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Form '990-PF Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

For	caler	dar year 2013 or tax year beginning		, and ending		
Na	me of	foundation			A Employer identification	number
A	NN	SMELTZER CHARITABLE TR	UST		42-6586947	,
		nd street (or P O box number if mail is not delivered to street		Room/suite	B Telephone number	=-
F	0	BOX 791			515-574-56	44
Cıt	y or to	own, state or province, country, and ZIP or foreign p	ostal code	··	C if exemption application is p	
_F	OR	T DODGE, IA 50501				•
G	Check	all that apply. Initial return	Initial return of a fo	ormer public charity	D 1 Foreign organizations	s, check here 🕨 🗀
		Final return	Amended return			
		Address change	Name change		2 Foreign organizations me check here and attach co	eeting the 85% test, emputation
H_(Check	type of organization: \mathbf{X} Section 501(c)(3) ex	cempt private foundation		E If private foundation sta	tus was terminated
<u>L</u>			Other taxable private founda		under section 507(b)(1)	(A), check here
		arket value of all assets at end of year J Accounti	-	X Accrual	F If the foundation is in a	
			ther (specify)		under section 507(b)(1)	(B), check here 🕨 📖
	\$	9,288,075. (Part I, colu	mn (d) must be on cash l	basis)		T
P	art I	(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	·- ·	- · · · · · · · · · · · · · · · · · · ·		,
	2	Check X if the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	806.	806.	806.	STATEMENT 1
	4	Dividends and interest from securities				
	5a	Gross rents	2,769.	2,769.	2,769.	STATEMENT 2
	b	Net rental income or (loss) 2,769.				
a	6a	Net gain or (loss) from sale of assets not on line 10				
ğ	b	Gross sales price for all assets on line 6a				
Revenue	7	Capital gain net income (from Part IV, line 2)		0.		
ш	8	Net short-term-capital gain			0.	
	9	Income modification ECEIVED Gross sales less returns				
	10a	and allowarices		· · · · · · · · · · · · · · · · · · ·		
	b	Less Cost orgdods sold G				
	I		505 005		505.005	
	11	Other income	696,206.	0.		STATEMENT 3
	12	Total Add lines ①@面图[1] [1]	699,781.	3,575.	699,781.	
	13	Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
	14	Other employee salaries and wages		****		
S	15	Pension plans, employee benefits				
ŠL	IDA	Legal fees Accounting fees STMT 4	12,985.	0.	12,985.	0.
SOPERING BLANDINS PRIVE EXPENSES	,	Other professional fees	12,303.		14,303.	<u> </u>
2	17	Interest				
ciá	18	Taxes STMT 5	7,753.	72.	7,681.	0.
e i	19	Depreciation and depletion	48,221.	0.	48,221.	
宝	20	Occupancy			•	
₹	21	Travel, conferences, and meetings				
G	22	Printing and publications				
變	23	Other expenses STMT 6	508,201.	0.	507,661.	0.
E.	24	Total operating and administrative		•		
4 0		expenses. Add lines 13 through 23	577,160. 263,793.	72.	576,548.	0.
Ü		Contributions, gifts, grants paid	263,793.			263,793.
	26	Total expenses and disbursements				
	_	Add lines 24 and 25	840,953.	72.	576,548.	263,793.
	27	Subtract line 26 from line 12:			,	
	l	Excess of revenue over expenses and disbursements	<141,172.			-
	l	Net investment income (if negative, enter -0-)		3,503.	100 000	
	C	Adjusted net income (if negative, enter -0-)	<u> </u>		123,233.	<u>L</u>

1 OIIII J	90-PF (2013) ANN SMELIZER CHARITABLE	TRUST		0300947 Page 2
Part	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>
	- Commission of the or year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
,	Cash - non-interest-bearing	386,601.	204,739.	<u>204,739.</u>
2	Savings and temporary cash investments		100,000.	100,000.
3	Accounts receivable >	,		• , =
	Less: allowance for doubtful accounts ▶			•
4	Pledges receivable ►			
1	Less: allowance for doubtful accounts ▶			
5				
6				
"	disqualified persons			
,	· · · · · .			
'	Other notes and loans receivable			
	Less: allowance for doubtful accounts ▶	216 517	221 740	221 540
क ∣	Inventories for sale or use	316,517.	331,740.	331,740.
8 9	Prepaid expenses and deferred charges	152,669.	69,680.	69,680.
108	Investments - U.S. and state government obligations	_		
ļt	nvestments - corporate stock			
(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 ► 9,067,246.			
' '	Less accumulated depreciation 485,330.	8,565,900.	8,581,916.	8,581,916.
15	Other assets (describe)	0,303,300.	0,301,310.	0,301,310.
l l				
16	Total assets (to be completed by all filers - see the	0 401 607	0 200 075	0 200 075
	instructions. Also, see page 1, item 1)	9,421,687.	9,288,075.	9,288,075.
1	Accounts payable and accrued expenses	65,974.	73,534.	
18	Grants payable			
ຜູ 19	Deferred revenue			
Liabilities 51 50 51	Loans from officers, directors, trustees, and other disqualified persons			
.뎚 21	Mortgages and other notes payable		<u>-,</u>	
<u>ا ا</u> 22	Other liabilities (describe >)			
23	Total liabilities (add lines 17 through 22)	65,974.	73,534.	
	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 26 and lines 30 and 31.			
S 24	Unrestricted	9,355,713.	9,214,541.	
Net Assets or Fund Balance 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Temporarily restricted	3,333,713.	J, 214, 341.	
3 3		_		
<u>m</u> 26	·			
, 5	Foundations that do not follow SFAS 117, check here			
<u>ا</u> ا	and complete lines 27 through 31			
ğ 27	Capital stock, trust principal, or current funds			
စ္တ 28	Paid-in or capital surplus, or land, bldg., and equipment fund			
₹ 29	Retained earnings, accumulated income, endowment, or other funds			
≥ 30	Total net assets or fund balances	9,355,713.	9,214,541.	
31	Total liabilities and net assets/fund balances	9,421,687.	9,288,075.	
Dank	III Analysis of Changes in Net Assets or Fund Ba	lances		
Part	Analysis of Changes in Net Assets of Fund Da	lialices		
1 Tota	I net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
	st agree with end-of-year figure reported on prior year's return)] 1	9,355,713.
	r amount from Part I, line 27a		2	<141,172.>
	er increases not included in line 2 (itemize)		3	0.
	lines 1, 2, and 3		4	9,214,541.
	reases not included in line 2 (itemize)			9,214,541.
		ump /h) line 20	5	9,214,541.
6 Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umm (u), inie 30	6	9,414,541.

		d(s) of property sold (e.g. r common stock, 200 shs			(b) H P - D -	ow acqui Purchas Donatioi	red e n	(c) Date (mo., d	acquired ay, yr.)	(d) Date sold (mo., day, yr.)
1a										
<u>b</u> <u>N</u> (ONE									
C					<u> </u>					
<u>d</u>			_		-					
<u>e</u>					Ц.,					
(e) Gross sales price		epreciation allowed (or allowable)		st or other basis expense of sale					ain or (loss) s (f) minus (
<u>a</u> b					\dashv					
C					-+					
d					_				•	
е										
Complete only for assets show	ıng gain in co	olumn (h) and owned by t	he foundation	on 12/31/69			m	Gains (C	ol (h) gain	minus
(i) F.M.V. as of 12/31/69	(j)	Adjusted basis as of 12/31/69	(k) E>	cess of col. (i)				(k), but r	ot less than (from col. (1 -0-) or
a										
b			·	-						
C										
d _.										
<u>e</u>	<u> </u>									
Papital gain net income or (net e	capital loss)	if gain, also enter If (loss), enter -0-	ın Part I, line ın Part I, line	7 7	}	2				
Net short-term capital gain or (le	nss) as define	•			Í					
If gain, also enter in Part I, line 8			u (0).)					
If (loss), enter -0- in Part I, line	8	ction 4940(e) for			<u> </u>	3				
section 4940(d)(2) applies, leave vas the foundation liable for the se "Yes," the foundation does not qu	ction 4942 ta alify under se	ix on the distributable amection 4940(e). Do not co	mplete this pa	ırt						Yes X No
Enter the appropriate amount in	each columi	n for each year; see the in	structions be	fore making any e	ntries.			,		733
Base period years Calendar year (or tax year beginn	ning in)	(b) Adjusted qualifying dist	ributions	Net value of no	(c) ncharit	able-use	assets		Dıstrıb (col (b) dıvı	(d) ution ratio ided by col (c))
2012			9,855.			174,				1.54504
2011			4,769.			184,	<u>696</u> ,			1.10868
2010			4,691.			<u>221,</u>	328	·		.74410
2009			0,133.				108			.36384
2008		10	7,840.			<u>393,</u>	491	<u> </u>		.27406
Total of line 1, column (d)								2		4.03574
Average distribution ratio for the the foundation has been in exist			n line 2 by 5,	or by the number	of year	S		3		.80714
Enter the net value of noncharita	able-use asse	ts for 2013 from Part X. I	ine 5					4		340,485
		,								
Multiply line 4 by line 3								5		274,822
Enter 1% of net investment inco	me (1% of Pa	art I, line 27b)						6	- 	35
Add lines 5 and 6								7		274,857
Enter qualifying distributions fro	•							8		263,793
If line 8 is equal to or greater that See the Part VI instructions.	an line 7, ched	ck the box in Part VI, line	1b, and comp	lete that part usin	g a 1%	tax rate.				

	n 990-PF (2013) ANN SMELTZER CHARITABLE TRUST art VI', Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	<u>42-</u> 948 -	6586 • see i	<u>947</u> nstrเ	ıctio	Page 4 ns)
1a	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)	٠ ،				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1				<u>70.</u>
	of Part I, line 27b	í				
	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-)	2				<u>0.</u>
3	Add lines 1 and 2	3				70.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5				<u>70.</u>
6	Credits/Payments:					
а	2013 estimated tax payments and 2012 overpayment credited to 2013					
b	Exempt foreign organizations - tax withheld at source					
C	Tax paid with application for extension of time to file (Form 8868)	{				
d	Backup withholding erroneously withheld 6d 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 attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				70.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11	Enter the amount of line 10 to be: Credited to 2014 estimated tax ▶ Refunded ▶	11				
Pa	rt 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 i	n			Yes	No
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)	7		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	d or				
	distributed by the foundation in connection with the activities					
C	Did the foundation file Form 1120-POL for this year?			1c		х
d	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. ▶ \$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ► \$ 0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		х
	If "Yes," attach a detailed description of the activities					-=-
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or					
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		,	5		Х
•	If "Yes," attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
·	By language in the governing instrument, or					
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state 	law				
	remain in the governing instrument?	ICAA		6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV			7	X	
•	bid the foundation have at least \$5,000 in assets at any time during the year in tres, complete Part it, cor (c), and Part XV				Λ	
g a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
υŒ	IA					
Ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
U				O.L	v	
0	of each state as required by General Instruction G? If "No," attach explanation	dor		8b	X	
3	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calen	ual		_	v	
10	year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV			9	<u>X</u>	<u>v</u>
įŲ	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		X

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Part VII-B Statements Regarding Activities for Which	Form 4720 May Be i	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1). Carry on propaganda, or otherwise attempt to influence legislation (sectio	, ,,		es 🗶 No 📙	
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indir	ectly,		
any voter registration drive?			es 🗓 No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y	es 🗶 No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		Y	es 🗶 No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or	for		
the prevention of cruelty to children or animals?		Y	es 🗶 No	1 1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described	in Regulations		1 1
section 53.4945 or in a current notice regarding disaster assistance (see instru	ictions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	nere			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it mainta	ined		1 1
expenditure responsibility for the grant?	N	1/A 🔲 Y	es 🔲 No	
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	pay premiums on			
a personal benefit contract?	, , ,		es 🗓 No	1 1
b Did the foundation, during the year, pay premiums, directly or indirectly, on a g	personal benefit contract?			6b X
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	□ v	es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu		,		7b
Part VIII Information About Officers, Directors, Trust		nagers. Highly		
Paid Employees, and Contractors	,		•	
1 List all officers, directors, trustees, foundation managers and their	compensation.			,
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
	to position	Cinci o j	compensation	unowanious_
SEE STATEMENT 7		0.	0.	0.
V 2111 2111 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
			}	
		-		
2 Compensation of five highest-paid employees (other than those inc	luded on line 1\ If name	onter WIONE II		
Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	(a) Evança
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
270277	devoted to position		compensation	allowances
NONE				
				
			1	
	-			
			<u> </u>	
Total number of other employees paid over \$50,000				0
			Form 9	990-PF (2013)

323551 10-10-13

Total, Add lines 1 through 3

P	Minimum Investment Return (All domestic foundations mi	ust complete this part. Forei	gn foundations, see	instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable	, etc., purposes:	-	
а	Average monthly fair market value of securities	, , , , , ,	1a	0.
b	Average of monthly cash balances		1b	0. 345,670.
C	Fair market value of all other assets		1c	
d	Total (add lines 1a, b, and c)		1d	345,670.
е	Reduction claimed for blockage or other factors reported on lines 1a and			
		1e	0.	
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	345,670.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount,	see instructions)	4	5,185.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on		5	340,485.
6	Minimum investment return Enter 5% of line 5	•	6	17,024.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and	d (j)(5) private operating founda	tions and certain	
	foreign organizations check here > X and do not complete this part.)			
1	Minimum investment return from Part X, line 6		1	
2a	Tax on investment income for 2013 from Part VI, line 5	2a		
b	Income tax for 2013. (This does not include the tax from Part VI.)	2b		
C	Add lines 2a and 2b		2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	
4	Recoveries of amounts treated as qualifying distributions		4	
5	Add lines 3 and 4		5	
6	Deduction from distributable amount (see instructions)		6	•
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part X	(III, line 1	7	
Р	Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpo	oses:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		1a	263,793.
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	e, 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	d Part XIII, line 4	4	263,793.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net invest	tment		
	income. Enter 1% of Part I, line 27b		5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4		6	263,793.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years wh	en calculating whether the foun	dation qualifies for the	section

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (s	see instructions)	N/A		
	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI, line 7			1	
2 Undistributed income, if any, as of the end of 2013				
a Enter amount for 2012 only				
b Total for prior years:				
3 Excess distributions carryover, if any, to 2013:				
a From 2008				
b From 2009				
c From 2010				
d From 2011				
e From 2012				
f Total of lines 3a through e				
4 Qualifying distributions for 2013 from				
Part XII, line 4: ► \$!			
a Applied to 2012, but not more than line 2a				
b Applied to undistributed income of prior				
years (Election required - see instructions)				
c Treated as distributions out of corpus	<u></u>			
(Election required - see instructions)				
d Applied to 2013 distributable amount				
e Remaining amount distributed out of corpus	-,		<u> </u>	
5 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				
b Prior years' undistributed income. Subtract				
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				
assessed		<u> </u>		-
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	i			
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				
9 Excess distributions carryover to 2014				
Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9:				
a Excess from 2009				
b Excess from 2010				1
c Excess from 2011]
d Excess from 2012				
e Excess from 2013				

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

c Any submission deadlines:

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

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ed by section 512, 513, or 514	(e)	
1 Program service revenue;	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income	
			code		- Idilotton moonid	
	1 1	_				
С			-+			
· — — — — — — — — — — — — — — — — — — —		.	+ +			
d	i I		+ +			
f	- 		+++			
g Fees and contracts from government agencies	_		+			
2 Membership dues and assessments			 -			
3 Interest on savings and temporary cash investments			14	806.		
4 Dividends and interest from securities						
5 Net rental income or (loss) from real estate:				, -		
a Debt-financed property			1 1			
b Not debt-financed property					2,769.	
6 Net rental income or (loss) from personal property						
7 Other investment income						
8 Gain or (loss) from sales of assets other					-	
than inventory						
9 Net income or (loss) from special events					· · · · · · · · · · · · · · · · · · ·	
10 Gross profit or (loss) from sales of inventory		<u>.</u>				
11 Other revenue:				- '	· · ·	
a FARM INCOME					693,368.	
b HOUSE TOURS					2,838.	
C						
d						
e					. <u></u> ,	
12 Subtotal. Add columns (b), (d), and (e)		C).	806.	698,975.	
13 Total Add line 12, columns (b), (d), and (e)				13	699,781.	
(See worksheet in line 13 instructions to verify calculations	1					

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).
11	THE OPERATIONAL PLAN OF THE ANN SMELTZER CHARITABLE TRUST, AS STATED IN PART THROUGH COURT DECREE: THAT ANN SMELTZER INTENDED THAT HER HOME
	IN PART THROUGH COURT DECREE; THAT ANN SMELTZER INTENDED THAT HER HOME BE USED FOR SYMPOSIA, SEMINARS, INSTITUTES, RECEPTIONS, RETREATS,
	LECTURES, TOURS, RECITALS, WORKSHOPS, EXHIBITS, AND PUBLIC MEETINGS,
	RELATING TO THE ENVIRONMENT, ECOLOGY, SOCIAL JUSTICE, LAND CONSERVATIONS, ART, HISTORY, LITERATURE, MUSIC AND EDUCATION.
	THAT IT WAS THE INTENT OF THE TESTATOR THAT THE IOWA FARMLAND AND
	RENTAL HOME BE DEVOTED TO USE BY THE TRUSTEES TO GENERATE INCOME FOR THE PURPOSE OF THE (1) IMPROVEMENTS AND MAINTENANCE OF THE HOME:
	(2) SPONSORING ASSORTED PUBLIC PROGRAMS; (3) MAKING CONTRIBUTIONS TO
	AREA CHARITIES EXEMPLIFYING THOSE INTERESTS; AND (4) PROVIDING MUSICAL OR ART SCHOLARSHIPS TO AREA STUDENTS PROFICIENT IN EITHER.
	OR ART SCHOLARSHIPS TO AREA STUDENTS PROFICIENT IN EITHER.

323621 10-10-13

Dow VV				BLE TRUST	15.1		658694/		ige 13
Part XV	Exempt Organ		nsters 10 a	and Transactions	and Relation	ships With No	ncharitabl	е	
1 Did the	organization directly or indi		v of the followin	g with any other organization	ion described in se	ction 501(c) of		Yes	No
	de (other than section 501(c		=			0			
	ers from the reporting found			- · · · -					1
(1) Ca	ish						1a(1)		x
	her assets						1a(2)		X
2.5	ransactions;						1-(-)		
(1) Sa	les of assets to a noncharita	ble exempt organiz	ation				1b(1)		х
	irchases of assets from a no						1b(2)	T	X
	ental of facilities, equipment,						1b(3)		X
(4) Re	eimbursement arrangements	,					1b(4)		Х
(5) Lo	ans or loan guarantees						1b(5)		Х
(6) Pe	rformance of services or me	mbership or fundra	aising solicitatio	ns			1b(6)	1	Х
c Sharing	g of facilities, equipment, ma	uling lists, other ass	sets, or paid em	ployees			1c		Х
d If the a	nswer to any of the above is	"Yes," complete the	e following sche	dule. Column (b) should a	lways show the fair	r market value of the g	goods, other as	sets,	
	ices given by the reporting f								
columr	(d) the value of the goods,	other assets, or ser	rvices received.						
(a) Line no	(b) Amount involved	(c) Name (of noncharitable	exempt organization	(d) Descript	ion of transfers, transaction	ons, and sharing a	rrangeme	nts
			N/A						
				- ···		·			
				,, .,					
					<u> </u>				
				<u></u>					
		<u> </u>							
	oundation directly or indirect			, -	izations described			_	7
	on 501(c) of the Code (other	•	c)(3)) or in secti	ion 5277			Yes	LX	No
b it yes,	complete the following sch		···	(h) Tune of organization	1	(a) December of se	lation also		
	(a) Name of org	anization		(b) Type of organization		(c) Description of re	lationship		
	N/A								
									
					 				
Un	der penalties of perjury, I declare	that I have examined ti	his return, including	n accompanying schedules and	statements and to the	ne hest of my knowledge			
	d belief, it is true, correct, and con						May the IRS return with th	discuss t	his er
Here	A /	7/ /	1	1 or list int	SECRE	שמגחיי	shown below	(see inst	tr)?
	ignature of officer or trustee	1104		Date	Title	TAKI	_ LAJ Yes	· L	J No
1 -	Print/Type preparer's na		Preparer's si		Date	Check If	PTIN		
	DEAN F. BA		11077	yd.(0,10)		self- employed			
Paid	CPA CPA	IVARITI.	Ma	- Dames	8/8/14	55 5p.0300	P00031	U 3 2	
Prepare		MIRBECOM	DANV T.T.	D CDA'C C	J	S Firm's EIN ► 4			
Use Onl		HOVE	יווו, באאז.	r Crn D & CC	MOODIAMI	. 🎒 FIRITI S EIN 🚩 4.	4-14048	20	
	Firm's address ▶ 82	2 באתים איז	Γ. Δ Υ ΙΕ	SIITጥፑ 400	-				
	I	RT DODGE	-			Phone no. 51	5-576-7	136	

323622 10-10-13

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to status of Amount any foundation manager Name and address (home or business) recipient or substantial contributor WEBSTER COUNTY CONSERVATION PUBLIC WELFARE 1415 NELSON AVE 11,000. FORT DODGE, IA 50501 FORT DODGE COMMUNITY SCHOOLS PUBLIC WELFARE 104 SOUTH 17TH ST FORT DODGE IA 50501 12,012. FORT DODGE HISTORICAL FOUNDATION PUBLIC WELFARE S KENYON & MUSEUM RD FORT DODGE, IA 50501 6,000. FORT DODGE PUBLIC LIBRARY PUBLIC WELFARE **424 CENTRAL AVENUE** FORT DODGE, IA 50501 6,000. FORT DODGE COMMUNITY SCHOOLS PUBLIC WELFARE ORCHESTRA 104 SOUTH 17TH ST FORT DODGE, IA 50501 3,000. LEHIGH PUBLIC LIBRARY PUBLIC WELFARE 241 ELM ST LEHIGH IA 50557 1,000. GRINNELL COLLEGE PUBLIC WELFARE GRINNELL COLLEGE GRINNELL IA 50112 20,000. HARMONY BRIGADE CHORUS PUBLIC WELFARE PO BOX 302 FORT DODGE IA 50501 6,032. HAWKEYE COMMUNITY THEATRE PUBLIC WELFARE 521 N 12TH ST FORT DODGE, IA 50501 17,890. IOWA CENTRAL COMMUNITY COLLEGE PUBLIC WELFARE FOUNDATION 1 TRITON CIR FORT DODGE IA 50501 34,500. 228 634 Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation show any relationship to Purpose of grant or Amount status of any foundation manager contribution Name and address (home or business) or substantial contributor recipient LIZARD CREEK BLUES SOCIETY PUBLIC WELFARE PO BOX 952 FORT DODGE IA 50501 5,000. SITA FOUNDATION PUBLIC WELFARE 19384 CHABLIS COURT 1,500. SARATOGA, CA 95070 MISCELLANEOUS PUBLIC WELFARE PO BOX 791 FORT DODGE IA 50501 38,790. WEBSTER COUNTY 4H FOUNDATION PUBLIC WELFARE 2150 BEARDSHEAR HALL AMES, IA 50501 250. WEBSTER COUNTY EXTENSION & OUTREACH PUBLIC WELFARE 217 SOUTH 25TH ST FORT DODGE, IA 50501 11,000. FORT DODGE CHOIR BOOSTERS PUBLIC WELFARE PO BOX 1492 FORT DODGE, IA 50501 5,000. FORT DODGE CHORAL SOCIETY PUBLIC WELFARE 824 N 8TH ST FORT DODGE, IA 50501 4,000. FORT DODGE SENIOR HIGH BAND PUBLIC WELFARE 819 N 25TH ST FORT DODGE, IA 50501 5,000, FRIENDS OF THE LIBRARY PUBLIC WELFARE 424 CENTRAL AVENUE FORT DODGE IA 50501 1,000, GOWRIE AREA ARTS COUNCIL PUBLIC WELFARE PO BOX 415 GOWRIE IA 50543 500. Total from continuation sheets

Part XV 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 any foundation manager contribution Name and address (home or business) recipient or substantial contributor PURDUE UNIVERSITY PUBLIC WELFARE 475 STADIUM MALL DR WEST LAFAYETTE IN 47907 9,360. SHELLABRATION INC. PUBLIC WELFARE PO BOX 752 FORT DODGE, IA 50501 2,500. THE POCAHONTAS FOUNDATION PUBLIC WELFARE PO BOX 212 POCAHONTAS, IA 50574 2,000, CITY OF FORT DODGE PRESERVATION COMM PUBLIC WELFARE 819 1ST AVE S FORT DODGE, IA 50501 8,000, FORT DODGE HISTORICAL FOUNDATION PUBLIC WELFARE 1 MUSEUM RD FORT DODGE, IA 50501 7,100. OAKLAND CEMETERY PUBLIC WELFARE 1600 N 15TH ST FORT DODGE, IA 50501 1,200. AFES PUBLIC WELFARE 712 N 13TH ST FORT DODGE, IA 50501 6,000, FORT DODGE NOON SERTOMA PUBLIC WELFARE 822 CENTRAL AVE STE 400 FORT DODGE, IA 50501 3,000. Total from continuation sheets

SOURCE INTEREST TOTAL TO PART I, LINE 3	(/ REVE	ENUE NE	(B) T INVESTMENT	(C) ADJUSTED
			INCOME	NET INCOME
TOTAL TO PART I, LINE 3		806.	806.	806.
		806.	806.	806.
FORM 990-PF	RENTAL IN	ICOME		STATEMENT 2
KIND AND LOCATION OF PROPERTY			ACTIVITY NUMBER	GROSS RENTAL INCOME
HOUSE - ACREAGE	-		1	2,769.
TOTAL TO FORM 990-PF, PART I,	LINE 5A			2,769.
FORM 990-PF	OTHER I	INCOME		STATEMENT 3
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	
FARM INCOME HOUSE TOURS		693,368		0. 693,368. 0. 2,838.
TOTAL TO FORM 990-PF, PART I,	LINE 11 _	696,20	5. 0	696,206.
FORM 990-PF	ACCOUNTI	ING FEES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCO		
	12,985.			
ACCOUNTING	12,300.)	0. 12,98	35. 0.

FORM 990-PF	TAX	ES	Si	STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLI PURPOSES		
PROPERTY TAXES EXCISE TAX	7,681. 72.	0. 72.	7,681.	0		
TO FORM 990-PF, PG 1, LN 18	7,753.	72.	7,681.	0		
FORM 990-PF	OTHER E	XPENSES	Sī	PATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLI PURPOSES		
FARM EXPENSES INSURANCE OFFICE SUPPLIES POSTAGE REPAIR & MAINTENANCE UTILITIES SECURITY EDUCATIONAL MISCELLANEOUS	402,719. 15,282. 226. 130. 22,336. 10,366. 6,523. 48,908. 1,711.	0. 0. 0. 0. 0. 0.	402,179. 15,282. 226. 130. 22,336. 10,366. 6,523. 48,908. 1,711.	0 0 0 0 0 0 0		
MISCELLANEOUS	1,711.	0.	1,711.			

	- LIST OF OFFICERS, DIRECTORS ES AND FOUNDATION MANAGERS			STATEMENT 7		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK			EXPENSE		
BILL GRIFFEL 1020 3RD AVE SOUTH FORT DODGE, IA 50501	PRESIDENT 0.00	0.	0.	0.		
JACK CHRISTENSEN 1661 N 30TH ST FORT DODGE, IA 50501	SECRETARY 0.00	0.	0.	0.		
JIM PATTON 106 EAST AUSTIN ROCKWELL CITY, IA 50579	MEMBER 0.00	0.	0.	0.		
DR. BOTTORFF 1743 PARAGON AVE FORT DODGE, IA 50501	MEMBER 0.00	0.	0.	0.		
DR. DREW SIEBEN 935 11TH AVE N FORT DODGE, IA 50501	MEMBER 0.00	0.	0.	0.		
STEPHEN KERSTEN 1622 13TH AVE N FORT DODGE, IA 50501	MEMBER 0.00	0.	0.	0.		
LARRY LEE 1736 WILLIAMS DRIVE FORT DODGE, IA 50501	MEMBER 0.00	0.	0.	0.		
DR. KEN ADAMS 800 KENYON RD FORT DODGE, IA 50501	MEMBER 0.00	0.	0.	0.		
BARBARA SHULTZ 27TH AVENUE NORTH FORT DODGE, IA 50501	MEMBER 0.00	0.	0.	0.		
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	0.	0.	0.		

Form 8868

(Rev January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868

OMB No 1545-1709

illeritat itove	ilde del vice	Information about 1 of in 600	o and its	ilisti uctions is at www.iis.goviion	710000.					
If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box										
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).										
		less you have already been granted a				rm 8868.				
Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation										
required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension										
of time to	file any of the form	ns listed in Part I or Part II with the exc	eption of	Form 8870, Information Return for "	Transfers /	Associated With Ce	rtaın			
Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form,										
visit www.irs gov/efile and click on e-file for Chanties & Nonprofits										
Part I	Automatic	c 3-Month Extension of Time	. Only s	ubmit original (no copies ne	eded).		_			
A corpora	tion required to file	e Form 990-T and requesting an auton	natic 6-mo	nth extension - check this box and	complete					
Part I only	,					>				
	•	ding 1120-C filers), partnerships, REM	ICs, and ti	rusts must use Form 7004 to reques	st an exten	sion of time				
to file inco	ome tax returns				Enter file	er's identifying nun	nber			
Type or	Name of exemp	t organization or other filer, see instruc	ctions		Employe	ridentification numb	oer (EIN) or			
print										
Tite by the	ANN SMEL	TZER CHARITABLE TRU	JST			42-6586947				
due date for	le by the ue date for Number, street, and room or suite no. If a P.O. box, see instructions.					Social security number (SSN)				
iling your eturn See	PO BOX 7	91								
nstructions		st office, state, and ZIP code For a fo	reign add	ress, see instructions						
	FORT DOD	GE, IA 50501								
Enter the	Return code for th	e return that this application is for (file	a separat	te application for each return)			0 4			
			, ,							
Application Return Application						Return				
s For			Code	Is For			Code			
	or Form 990-EZ		01	Form 990-T (corporation)			07			
Form 990	BL		02	Form 1041-A			80			
	orm 4720 (individual) 03 Form 4720 (other than individual)									
Form 990			04	Form 5227			10			
	T (sec 401(a) or 4		05	Form 6069			11			
Form 990-T (trust other than above) 06 Form 8870							12			
		JACK CHRISTENSE								
		of ► P O BOX 791 - F	ORT I							
=	one No ► <u>515</u>			Fax No 🕨						
	~	not have an office or place of business					ш			
		rn, enter the organization's four digit (r the whole group, c				
<u> </u>		of the group, check this box		——————————————————————————————————————		ers the extension is	for			
1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until										
	AUGUST 15		organizat	tion return for the organization name	ed above	The extension				
_	or the organization									
	X calendar year									
	tax year begin	ining	, an	a enaing		_				
0 lf 4h		in line 1 in faultage than 10 months, of		on Initial return	Fınal retur	_				
2 If th	¬ . ´	in line 1 is for less than 12 months, cl	ieck reast	on initial return	rinai retur	11				
0- 15 +6	☐ Change in accou		or 6060	anter the testatus tour less only	1	<u>-</u>				
3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any						•	0.			
nonrefundable credits. See instructions 3a \$							<u> </u>			
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and							0.			
estimated tax payments made Include any prior year overpayment allowed as a credit 3b \$										
c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions					3c) \$	0.			
	Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment									
nstruction.		mano an olocionio ionos withorawai	tangor agi	on, with this rollin 0000, see rollin 6	, 100 LU al		- payment			

Form 8868 (Rev 1-2014)

323841 12-31-13

For Privacy Act and Paperwork Reduction Act Notice, see instructions.