.	1				
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon:		}			
<ul><li>a "Assets" alternative test - enter:</li><li>(1) Value of all assets</li></ul>					
` '					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)	<u> </u>				
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 Info	rmation (Comple	ete this part only	if the foundation	n had \$5,000 or m	nore in assets
at any time during t					
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh			ntributions received by th	e foundation before the cl	lose of any tax
year (but only if they have contributed r	nore than \$5,000). (See	section 507(d)(2).)			
F. WILLIAM BECKWITH					
b List any managers of the foundation who other entity) of which the foundation ha			n (or an equally large port	tion of the ownership of a	partnership or
NONE		-			
2 Information Regarding Contribut	ion, Grant, Gift, Loan	ı, Scholarship, etc., I	Programs:		
Check here 🕨 🔲 if the foundation of					
the foundation makes gifts, grants, etc.	(see instructions) to ind	ividuals or organizations	under other conditions,	complete items 2a, b, c, a	nd d.
a The name, address, and telephone num			olications should be addr	essed:	
F. WILLIAM BECKWITH,	515-432-93	164			
P O BOX 70, BOONE, I	A 50036				
<b>b</b> The form in which applications should	be submitted and inform	ation and materials they	should include:		
LETTER FORM - INCLUI	DE DETAILS (	OF REQUEST			<del> </del>
c Any submission deadlines:					
NONE	le queb de by decerent	nal areae inheritable fold	e kinde of inclinitions of	other factore	
d Any restrictions or limitations on award NONE	is, such as by geographic	uai ai eas, chantadie field	s, หมอร บา การแบบเอกร, 01	other factors.	
HOME					
222804 40 40 42					Form <b>990-PF</b> (2013

- altito   cappionistically internation		<del></del>		
3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment	<del></del>	
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
IOWA GROCERS EDUCATION FOUNDATION -	NONE	501(C)(3)	SCHOLARSHIPS	
SCHOLARSHIP FUND	NONE	501(0/(3/	Benonatoniro	
2540 106TH STREET, SUITE 102				
DES MOINES, IA 50322				200,000,
				_
Total			<b>▶</b> 3a	200 000
b Approved for future payment				
NOVE				
NONE				
		-	-	
			<u> </u>	-
Total			<b>_</b>	

Part XVI-A	Analysis of	Income-Producing	<b>Activities</b>

Unrelate	d business income		ded by section 512, 513, or 514	(e)	
(a)	(b)	(C) Exclu-	(d)	Related or exempt	
Code	Amount	code	Amount	function income	
				· · · · · · · · · · · · · · · · · · ·	
, i					
	_				
				· · · · · · · · · · · · · · · · · · ·	
		14	156.		
	_	14	94,880.		
		ļ			
		18	298,485.		
_					
1					
		0.	393,521.		
•			13	393,52	
	(a) Business code	Business code  Amount	Business code  (b) Exclusion code  14 14 18	(a) Business code Amount Exclusion code Amount	

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

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).
<del>-                                    </del>	

323621 10-10-13 Form 990-PF (2013)

Pa	rt XVII			sters To a	nd Transac	ctions a	nd Relations	hips With Nonch	aritable	•	
	5	Exempt Organ		f the fellows				a= 501/a) of		Yes	No
1		rganization directly or indir						on 50 I(c) of		163	140
		(other than section 501(c)				iticai organi	zations?			. 1	
а		from the reporting founda	ation to a noncharitat	ole exempt org	janization of:				4-(4)		v
	(1) Cash								1a(1)		X
	(2) Othe								1a(2)		
D		nsactions:							45.44		v
	• /	s of assets to a noncharita	• •						1b(1)		X
		hases of assets from a no		rganization					1b(2)		X
		al of facilities, equipment,							1b(3)		-A
		nbursement arrangements	-						1b(4)	- '	<u>~</u>
		ns or Ioan guarantees							1b(5)		- <del>\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \</del>
	٠,	ormance of services or me	·	=					1b(6)		X X X X
	_	of facilities, equipment, ma	-			abould oly	usus show the four r	nortest value of the good	1c	L	
a		swer to any of the above is es given by the reporting fo								ocio,	
		d) the value of the goods,			or icss than ian	illai ket valu	c in any transaction	or snaring arrangement	, 3110W III		
(a):	ine no	(b) Amount involved	<del></del>		exempt organiz	ation	(d) Description	of transfers, transactions, a	nd sharing ar	rangeme	ents
(4/-	110 110	(D) Timodile involved	(6) 114.115 61	N/A	onompt or game		(5) 2000.15110.				
				11/17							
		<u> </u>									
										-	
	<del>-  </del> -		<del>                                     </del>	_			<del>-</del>				
									<del> </del>	-	
		****				•					
					···						
			1						-		
		· · · · · · ·									
		·····									
			<u> </u>								
2a	Is the for	ındatıon directly or indirec	tly affiliated with, or r	elated to, one	or more tax-exe	mot organiz	zations described				
		n 501(c) of the Code (othe	-						Yes	X	No
b		complete the following sch	` <i>'</i>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
		(a) Name of org			(b) Type of org	ganization		(c) Description of relation	nship		
		N/A		****							
				_							
		penalties of perjury, I declare							May the IRS	discuss	this
	gn   👢	belief, it is true, correct, and cor	mplete Deglaration of pro	eparer (other that	taxpayer) is based	on all inform	nation of which prepare	r nas any knowledge	return with the shown below	ne prepa	rer
He	ere	Y. Tilli	Zarchi	vitti	- X/0	123/P	PRESII	DENT	X Yes		No
	Sig	nature of officer or trustee	3		Date		Title				
		Print/Type preparer's na	ame	Preparer's si	gnature		Date	Check If PTI	N	-	
_		RONALD L.	HINTZ,				, , , ,	self- employed			
Pa		CPA			L. HIN	TZ,	10/21/14		01060		<u> </u>
	eparer	T   T   T   T   T   T   T   T   T   T	FTONLARSC	NALLEN	LLP		,	Firm's EIN ► 41-	07467	749	
Us	e Only										
		Firm's address ► 27								_	
		WE	EST DES MO	INES ,	IA 502	<u>66-14</u>	11	Phone no. 515-			
									Form 99	0-PF	(2013)

## 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

**Employer identification number** 

F	WILLIAM BECKWITH CHARITABLE FOUNDATION	42-1448419
Organization type (check	one):	
Filers of:	Section:	
Form 9 <b>90</b> or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> 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	
Note. Only a section 501(c	c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ule. See instructions.
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in m	noney or property) from any one
contributor. Com	plete Parts I and II	
Special Rules		
509(a)(1) and 170	I (c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regolo(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the in (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.	
total contribution	I(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one controls of more than \$1,000 for use exclusively for religious, chantable, scientific, literary, or eductive to children or animals. Complete Parts I, II, and III.	
contributions for If this box is chec purpose. Do not	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributes exclusively for religious, charitable, etc., purposes, but these contributions did not tocked, enter here the total contributions that were received during the year for an exclusive complete any of the parts unless the <b>General Rule</b> applies to this organization because ble, etc., contributions of \$5,000 or more during the year	otal to more than \$1,000. ely religious, charitable, etc.,
but it <b>must</b> answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedule on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Feet 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

## F WILLIAM BECKWITH CHARITABLE FOUNDATION

42-1448419

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.
	Outlined to a lace instructions, use dublicate copies of Fart 11 additional space is necded.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	F WILLIAM BECKWITH  1502 220TH STREET  BOONE, IA 50036	\$ 299,597.	Person X Payroll
(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 Payroli 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 Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Occash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

#### F WILLIAM BECKWITH CHARITABLE FOUNDATION

42-1448419

Part II	Noncash Property (see instructions) Use duplicate copies of Par	t 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
		<b>\$</b>	
(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
		<b>*</b>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Employer identification number

WILLI.	AM BECKWITH CHARITABLE	FOUNDATION	/7\ /8\ or /10\ organization	42-1448419					
irt III	Exclusively religious, charitable, etc., individu year. Complete columns (a) through (e) and the f	ollowing line entry. For organization	ns completing Part III, enter	is that total more than \$1,000 for th					
	the total of exclusively religious, charitable, etc., or	contributions of \$1,000 or less for	the year. (Enter this information once )	, <b>&gt;</b> \$					
	Use duplicate copies of Part III if additional s	space is needed							
No. om	(h) Durmon of sift	(a) Llac of gift	(d) Descri	ription of how gift is held					
rt I	(b) Purpose of gift	(c) Use of gift	(d) Desci	iption of now girt is neid					
				-					
_   -									
-			<del></del>   <del></del>						
		(e) Transfer of gift		<u> </u>					
		(e) transier or giri	•						
		710 . 4	Dalatianahin of tax						
-	Transferee's name, address, and	nelationship of trai	nsferor to transferee						
-	<del> </del>	·							
-	<del></del>								
-	<u> </u>		····						
			<del> </del>						
No.	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held					
art I	(b) . d. peee e. g	(0,000 0.3	(-,						
_				<u> </u>					
_		<u>.                                    </u>							
_									
		<u> </u>							
	(e) Transfer of gift								
L	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee						
	· · · · · · · · · · · · · · · · · · ·								
] -									
) No.			(a) D	otoston of house side in hold					
om art I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held					
-									
-				<del></del>					
-									
		(e) Transfer of gif	t						
		(0, 112.10101 01 3.1	•						
	Transferee's name, address, and	71P + 4	Relationship of tra	nsferor to transferee					
	Transferee 3 mame, ada, 650, and								
-									
-	<del></del>		<del></del>	<del>-</del>					
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) No.									
No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held					
art i									
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-									
-				· · · · · · · · · · · · · · · · · · ·					
$\vdash$			<u> </u>						
		(e) Transfer of git	τ						
	Transferee's name, address, and	I ZIP + 4	Relationship of tra	nsferor to transferee					
_			. <u>-</u>						
-			-						

FORM 990-PF INTER	REST ON SAVI	NGS AND T	MPORARY	CASH I	NVESTMENTS	STATEMENT	1
SOURCE		REV	A) ENUE BOOKS		(B) NVESTMENT NCOME	(C) ADJUSTED NET INCOM	E
PERSHING, LLC			156.		156.		
TOTAL TO PART I,	LINE 3		156.		156.		
FORM 990-PF	DIVIDEN	S AND INT	EREST FR	OM SECU	RITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPITA GAINS DIVIDES	S R	(A) EVENUE R BOOKS	(B) NET INVES MENT INCO		
MERRILL LYNCH MERRILL LYNCH PERSHING, LLC PERSHING, LLC	8,037 11,201 86,843 70,030	l. 11,: 3.	0. 201. 0. 030.	86,843	١.	0.	
TO PART I, LINE 4	176,111	81,	231.	94,880	94,88	80.	
FORM 990-PF		ACCOUN	ring fee	is		STATEMENT	3
DESCRIPTION	<del>-</del>	(A) EXPENSES PER BOOK	NET I	B) NVEST- INCOME	(C) ADJUSTEI NET INCOM		
ACCOUNTING FEES	_	2,62	5.	2,625.			0.
TO FORM 990-PF, P	- G 1, LN 16B	2,62		2,625.	·		0.

FORM 990-PF C	THER PROFES	SIONAL FEES		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		
INVESTMENT FEES	28,617.	28,617.			0.
TO FORM 990-PF, PG 1, LN 16C	28,617.	28,617.			0.
FORM 990-PF	TAX	ES		STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		
FOREIGN TAX	1,031.	1,031.			0.
TO FORM 990-PF, PG 1, LN 18	1,031.	1,031.			0.
FORM 990-PF	OTHER INV	ESTMENTS		STATEMENT	6
DESCRIPTION		LUATION ETHOD BO	OK VALUE	FAIR MARKE'	r
PRINCIPAL PRINCIPAL MERRILL LYNCH		COST COST COST	3,399,769. 2,491. 523,697.	3,777,7, 2,4; 663,3	21.
TOTAL TO FORM 990-PF, PART I	I, LINE 13		3,925,957.	4,443,5	25.
FORM 990-PF IN	FEREST AND P	ENALTIES		STATEMENT	7
TAX DUE FROM FORM 990-PF, P. LATE PAYMENT INTEREST LATE PAYMENT PENALTY	ART VI				66. 1 <b>4</b> . 29.
TOTAL AMOUNT DUE				1,0	09.

FORM 990-PF	LA	LATE PAYMENT PENALTY				EMENT 8
DESCRIPTION	DATI	E AMOUN	IT BALA	NCE	MONTHS	PENALTY
TAX DUE DATE FILED		5/15/14 966. 0/31/14		966. 966.		29.
TOTAL LATE PAYMENT PENA	LTY					29.
FORM 990-PF	LA'	TE PAYMENT	NTEREST		STAT	PEMENT 9
DESCRIPTION	DATE	AMOUNT	BALANCE	RATI	E DAYS	INTEREST
<del>_</del>	5/15/14 0/31/14	966.	966		00 169	14.
TOTAL LATE PAYMENT INTE	REST					14.

Form	8868 (Rev. 1-2014)						Page 2	
	ou are filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II and check this	box			X	
	Only complete Part II if you have already been granted an a				 3868.			
	ou are filing for an Automatic 3-Month Extension, complete							
Par				al (no co	opie	s needed).		
			<u> </u>			mber, see ins	tructions	
Туре	or Name of exempt organization or other filer, see instru-	ctions		•		tification num		
print		,			(,			
File by	THE TAX DESCRIPTION OF A PERSON		42	2-144843	L9			
due da			<del></del>	Social se		number (SSN		
filing yo return	1 FAN ANADER CORPERO				,		•	
instruct		reign add	ress, see instructions.					
	BOONE, IA 50036	J	,					
Enter	the Return code for the return that this application is for (file	a separa	te application for each return)				0 4	
			,					
Appli	cation	Return	Application				Return	
Is Fo		Code	Is For				Code	
	990 or Form 990-EZ	01						
Form	990-BL	02	Form 1041-A				08	
Form	4720 (individual)	03	Form 4720 (other than individual)	•			09	
Form	Form 990-PF 04 Form 5227						10	
Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069								
Form	990-T (trust other than above)	06	Form 8870				12	
STO	P! Do not complete Part II if you were not already granted	l an auton	natic 3-month extension on a previ	ously file	d Fo	rm 8868.		
	F. WILLIAM BECI	KWITH						
• Th	ne books are in the care of PO BOX 70 - BO	ONE,	IA 50036				_	
Te	elephone No. > 515-432-9164	,	Fax No. ▶					
• If t	the organization does not have an office or place of business	s in the Ur	nited States, check this box			<u></u> ▶		
• If t	this is for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN) If	this is fo	r the	whole group,	check this	
box	. If it is for part of the group, check this box	and atta	ich a list with the names and EINs of	all memb	ers th	ne extension i	s for.	
4	I request an additional 3-month extension of time until	NOVEM	BER 15, 2014					
5	For calendar year $2013$ , or other tax year beginning		, and ending	J				
6	if the tax year entered in line 5 is for less than 12 months, c	heck reas	on· Initial return	🗌 Fınal r	eturn	I		
	Change in accounting period							
7	State in detail why you need the extension							
	ADDITIONAL TIME IS NECESSARY	ro ga'	THER INFORMATION IN	ORD	ER	TO FIL	E A	
	COMPLETED 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					
	nonrefundable credits. See instructions.			8a	\$		<u>1,500.</u>	
b	If this application is for Forms 990-PF, 990-T, 4720, or 6069	, enter an	y refundable credits and estimated					
	tax payments made Include any prior year overpayment al	lowed as a	a credit and any amount paid	ļ				
	previously with Form 8868.			8b_	\$		<u> 2,646.</u>	
С	Balance due. Subtract line 8b from line 8a. Include your pa	-	th this form, if required, by using	- [			_	
	EFTPS (Electronic Federal Tax Payment System). See instru				\$		0.	
	<b>G</b>		st be completed for Part II o	-				
Under	r penalties of perjury, I declare that I have examined this form, includue, correct, and complete, and that I am authorized to prepare this fo	orm.	panying schedules and statements, and to	the best o	of my l	knowledge and	belief,	
Signa	ture ▶ Title ▶	CPA		Date				
						Form 9969 (F	2014)	

,