



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form 990-PF

## 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. By law, the IRS cannot redact the information on the form.
- Information about Form 990-PF and its instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).

2013

Open to Public Inspection

For calendar year 2013, or tax year beginning 12-01-2013, and ending 11-30-2014

Name of foundation PHYLLIS PERRY HULTON EDUCATIONAL TRUST %JAMES BOWMAN		A Employer identification number 42-6526655							
Number and street (or P O box number if mail is not delivered to street address) PO BOX 1635		B Telephone number (see instructions) (641) 691-0434							
C If exemption application is pending, check here <input checked="" type="checkbox"/>									
D 1. Foreign organizations, check here <input checked="" type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input checked="" type="checkbox"/>									
E If private foundation status was terminated under section 507(b)(1)(A), check here <input checked="" type="checkbox"/>									
F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input checked="" type="checkbox"/>									
<b>G</b> Check all that apply <table border="0"> <tr> <td><input type="checkbox"/> Initial return</td> <td><input type="checkbox"/> Initial return of a former public charity</td> </tr> <tr> <td><input type="checkbox"/> Final return</td> <td><input type="checkbox"/> Amended return</td> </tr> <tr> <td><input type="checkbox"/> Address change</td> <td><input type="checkbox"/> Name change</td> </tr> </table>		<input type="checkbox"/> Initial return	<input type="checkbox"/> Initial return of a former public charity	<input type="checkbox"/> Final return	<input type="checkbox"/> Amended return	<input type="checkbox"/> Address change	<input type="checkbox"/> Name change		
<input type="checkbox"/> Initial return	<input type="checkbox"/> Initial return of a former public charity								
<input type="checkbox"/> Final return	<input type="checkbox"/> Amended return								
<input type="checkbox"/> Address change	<input type="checkbox"/> Name change								
<b>H</b> Check type of organization <table border="0"> <tr> <td><input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation</td> </tr> <tr> <td><input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust</td> </tr> <tr> <td><input type="checkbox"/> Other taxable private foundation</td> </tr> </table>		<input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation	<input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust	<input type="checkbox"/> Other taxable private foundation					
<input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation									
<input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust									
<input type="checkbox"/> Other taxable private foundation									
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) <b>\$ 2,987,688</b>	J Accounting method <table border="0"> <tr> <td><input checked="" type="checkbox"/> Cash</td> <td><input type="checkbox"/> Accrual</td> </tr> <tr> <td><input type="checkbox"/> Other (specify) _____</td> <td></td> </tr> </table>	<input checked="" type="checkbox"/> Cash	<input type="checkbox"/> Accrual	<input type="checkbox"/> Other (specify) _____					
<input checked="" type="checkbox"/> Cash	<input type="checkbox"/> Accrual								
<input type="checkbox"/> Other (specify) _____									

<b>Part I Analysis of Revenue and Expenses</b> (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	1 Contributions, gifts, grants, etc , received (attach schedule)				
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities. . . . .	104,694	104,694		
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	49,642			
	b Gross sales price for all assets on line 6a 144,024				
	7 Capital gain net income (from Part IV, line 2) . . .		49,642		
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold . . . . .				
	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .				
	<b>12 Total.</b> Add lines 1 through 11 . . . . .	154,336	154,336		
<b>Operating and Administrative Expenses</b>	13 Compensation of officers, directors, trustees, etc	0	0		0
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule) . . . . .				
	b Accounting fees (attach schedule) . . . . .	3,050	0		0
	c Other professional fees (attach schedule) . . . . .				
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . . . .	4,277	0		0
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .				
	22 Printing and publications . . . . .	328	0		0
	23 Other expenses (attach schedule) . . . . .	291	0		0
	<b>24 Total operating and administrative expenses.</b>				
	Add lines 13 through 23 . . . . .	7,946	0		0
	25 Contributions, gifts, grants paid. . . . .	103,300			103,300
	<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	111,246	0		103,300
	<b>27 Subtract line 26 from line 12</b>				
	<b>a Excess of revenue over expenses and disbursements</b>	43,090			
	<b>b Net investment income</b> (if negative, enter -0-) . . .		154,336		
	<b>c Adjusted net income</b> (if negative, enter -0-) . . .				

	Part II Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing . . . . .		4,456	7,214	7,214
	2 Savings and temporary cash investments . . . . .		52,714	43,690	43,690
	3 Accounts receivable ►				
	Less allowance for doubtful accounts ►				
	4 Pledges receivable ►				
	Less allowance for doubtful accounts ►				
	5 Grants receivable . . . . .				
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .				
	7 Other notes and loans receivable (attach schedule) ►				
	Less allowance for doubtful accounts ►				
	8 Inventories for sale or use . . . . .				
	9 Prepaid expenses and deferred charges . . . . .				
	10a Investments—U S and state government obligations (attach schedule)				
	b Investments—corporate stock (attach schedule) . . . . .	1,210,874	1,389,318	2,859,728	
	c Investments—corporate bonds (attach schedule) . . . . .				
	11 Investments—land, buildings, and equipment basis ►				
	Less accumulated depreciation (attach schedule) ►				
	12 Investments—mortgage loans . . . . .				
	13 Investments—other (attach schedule) . . . . .	201,018	71,930	77,056	
	14 Land, buildings, and equipment basis ►				
	Less accumulated depreciation (attach schedule) ►				
	15 Other assets (describe ►) . . . . .				
	16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)		1,469,062	1,512,152	2,987,688
Liabilities	17 Accounts payable and accrued expenses . . . . .				
	18 Grants payable . . . . .				
	19 Deferred revenue . . . . .				
	20 Loans from officers, directors, trustees, and other disqualified persons				
	21 Mortgages and other notes payable (attach schedule) . . . . .				
	22 Other liabilities (describe ►) . . . . .				
	23 Total liabilities (add lines 17 through 22) . . . . .		0	0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ► <input type="checkbox"/>				
	and complete lines 24 through 26 and lines 30 and 31.				
	24 Unrestricted . . . . .				
	25 Temporarily restricted . . . . .				
	26 Permanently restricted . . . . .				
	Foundations that do not follow SFAS 117, check here ► <input checked="" type="checkbox"/>				
	and complete lines 27 through 31.				
	27 Capital stock, trust principal, or current funds . . . . .		1,469,062	1,512,152	
	28 Paid-in or capital surplus, or land, bldg , and equipment fund		0	0	
	29 Retained earnings, accumulated income, endowment, or other funds		0	0	
	30 Total net assets or fund balances (see page 17 of the instructions) . . . . .		1,469,062	1,512,152	
	31 Total liabilities and net assets/fund balances (see page 17 of the instructions) . . . . .		1,469,062	1,512,152	

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

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	1	1,469,062
2	Enter amount from Part I, line 27a . . . . .	2	43,090
3	Other increases not included in line 2 (itemize) ►	3	0
4	Add lines 1, 2, and 3 . . . . .	4	1,512,152
5	Decreases not included in line 2 (itemize) ►	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	1,512,152

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

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
<b>1 a</b>	1460SH PFIZER	P	1988-12-01	2014-05-28
<b>b</b>	375SH MONSANTO	P	1988-12-01	2014-05-25
<b>c</b>	1680SH FIRST ENERGY CO	P	2008-04-27	2014-05-30
<b>d</b>				
<b>e</b>				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
<b>a</b> 46,297		9,271	37,026	
<b>b</b> 40,750		4,159	36,591	
<b>c</b> 56,977		80,952	-23,975	
<b>d</b>				
<b>e</b>				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
<b>(i) F M V as of 12/31/69</b>	<b>(j) Adjusted basis as of 12/31/69</b>	<b>(k) Excess of col (i) over col (j), if any</b>		
<b>a</b>			37,026	
<b>b</b>			36,591	
<b>c</b>			-23,975	
<b>d</b>				
<b>e</b>				
<b>2</b> Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		<b>2</b>	49,642
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)	If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8			
			<b>3</b>	

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

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

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

 Yes  No

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

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

1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2012	104,000	2,703,053	0 038475
2011	99,600	2,402,549	0 041456
2010	85,500	2,073,169	0 041241
2009	94,500	1,900,470	0 049725
2008	93,175	1,971,849	0 047253
<b>2</b> Total of line 1, column (d).			<b>2</b> 0 218150
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			<b>3</b> 0 043630
<b>4</b> Enter the net value of noncharitable-use assets for 2013 from Part X, line 5.			<b>4</b> 2,942,873
<b>5</b> Multiply line 4 by line 3.			<b>5</b> 128,398
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b).			<b>6</b> 1,543
<b>7</b> Add lines 5 and 6.			<b>7</b> 129,941
<b>8</b> Enter qualifying distributions from Part XII, line 4.			<b>8</b> 103,300

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

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)**

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1		
	Date of ruling or determination letter _____ <b>(attach copy of letter if necessary—see instructions)</b>		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	1	3,087
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) . . . . .	2	0
3	Add lines 1 and 2. . . . .	3	3,087
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) . . . . .	4	0
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3 If zero or less, enter -0- . . . . .	5	3,087
6	Credits/Payments		
a	2013 estimated tax payments and 2012 overpayment credited to 2013	6a	2,730
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	2,730
8	Enter any <b>penalty</b> for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached . . . . .	8	5
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .	9	362
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .	10	
11	Enter the amount of line 10 to be <b>Credited to 2014 estimated tax</b> <input type="checkbox"/> <b>Refunded</b> <input type="checkbox"/> . . . . .	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 in any political campaign? . . . . .	<input type="checkbox"/> Yes	<input type="checkbox"/> No
1b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)? . . . . .	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	<i>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.</i>		
1c	Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<input type="checkbox"/> Yes	<input type="checkbox"/> No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year <b>(1) On the foundation</b> <input type="checkbox"/> \$ _____ 0 <b>(2) On foundation managers</b> <input type="checkbox"/> \$ _____ 0		
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____ 0		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities.</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<input type="checkbox"/> Yes	<input type="checkbox"/> No
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<input type="checkbox"/> Yes	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T.</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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? . . . . .	<input type="checkbox"/> Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	<input type="checkbox"/> Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/>		
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? <i>If "No," attach explanation.</i>	<input type="checkbox"/> Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**Part VII-A Statements Regarding Activities (continued)**

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions). . . . .	11		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? . . . . .	13	Yes	

Website address ► N/A

14	The books are in care of ► JAMES R BOWMAN Located at ► 24 E MAIN STREET MARSHALLTOWN IA	Telephone no ► (641) 691-0434 ZIP +4 ► 50158
----	--	---

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . and enter the amount of tax-exempt interest received or accrued during the year . . . . . ►	15
----	--	----

16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . .	16	Yes	No
----	---	----	-----	----

See instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes", enter the name of the foreign country ►

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? . . . . . Organizations relying on a current notice regarding disaster assistance check here . . . . . ►	1b		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2013? . . . . .	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2013? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	If "Yes," list the years ► 20____, 20____, 20____, 20____			
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) . . . . .	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b	If "Yes," did it have excess business holdings in 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) . . . . .	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? . . . . .	4a		No
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		No

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

5a	During the year did the foundation pay or incur any amount to (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? . . . . . (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, 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 described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions). . . . . (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> 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)? . . . . . Organizations relying on a current notice regarding disaster assistance check here. . . . . <input type="checkbox"/>		5b
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? . . . . . <i>If "Yes," attach the statement required by Regulations section 53.4945–5(d).</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . . <i>If "Yes" to 6b, file Form 8870.</i>		6b No
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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 (see instructions).

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

<b>(a)</b> Name and address of each employee paid more than \$50,000	<b>(b)</b> Title, and average hours per week devoted to position	<b>(c)</b> Compensation	<b>(d)</b> Contributions to employee benefit plans and deferred compensation	<b>(e)</b> Expense account other allowances
NONE				
<b>Total number of other employees paid over \$50,000</b>				

**Part VIII** **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**

**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE"**

<b>(a) Name and address of each person paid more than \$50,000</b>	<b>(b) Type of service</b>	<b>(c) Compensation</b>
NONE		

## Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
<b>1</b> SCHOLARSHIP GRANTS - A MINIMUM OF 40 AWARDS GIVEN EACH YEAR	103,30
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B Summary of Program-Related Investments** (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 _____ _____	
2 _____ _____	

All other program-related investments See page 24 of the instructions

**3** \_\_\_\_\_  
\_\_\_\_\_  
**Total.** Add lines 1 through 3 . . . . . ►

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes	
a	Average monthly fair market value of securities. . . . .	<b>1a</b> 0
b	Average of monthly cash balances. . . . .	<b>1b</b> 0
c	Fair market value of all other assets (see instructions). . . . .	<b>1c</b> 2,987,688
d	<b>Total</b> (add lines 1a, b, and c). . . . .	<b>1d</b> 2,987,688
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	<b>1e</b> 0
2	Acquisition indebtedness applicable to line 1 assets. . . . .	<b>2</b> 0
3	Subtract line 2 from line 1d. . . . .	<b>3</b> 2,987,688
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b> 44,815
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 Enter here and on Part V, line 4	<b>5</b> 2,942,873
6	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	<b>6</b> 147,144

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

1	Minimum investment return from Part X, line 6. . . . .	<b>1</b> 147,144
2a	Tax on investment income for 2013 from Part VI, line 5. . . . .	<b>2a</b> 3,087
b	Income tax for 2013 (This does not include the tax from Part VI ). . . . .	<b>2b</b>
c	Add lines 2a and 2b. . . . .	<b>2c</b> 3,087
3	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	<b>3</b> 144,057
4	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b> 0
5	Add lines 3 and 4. . . . .	<b>5</b> 144,057
6	Deduction from distributable amount (see instructions). . . . .	<b>6</b> 0
7	<b>Distributable amount</b> as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	<b>7</b> 144,057

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

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes	
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	<b>1a</b> 103,300
b	Program-related investments—total from Part IX-B. . . . .	<b>1b</b> 0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	<b>2</b>
3	Amounts set aside for specific charitable projects that satisfy the	
a	Suitability test (prior IRS approval required). . . . .	<b>3a</b>
b	Cash distribution test (attach the required schedule). . . . .	<b>3b</b>
4	<b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b> 103,300
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 (see instructions). . . . .	<b>5</b> 0
6	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	<b>6</b> 103,300

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

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

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
<b>1</b> Distributable amount for 2013 from Part XI, line 7				144,057
<b>2</b> Undistributed income, if any, as of the end of 2013				
<b>a</b> Enter amount for 2012 only. . . . .			25,314	
<b>b</b> Total for prior years 20____, 20____, 20____		0		
<b>3</b> Excess distributions carryover, if any, to 2013				
<b>a</b> From 2008. . . . .				
<b>b</b> From 2009. . . . .				
<b>c</b> From 2010. . . . .				
<b>d</b> From 2011. . . . .				
<b>e</b> From 2012. . . . .				
<b>f Total</b> of lines 3a through e. . . . .	0			
<b>4</b> Qualifying distributions for 2013 from Part XII, line 4 ► \$ _____ 103,300				
<b>a</b> Applied to 2012, but not more than line 2a			25,314	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2013 distributable amount. . . . .			77,986	
<b>e</b> Remaining amount distributed out of corpus	0			
<b>5</b> Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .		0		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2012 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2013 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2014 . . . . .				66,071
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) . . . . .	0			
<b>8</b> Excess distributions carryover from 2008 not applied on line 5 or line 7 (see instructions) . . . . .	0			
<b>9</b> Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a . . . . .	0			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2009. . . . .				
<b>b</b> Excess from 2010. . . . .				
<b>c</b> Excess from 2011. . . . .				
<b>d</b> Excess from 2012. . . . .				
<b>e</b> Excess from 2013. . . . .				

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

1a	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 the ruling. <input type="text"/>			
b	Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)			
2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed.			
b	85% of line 2a.			
c	Qualifying distributions from Part XII, line 4 for each year listed.			
d	Amounts included in line 2c not used directly for active conduct of exempt activities.			
e	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c.			
3	Complete 3a, b, or c for the alternative test relied upon			
a	"Assets" alternative test—enter			
(1)	Value of all assets.			
(2)	Value of assets qualifying under section 4942(j)(3)(B)(i).			
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.			
c	"Support" alternative test—enter			
(1)	Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties).			
(2)	Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III).			
(3)	Largest amount of support from an exempt organization			
(4)	Gross investment income			

**Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)****1 Information Regarding Foundation Managers:**

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

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

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

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

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

JAMES R BOWMAN  
PO BOX 1240  
MARSHALLTOWN, IA 50158  
(641) 691-0434

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

NAME & SS # OF APPLICANT, HIGHSCHOOL GRADUATED FROM, COLLEGE OR TECH SCHOOL YOU PLAN TO ATTEND, HIGH SCHOOL TRANSCRIPTS AND FINANCIAL PLANS

c Any submission deadlines

APRIL 25TH OF SCHOOL YEAR COMMENCING IN SEPTEMBER APPLICATIONS AVAILABLE IN JANUARY

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

THE APPLICANT MUST HAVE GRADUATED FROM A HIGH SCHOOL LOCATED IN MARSHALL COUNTY, IA

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b> See Additional Data Table				
<b>Total</b> . . . . .			► 3a	103,300
<b>b Approved for future payment</b>				
<b>Total</b> . . . . .			► 3b	0

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income	Excluded by section 512, 513, or 514	(e) Related or exempt function income (See instructions )		
Line	Description	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b>	<b>Program service revenue</b>					
a						
b						
c						
d						
e						
f						
<b>g</b>	<b>Fees and contracts from government agencies</b>					
<b>2</b>	<b>Membership dues and assessments</b>					
<b>3</b>	<b>Interest on savings and temporary cash investments</b>					
<b>4</b>	<b>Dividends and interest from securities</b>			14	104,694	
<b>5</b>	<b>Net rental income or (loss) from real estate</b>					
a	Debt-financed property					
b	Not debt-financed property					
<b>6</b>	<b>Net rental income or (loss) from personal property</b>					
<b>7</b>	<b>Other investment income</b>					
<b>8</b>	<b>Gain or (loss) from sales of assets other than inventory</b>					49,642
<b>9</b>	<b>Net income or (loss) from special events</b>					
<b>10</b>	<b>Gross profit or (loss) from sales of inventory</b>					
<b>11</b>	<b>Other revenue</b> a					
b						
c						
d						
e						
<b>12</b>	<b>Subtotal</b> Add columns (b), (d), and (e)		0		104,694	49,642
<b>13</b>	<b>Total</b> Add line 12, columns (b), (d), and (e)			13		154,336
	(See worksheet in line 13 instructions to verify calculations.)					

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

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

1 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**

## **b** Other transactions

- (1) Sales of assets to a noncharitable exempt organization. . . . .
- (2) Purchases of assets from a noncharitable exempt organization. . . . .
- (3) Rental of facilities, equipment, or other assets. . . . .
- (4) Reimbursement arrangements. . . . .
- (5) Loans or loan guarantees. . . . .
- (6) Performance of services or membership or fundraising solicitations. . . . .

**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.

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations?

described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  Yes  No

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

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.

\* \* \* \* \*

2014-12-16

\* \* \* \* \*

May the IRS discuss this return with the preparer shown below (see instr.)?  Yes  No

---

**Signature of officer or trustee**

---

Date \_\_\_\_\_

---

**Title**

Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input checked="" type="checkbox"/>	PTIN P0014767
----------------------------	----------------------	------	--	------------------

ELIZABETH A MILLER		employed	FO0147879
Firm's name	BOWMAN & MILLER PC		Firm's EIN 20-0436277
Firm's address	24 EAST MAIN STREET MARSHALLTOWN, IA 50158		Phone no (641) 753-9337

**Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation**

<b>(a) Name and address</b>	<b>(b) Title, and average hours per week devoted to position</b>	<b>(c) Compensation (If not paid, enter -0-)</b>	<b>(d) Contributions to employee benefit plans and deferred compensation</b>	<b>(e) Expense account, other allowances</b>
H VICTOR HELLBERG  204 N 18TH STREET MARSHALLTOWN, IA 50158	TRUSTEE 0 00	0	0	0
NAN BENSON  2325 JESSUP AVENUE STATE CENTER, IA 50247	TRUSTEE 0 00	0	0	0
JULIE LANG  605 ELMWOOD DR MARSHALLTOWN, IA 50158	TRUSTEE 0 00	0	0	0
STEVE STORJOHANN  1209 GLENWOOD TERRACE MARSHALLTOWN, IA 50158	TRUSTEE 0 00	0	0	0
CATHY UNDERHILL  605 WILLOW LANE LEGRAND, IA 50142	TRUSTEE 0 00	0	0	0

## Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
TRE BLACKFORD 1112 E OLIVE ST MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
BRENNAN GOODMAN 2776 MARSH AVE MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
DIANA E YEPEZ-GOMEZ 11 N 6TH STREET MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
MARCUS HENZE 1564 MEYER AVE ALBION, IA 50005	NONE		EDUCATIONAL	750
ALEX HOOP 3415 HARCOURT DR AMES, IA 50010	NONE		EDUCATIONAL	750
TEMPEST JACKSON 1501 PIONEER TRAIL MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
QUENTIN KILBORN 3922 HEY 146 GILMAN, IA 50106	NONE		EDUCATIONAL	750
ANTHONY KRAMER 514 REYNOLDS RD MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
BRANDON KLOSTERMAN 804 E SOUTH ST MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
BRADY LAWLER 308 WAUCONDA RD MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	375
TRACE OHRT 1635 TAYLOR AVE MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
CONNOR OVERSTAKE 1019 E SOUTH ST MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
MARK PFANTZ 2026 HART AVE STATE CENTER, IA 50247	NONE		EDUCATIONAL	750
ERICA RAMOS 110 NEWCASTLE RD MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
JOEL REES 2517 JENSEN AVE 324 AMES, IA 50010	NONE		EDUCATIONAL	750
<b>Total . . . . .</b>			<b>► 3a</b>	<b>103,300</b>

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
ANGEL RYSDAM 203 S 7TH AVE MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
LINDSEY RICKEN 2432 PARKER AVE MARSHALLTOWN, IA 50158	NONE		EDCATIONAL	750
JULIANA SANCHEZ 207 N 15TH AVE MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
ALEXANDRIA STEWART 1934 TAYLOR AVE MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	375
MADISON SOGGE 2018 CAMPBELL DR MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
MORGAN STONEWALL 3182 270TH ST MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
JASON TERRELL PO BOX 151 STATE CENTER, IA 50247	NONE		EDUCATIONAL	750
ALICIA WIELAND 1603 W OLIVE ST MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
LAUREN WELTON 303 3RD AVE HAVERHILL, IA 50120	NONE		EDUCATIONAL	750
AUSTIN WATTS 514 S 14TH STREET MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
HANNAH CONKIN 1455 285TH ST STATE CENTER, IA 50247	NONE		EDUCATIONAL	750
LUISA AMBROSIO 307 E BOONE ST MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
ALEK BALVANZ 208 GLENDA DR 6 MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
KELSEY BROCKMAN 2415 JESUP AVE MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
DEVIN CHESLER 308 6TH ST STATE CENTER, IA 50247	NONE		EDUCATIONAL	750
<b>Total . . . . .</b>				103,300
			► 3a	

## Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
SAMANTHA EARLEY 2642 D 250TH ST MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
EMILY GUYMER 2004 EDGE BROOK MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
RACHEL KNIGHTS 2553 DURHAM AVE STATE CENTER, IA 50247	NONE		EDUCATIONAL	750
MARIA MARROQUIN 604 N 3RD ST MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
RIDGE NENNIG 2025 EDGE BROOK MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
KAITLYN NICHOLS 408 1 AVE N STATE CENTER, IA 50247	NONE		EDUCATIONAL	750
RACHEL NOE 2603 S 7TH AVE MARSHALLTOWN, IA 50158	NONE		EDCATIONAL	750
KARI PAW 629 W LINCOLWAY MARSHALLTOWN, IA 50158	NONE		EDCATIONAL	750
TARYN PLUNKETT 1315 E BOONE ST MARSHALLTOWN, IA 50158	NONE		EDCATIONAL	750
LUKE REINERT 208 EDGELAND DR MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
ANA RODRIGUEZ 207 OLSON WAY MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
ABIGAIL SAUCEDO 3202 S 12TH ST LOT 166 MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
CAMI SCOVILL 801 ROBERTS TERR MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
EMMA SCHULER 2849 270TH ST MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
MIRANDA SMITH 106 E JEFFERSON ST ALBION, IA 50005	NONE		EDCATIONAL	750
<b>Total . . . . .</b>			<b>► 3a</b>	<b>103,300</b>

## Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
KARI SMITH 1311 LARKFIELD CT MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
ELIJAH STREETER 301 1ST AVE S STATE CENTER, IA 50247	NONE		EDCATIONAL	750
ABIGAIL STONE 308 HARRISON DR MARSHALLTOWN, IA 50158	NONE		EDCATIONAL	750
ARMONDO TORRES 1607 S 4TH ST MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
CLAIRE UNDERWOOD 203 LINCOLN VALLEY DR STATE CENTER, IA 50247	NONE		EDUCATIONAL	750
AMBER HINEGARDNER 109 N MAIN LAUREL, IA 50141	NONE		EDCATIONAL	750
DEVIN LAWLER 810 W MERLE HIBBS BLVD MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
LESLEY MESA SANTOYO 404 N 13TH ST MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
HUNTER WILKENING 205 3RD AVE NW STATE CENTER, IA 50247	NONE		EDUCATIONAL	750
KELSEA ANDERSON 2465 JEFFERSON DR MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
SIERRA GAGE 3151 290TH ST GILMAN, IA 50106	NONE		EDUCATIONAL	750
ANALISA IOLE 11 N 11TH ST MARSHALLTOWN, IA 50158	NONE		EDCATIONAL	750
IAN INGRAM 2612 RIDGE RD MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
KAYLEE KACMARYNSKI 1207 S 2ND ST MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
PAUL LANDHERR 3511 MERRITT RD MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
<b>Total . . . . .</b>			<b>► 3a</b>	<b>103,300</b>

## Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
ELISABETH PHILLIPS 2503 FAIRMAN AVE STATE CENTER, IA 50247	NONE		EDUCATIONAL	750
DAKOTA PLATT 2129 LAFAYETTE MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
EMILY RYAN 217 PINE ST MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
SAMANTHA ROSELAND 3364 250TH ST MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
WALKER STEWARD 507 DRURY LN LEGRAND, IA 50142	NONE		EDUCATIONAL	750
MADDISON STONEWALL 3182 270TH ST MARSHALLTOWN, IA 50158	NONE		EDCATIONAL	750
WYNN TAN 2125 THREE BRIDGES RD STE A MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
MATTHEW VANDEGRIFT 2607 RIDGE RD MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
MADDISON WIGNALL 2315 S 5TH AVE MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
REBECCA WUNSCH 1012 RATCLIFFE DR MARSHALLTOWN, IA 50158	NONE		EDCATIONAL	750
RANDI PROESCHOLDT 2156 KNAPP AVE MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
ELIZABETH ANDERSON 2108 FREIBERG CT MARSHALLTOWN, IA 58158	NONE		EDUCATIONAL	750
TYLER ASHBY 2806 NELSON RD MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
MORGAN BELLILE 11145 100ST N RHODES, IA 50234	NONE		EDUCATIONAL	750
MADILYN BELLILE 11145 100ST N RHODES, IA 50234	NONE		EDUCATIONAL	750
<b>Total . . . . .</b>				103,300
			► 3a	

## Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
KAYLEE CLEMENS 511 W LINN ST MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
JAMESON EBERLINE 1318 W MAIN ST MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
MELISA FONSECA 2510 S 6TH ST APT A37 MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
JOEL INGRAM 2612 RIDGE RD MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
AUSTIN JACOBS 2460 B REED AVE MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
NICK LEWARNE 1803 S 6TH ST MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
ELYSE LEYTHAM 408 RICHARD LANE MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
JOHN MAHLSTEDE 1916 S 5TH AVE MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
SAWYER PHILLIPS 2503 FAIRMAN AVE STATE CENTER, IA 50247	NONE		EDUCATIONAL	750
CALLEN ROSELAND 3296 250TH ST MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
KATELYN ROSELAND 3296 250TH ST MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
JOSEPH SCHOBORG 514 FRIENDLY DR MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	375
EMILEE UPAH 2840 VANCE AVE MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
ALARIE CRAVEN 2425 EVERGREEN AVE STATE CENTER, IA 50247	NONE		EDUCATIONAL	750
SYDNEY BEALS 1536 239TH ST STATE CENTER, IA 50247	NONE		EDUCATIONAL	750
<b>Total . . . . .</b>				103,300
			► 3a	

## Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
MCKENZIE SHIPLEY 504 3RD AVE SE STATE CENTER, IA 50247	NONE		EDUCATIONAL	750
MICHAELA HUEY 604 THUNDERBIRD MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
PAIGE FLUGGE 2485 SAND ROAD MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
AUSTIN HAUSER 2303 S 8TH ST MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
ALEX EDEL 1703 RAINBOW DRIVE MARSHALLTOWN, IA 50158	NONE		EDCATIONAL	750
SHARISSA STANSBERRY 508 NEWCASTLE RD MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
SYDNEY SLIFKA 2838 COOPER AVE STATE CENTER, IA 50247	NONE		EDUCATIONAL	750
CONNOR JOHNSON 1302 S 12TH ST MARSHALLTOWN, IA 50158	NONE		EDCATIONAL	750
DALTON HENZE 1564 MEYER AVE ALBION, IA 50005	NONE		EDUCATIONAL	750
EMILY BARSKE 3208 LILY LANE MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
TERRELL BRITTO 2012 BRYNGELSON DR MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
NATHAN DIXON 301 PARK ST MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
NINA FORD 1322 W MAIN ST MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
LORI ROSELAND 2927 ABBOTT AVE GILMAN, IA 50106	NONE		EDUCATIONAL	750
COLBY DUNN 508 3RD AVE SE STATE CENTER, IA 50247	NONE		EDUCATIONAL	750
<b>Total . . . . .</b>			<b>► 3a</b>	<b>103,300</b>

## Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
MCKINZE GOECKE 1705 190TH STREET MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
RAELENE MCGAHUEY 501 W MEADOW LANE MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
JENNIFER DAVIS 1644 140TH ST CLEMONS, IA 50051	NONE		EDUCATIONAL	750
AURORA DUNN 311 2ND AVE SW STATE CENTER, IA 50247	NONE		EDUCATIONAL	750
EMILY WEST 608 ROBERTS TERR MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
ALEXANDRA KRIZ 2727 PICKERING DR MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
SAMANTHA EARLEY 2642 250TH ST MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
TAD STEFFENSON 409 SPRINGFIELD DR MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
MCKENNA HOTOPP 101 4TH ST SE STATE CENTER, IA 50247	NONE		EDUCATIONAL	750
LARA HULL 1309 EMERALD DR MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
RYAN PUMALA 1123 HWY 30 MONTOUR, IA 50173	NONE		EDUCATIONAL	750
HUNTER BARNARD 1604 LAUREL DR MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
LEAH BARKEMA 706 TUCKER TR MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
RAYMOND DULANEY 2005 CATALINA PL MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
JOSEPH CAHILL 202 N 1ST ST MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
<b>Total . . . . .</b>			<b>► 3a</b>	<b>103,300</b>

## Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
MELISSA ALLEN 302 WAKEFIELD CR MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
BAILEY BROCKMAN 2415 JESSUP AVE MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
AUSTIN MCCOOL 509 2ND ST NW STATE CENTER, IA 50247	NONE		EDUCATIONAL	750
NATE BYERLY 207 2ND AVE SW STATE CENTER, IA 50247	NONE		EDUCATIONAL	750
TY STEFFENSEN 409 SPRINGFIELD DR MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
RACHEL FAIRCLOTH 306 2ND ST HAVERHILL, IA 50120	NONE		EDUCATIONAL	750
KAYLEIGH EBERLINE 1318 W MAIN ST MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
MACY MARIE LOGAN 1806 W OLIVE ST MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
KATELYNN SJOBLOM PO BOX 263 STATE CENTER, IA 50247	NONE		EDUCATIONAL	750
SAMANTHA TOCHERI 406 W NEVADA ST MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
JORDON RENAE LONEY 2551 PARKER AVE MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
BENJAMIN TERRONES 2425 UNDERWOOD AVE MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
CHLOE KUEHNER 1815 WIESE GARDEN RD MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
ELIZABETH HEYING 610 WESTWOOD DR MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
KYLE CARNAHAN 1 COLLEGE VIEW LANE MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
<b>Total . . . . .</b>			<b>► 3a</b>	<b>103,300</b>

## Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
CAROLYN EDLER 2024 CANFIELD AVE STATE CENTER, IA 50247	NONE		EDUCATIONAL	750
TALON ROSELAND 2447 COPPOCK RD MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
ZACH SMITH 2001 BLOSSOM LANE MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
JUSTUS BJELLAND 1105 MAY ST MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
ABIGAIL KEITH 608 E BOONE ST MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
MORGAN GARDALEN 3211 LILY LANE MARSHALLTOWN, IA 50158	NONE		EDUCATIONAL	750
MARK PFANTZ 2026 HART AVE STATE CENTER, IA 50247	NONE		REFUND EDUCATIONAL SCHOLORSHIPS FROM PRIOR YEAR	-450
JOEL REES 2517 JENSEN AVE 324 AMES, IA 50010	NONE		REFUND EDUCATIONAL SCHOLORSHIPS FROM PRIOR YEAR	-450
HUNTER WILKENING 203 3RD AVE NW STATE CENTER, IA 50247	NONE		REFUND EDUCATIONAL SCHOLORSHIPS FROM PRIOR YEAR	-425
<b>Total . . . . .</b>			<b>► 3a</b>	<b>103,300</b>

## TY 2013 Accounting Fees Schedule

**Name:** PHYLLIS PERRY HULTON EDUCATIONAL TRUST

%JAMES BOWMAN

**EIN:** 42-6526655

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROFESSIONAL FEES	3,050	0		0

## TY 2013 Investments Corporate Stock Schedule

**Name:** PHYLLIS PERRY HULTON EDUCATIONAL TRUST  
%JAMES BOWMAN  
**EIN:** 42-6526655

Name of Stock	End of Year Book Value	End of Year Fair Market Value
SAGEPOINT	1,389,318	2,859,728

## TY 2013 Investments - Other Schedule

**Name:** PHYLLIS PERRY HULTON EDUCATIONAL TRUST

%JAMES BOWMAN

**EIN:** 42-6526655

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
SAGEPOINT	AT COST	71,930	77,056

## TY 2013 Other Expenses Schedule

**Name:** PHYLLIS PERRY HULTON EDUCATIONAL TRUST

%JAMES BOWMAN

**EIN:** 42-6526655

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OFFICE EXPENSE	224	0		0
COURT FEES	20	0		0
MISCELLANEOUS EXPENSE	47	0		0

## TY 2013 Taxes Schedule

**Name:** PHYLLIS PERRY HULTON EDUCATIONAL TRUST

%JAMES BOWMAN

**EIN:** 42-6526655

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PRIVATE FOUNDATION TAX EXPENSE	4,277	0		0