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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_ms_gov/form 990pf. OMB No 1545-0052

| | | dai year 2014 of tax year beginning | | , and ending | A 5 11 10 | |
|------------------------------------|-------|---|------------------------------|----------------------|---|--|
| Nam | ne or | foundation | | | A Employer identificati | on number |
| M. | ED. | LIN & VERNA MANATT FAMI | יים דיים ביותות אייד ביי | NT | 20-811216 | : / |
| | | nd street (or P O box number if mail is not delivered to street | | Room/suite | B Telephone number | 14 |
| | | 5 OLD 6 ROAD | | 1100110 50110 | 641-522-9 | 206 |
| | | own, state or province, country, and ZIP or foreign p | notal anda | | | |
| | | OKLYN, IA 52211 | usiai coue | | C If exemption application is | s pending, check here |
| | | all that apply: Initial return | Initial return of a fo | ormer public charity | D 1. Foreign organization | one check hara |
| u 0 | IIGUN | Final return | Amended return | ither public charity | 1. For eight or yanızanı | JIIS, CHECK HELE |
| | | Address change | Name change | | Foreign organizations check here and attach | meeting the 85% test, |
| <u>п</u> —С | hack | type of organization: X Section 501(c)(3) ex | | | 7 | |
| | - | · · · · · · · · · · · · · · · · · · · | Other taxable private founda | ition | E If private foundation s under section 507(b) | . (1 |
| L Fai | | | ng method: X Cash | Accrual | | |
| | | · 1 | her (specify) | Accidat | F If the foundation is in under section 507(b) | |
| • | | | mn (d) must be on cash b | pasis) | under Section 507 (b) | (1)(D), Clieck liefe |
| Pa | | Analysis of Revenue and Expenses | (a) Revenue and | (b) Net investment | (c) Adjusted net | (d) Disbursements |
| | | (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) | expenses per books | income | income | for charitable purposes (cash basis only) |
| | 1 | Contributions, gifts, grants, etc., received | 90,185. | | N/A | (dash basis only) |
| | 2 | Check fithe foundation is not required to attach Sch. B | 20,103. | | -1/11 | |
| | 3 | Interest on savings and temporary cash investments | 2,445. | 2,445 | • | STATEMENT 1 |
| | 4 | Dividends and interest from securities | 31,852. | 31,852 | | STATEMENT 2 |
| | - | Gross rents | 51,552. | | - | |
| | Ь | Net rental income or (loss) | | | | - |
| | _ | Net gain or (loss) from sale of assets not on line 10 | -2,540. | | | |
| Revenue | Ь | Gross sales price for all assets on line 6a 643,446. | | | | |
| Ş | 7 | Capital gain net income (from Part IV, line 2) | | 0 | • | |
| ď | 8 | Net short-term capital gain | | | - | |
| | 9 | Income modifications | | | | |
| | 10a | Gross sales less returns and allowances | | | 121.00 | |
| | b | Less Cost of goods sold | | | | |
| 1 | C | Gross profit or (loss) | | | | |
| | 11 | Other income | -262. | -262 | • | STATEMENT 3 |
| 1 | 12 | Total. Add lines 1 through 11 | 121,680. | 34,035 | • | |
| | 13 | Compensation of officers, directors, trustees, etc | 0. | 0 | • | 0. |
| | 14 | Other employee salaries and wages | | | | |
| | 15 | Pension plans, employee benefits | | ∥ KEC | BIVED . | |
| | 16a | Legal fees | | |)S | |
| ᇹ | b | Accounting fees | | S AUG (| 7 2015 0 | |
| Ä | C | Other professional fees | | ₩ MOG (| (0) | |
| <u>ĕ</u> | 17 | Interest | | | <u> </u> | |
| Operating and Administrative Expen | 18 | Taxes STMT 4 | 242. | OGIO | FN. UT | 0. |
| nist | 19 | Depreciation and depletion | | | | |
| 喜 | 20 | Occupancy | | | | |
| ĕ | 21 | Travel, conferences, and meetings | | | | |
| ano | 22 | Printing and publications | | | | |
| 5 | 23 | Other expenses STMT 5 | 1,737. | 1,737 | • | 0. |
| rati | 24 | Total operating and administrative | | | | |
| ğ | | expenses. Add lines 13 through 23 | 1,979. | 1,737 | • | 0. |
| | | Contributions, gifts, grants paid | 52,600. | | | 52,600. |
| | 26 | Total expenses and disbursements. | | | | |
| \Box | | Add lines 24 and 25 | 54,579. | <u>1,737</u> | • | 52,600. |
| - 1 | 27 | Subtract line 26 from line 12: | | | | |
| | а | Excess of revenue over expenses and disbursements | 67,101. | | | |
| | | | | 20 000 | 1 | 1 |
| | | Net investment income (if negative, enter -0-) | | 32,298 | N/A | |

11170724 766257 034-00651830

| Fo | m 99 | 00-PF (2014) MERLIN & VERNA MANATT I | | | 8112164 Page 2 |
|-----------------------------|--|--|---------------------|--|---------------------------|
| P | Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only | | Beginning of year | End of | |
| Ŀ | | column should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash - non-interest-bearing | 180. | 1,779. | 1,779. 3,156. |
| | 2 | Savings and temporary cash investments | 143,070. | 3,156. | <u>3,156.</u> |
| | 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 | | | |
| | 7 | Other notes and loans receivable | | | |
| | | Less: allowance for doubtful accounts ▶ | | | |
| -t2- | -8 | -Inventories-for sale or use | | | |
| Assets | 9 | Prepaid expenses and deferred charges | 717. | 475. | 475. |
| Ä | 10a | Investments - U.S. and state government obligations | | | |
| | b | Investments - corporate stock STMT 6 | 450,136. | 655,794. | 699,236. |
| | C | Investments - corporate bonds STMT 7 | 25,503. | 25,503. | 27,285. |
| | 11 | Investments - land, buildings, and equipment basis | | ······································ | |
| | | Less accumulated depreciation |] | | |
| | 12 | Investments - mortgage loans | | | |
| | 13 | Investments - other | | | |
| | 14 | Land, buildings, and equipment; basis | | | |
| | | Less accumulated depreciation | 1 | | |
| | 15 | Other assets (describe ►) | | - | |
| | 16 | Total assets (to be completed by all filers - see the | | | |
| | | instructions. Also, see page 1, item I) | 619,606. | 686,707. | 731,931. |
| | 17 | Accounts payable and accrued expenses | | | |
| | 18 | Grants payable | | | |
| Ś | 19 | Deferred revenue | | | |
| Liabilities | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| abi | 21 | Mortgages and other notes payable | | | |
| = | 22 | Other liabilities (describe > | | | |
| | | · · · · · · · · · · · · · · · · · · · | | | |
| | 23 | Total liabilities (add lines 17 through 22) | 0. | 0. | |
| | | Foundations that follow SFAS 117, check here | | | |
| | | and complete lines 24 through 26 and lines 30 and 31. | | | |
| Net Assets or Fund Balances | 24 | Unrestricted | | | |
| laŭ | 25 | Temporarily restricted | | | |
| Ва | 26 | Permanently restricted | | | |
| 밀 | | Foundations that do not follow SFAS 117, check here | | | |
| Ę | | and complete lines 27 through 31 | | 1 | |
| S | 27 | Capital stock, trust principal, or current funds | 0. | 0. | |
| set | 28 | Paid-in or capital surplus, or land, bldg., and equipment fund | 0. | 0. | |
| As | 29 | Retained earnings, accumulated income, endowment, or other funds | 619,606. | 686,707. | |
| ě | 30 | Total net assets or fund balances | 619,606. | 686,707. | |
| _ | | | | | |
| | 31 | Total liabilities and net assets/fund balances | 619,606. | 686,707. | |
| _ _ | art | Analysis of Changes in Net Assets or Fund E | Ralances | | |
| | | | | | <u> </u> |
| 1 | Tota | l net assets or fund balances at beginning of year - Part II, column (a), lini | e 30 | | |
| | • | st agree with end-of-year figure reported on prior year's return) | | 1 | 619,606. |
| | | r amount from Part I, line 27a | | 2 | 67,101. |
| 3 | Othe | r increases not included in line 2 (itemize) | | 3 | 0. |
| | | lines 1, 2, and 3 | | 4 | 686,707. |
| 5 | Decr | eases not included in line 2 (itemize) 🕨 | | 5 | 0. |
| <u>6</u> | Tota | net assets or fund balances at end of year (line 4 minus line 5) - Part II, o | column (b), line 30 | 6 | 686,707. |
| | | | | _ | Form 990-PF (2014) |

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| Part IV | Capital Gains a | and Losses for Tax on I | nvestment | Income | | | | | |
|-----------------------------|---|--|--------------------|------------------------------------|---------------|--|----------|--------------------------------|----------------------------------|
| | | be the kind(s) of property sold (e. rehouse; or common stock, 200 st | | _ | (b) F | low acquired - Purchase - Donation | | acquired lay, yr.) | (d) Date sold (mo , day, yr.) |
| | | D SECURITIES | | | | | | | |
| b CAP | <u>ITAL GAINS 1</u> | DIVIDENDS | | | | | | | |
| | | | | | | | | | |
| <u>d</u> | · | | | | | | | | |
| <u>e</u> | | (0.D.) | 1 ,,0 | | | | | | |
| (e) G | Gross sales price | (f) Depreciation allowed (or allowable) | | t or other basis xpense of sale | | | | ain or (loss s (f) minus (| (g) |
| _ <u>a</u> | 643,031. | | | 645,98 | 6. | | | | -2,955. 415. |
| _ <u>b</u> | 415. | | | <u></u> | | | | | 415. |
| _ <u>c</u> | | | | | _ | | | | |
| <u>-d</u> | | | - | | | | | | |
| Comple | te only for assets showin | g gain in column (h) and owned by | the foundation | on 12/31/60 | - | | Coupe (C | 'ol (b) goin | minus |
| ОбПрю | to only for assets showin | (j) Adjusted basis | T | cess of col. (i) | \dashv | | | Col. (h) gain not less thai | |
| (i) F.M | I.V. as of 12/31/69 | as of 12/31/69 | | col. (j), if any | | | Losses | (from col. (| h)) |
| a | | | <u> </u> | | \dashv | | | | -2 955 |
| b | | | | | + | | | | $\frac{-2,955.}{415.}$ |
| C | | | | | | | • | | |
| ď | | | 1 | | | | | | |
| e | | | | | ~ † | . <u>.</u> . | | | |
| 2 Capital or | ain net income or (net ca | pital loss) { If gain, also enti | er in Part I, line | 7 | } | 2 | | | -2,540. |
| , , | , , | • | | • | 7 | | | | |
| | i-term capital gain or (los Iso enter in Part I, line 8, (| s) as defined in sections 1222(5) a | 1110 (6): | | ٦١ | | | | |
| | enter -0- in Part I, line 8 | ooiaiiii (o). | | | | 3 | | N/A | |
| Part V | Qualification U | nder Section 4940(e) fo | r Reduced | Tax on Net | Inve | estment Inc | ome | | |
| (For optiona | I use by domestic private | foundations subject to the section | 4940(a) tax on | net investment in | come | .) | | | |
| If anation 40 | 40/4)/0) and less than the | us sant blask | | | | | | | |
| ii secuon 49 | 40(d)(2) applies, leave th | нѕ рагт ріапк. | | | | | | | |
| Was the four | ndation liable for the sect | ion 4942 tax on the distributable a | mount of any ye | ar in the base per | od? | | | | Yes X No |
| | | ify under section 4940(e). Do not c | | | | | | | |
| 1 Enter the | | each column for each year; see the | instructions bef | ore making any ei | ntries. | | | | /4) |
| | (a) Base period years | (b) | .atributions | Net value of ma | (c) | atable was seest | | Distrib | (d) oution ratio |
| <u>Calendar</u> | year (or tax year beginnir | | | Net value of no | ncnar | itable-use assets | | (col. (b) dıv | ided by col. (c)) |
| | 2013 | | 37,758. | | | 640,605 | | | .058941 |
| | 2012 | | 49,967. | | | 603,145 | | | .082844 |
| | 2011 | | 41,694. | | | 526,222 | | | .079233 |
| | 2010 | | 17,000. | | | 490,786 | | | .034638 |
| | 2009 | | 15,911. | | | <u>376,526</u> | • | | .042257 |
| n Takal of l | ine 1, column (d) | | | | | | | | 207012 |
| | | 5-year base period - divide the total | Lon line 2 by 5 | or by the number | of vo | are. | 2 | | .297913 |
| | dation has been in exister | | roll lille 2 by 5, | or by the number | UI yea | 115 | ا ۽ ا | | .059583 |
| tile louit | Janon nas Deen in exister | ice ii iess tilali 5 years | | | | | 3 | | |
| 4 Enter the | net value of noncharitab | le-use assets for 2014 from Part X | , line 5 | | | | 4 | | 681,520. |
| 5 Multiply I | line 4 by line 3 | | | | | | 5 | | 40,607. |
| 5 Multiply line 4 by line 3 | | | | | | | | | |
| 6 Enter 1% | of net investment incom | ie (1% of Part I, line 27b) | | | | | 6 | | 323. |
| 7 Add lines | 5 and 6 | | | | | | 7 | | 40,930. |
| 8 Enter qua | alifying distributions from | Part XII, line 4 | | | | | 8 | | 52,600. |
| | s equal to or greater than Part VI instructions. | line 7, check the box in Part VI, lin | e 1b, and comp | lete that part using | g a 19 | % tax rate. | | | |
| OCC LIIC F | art vi man actions. | | - | | | | | | |

| | m 990-PF (2014) MERLIN & VERNA MANATT FAMILY art VI Excise Tax Based on Investment Income (Section 494 | | | | | 8112 | | | Page 4 |
|----|--|-------------|------------------------|------------------|--------------|-------------|-------------------|------|--------------------|
| | a Exempt operating foundations described in section 4940(d)(2), check here and | | |) | | 1 | | - | |
| 14 | Date of ruling or determination letter: (attach copy of letter if ne | | |)e) | | | | | |
| ь | b Domestic foundations that meet the section 4940(e) requirements in Part V, check here | | | ''' | 1 | | | 3 | 23. |
| · | of Part I, line 27b | | and onto 170 | | | - | | | <u> </u> |
| c | c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4 | % of Part | t Lline 12 col i | _{'b\} | | | | | |
| | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. | | | ,0,.) | 2 | | | | 0. |
| | Add lines 1 and 2 | 0111010 011 | 107 0 7 | j | 3 | | | 3 | 23. |
| | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. | Others er | nter -0-1 | | 4 | | - | | 0. |
| | Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0- | 0111010 01 | | | 5 | | | 3 | 23. |
| | Credits/Payments: | | | | | | ·· ··· | | |
| | a 2014 estimated tax payments and 2013 overpayment credited to 2014 | 6a | | 475. | | | | | |
| | b Exempt foreign organizations - tax withheld at source | 6b | · | 1,3. | | | | | |
| | c-Tax paid with application for extension of time to file (Form 8868) | - 6c | | | | | | | |
| | d Backup withholding erroneously withheld | 6d | | | | | | | |
| | Total credits and payments. Add lines 6a through 6d | | | | 7 | | | 4 | 75. |
| | | tached | | | 8 | | | | , , , . |
| | Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed | donod | | • | 9 | | | | |
| | Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | | | 10 | | | 1 | 52. |
| | Enter the amount of line 10 to be: Credited to 2015 estimated tax | | 152. | Refunded | 11 | | | | 0. |
| | art VII-A Statements Regarding Activities | | <u> </u> | tolullucu P | | | | | <u> </u> |
| | a During the tax year, did the foundation attempt to influence any national, state, or local legi | ıslatıon o | r did it participa | te or intervene | ın | | Γ | Yes | No |
| | any political campaign? | | | | | | 1a | | |
| b | b Did it spend more than \$100 during the year (either directly or indirectly) for political purp | oses (see | : instructions fo | r the definition | 12 | | 1b | | X |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities a | | | | | | | | |
| | distributed by the foundation in connection with the activities | | | , | | | | | |
| c | c Did the foundation file Form 1120-POL for this year? | | | | | | 10 | | х |
| | d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the | ne vear | | | | | | | |
| | (1) On the foundation. > \$ (2) On foundation manager | | | 0. | | | | | |
| | E Enter the reimbursement (if any) paid by the foundation during the year for political expens | | | | | | | | |
| Ī | managers. ►\$ 0. | arrar o tax | | | | | | | |
| 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. | | | | | | | | |
| | Has the foundation made any changes, not previously reported to the IRS, in its governing | ınstrume | ent, articles of i | ncorporation o | r | | | i | |
| • | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change | | original troited or in | ioorporation, o | | | 3 | | X |
| 4a | a Did the foundation have unrelated business gross income of \$1,000 or more during the ye | - | | | | | 4a | | X |
| | b 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 | 7 | | | | , | 5 | | X |
| | If "Yes," attach the statement required by General Instruction T | | | | | | | | _== |
| | | either: | | | | | | | |
| _ | By language in the governing instrument, or | | | | | | | | |
| | By state legislation that effectively amends the governing instrument so that no mandato | orv directi | ions that conflic | t with the state | law | | | | |
| | remain in the governing instrument? | , | | | | | 6 | | Х |
| | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," co | mplete i | Part II. col. (c) | . and Part XV | | | 7 | Х | |
| | , | • | , , (-, | , | | | | | |
| 8a | a Enter the states to which the foundation reports or with which it is registered (see instructi | ions) 🕨 | | | | | | | |
| | IA | , | | | | | 1 | | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the | Attorney | General (or des | ignate) | | | 1 | | |
| | of each state as required by General Instruction G? If "No," attach explanation | • | , | - , | | | 8b | X | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of s | ection 49 | 942(j)(3) or 494 | 2(j)(5) for cale | ndar | | | - | |
| | year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," | | | .,, , | | | 9 | | х |
| | Did any persons become substantial contributors during the tax year? If "Yes," attach a sched | | | ddresses | | | 10 | | X |
| | | | | | | For | m 990 | -PF(| |

| | 990-PF (2014) MERLIN & VERNA MANATT FAMILY FOUNDATION 20-811 | 2164 | | Page 5 |
|----|--|----------------|-------------|----------|
| Pa | rt VII-A Statements Regarding Activities (continued) | | | |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of | | | |
| | section 512(b)(13)? If "Yes," attach schedule (see instructions) | 11 | | X |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? | | | |
| | If "Yes," attach statement (see instructions) | 12 | | <u> </u> |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | X | |
| | Website address ► N/A | | | |
| 14 | The books are in care of ▶ PAM BENISHEK Telephone no. ▶ 641-5 | | <u> 206</u> | |
| | Located at ► 1775 OLD 6 ROAD, BROOKLYN, IA ZIP+4 ►5 | <u> 2211</u> | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in fleu of Form 1041 - Check here | 3.7 | / 3► | |
| 40 | and enter the amount of tax-exempt interest received or accrued during the year 15 | | /A Yes | No |
| 16 | At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, | i | 162 | X |
| _ | securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the | _ 16 | | |
| | foreign country | | | |
| Pa | irt VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | No |
| 1a | During the year did the foundation (either directly or indirectly): | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | | | |
| | a disqualified person? | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available | | | |
| | for the benefit or use of a disqualified person)? | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" | | | |
| | 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.) | | | |
| Đ | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | 1 | | |
| | section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A Organizations relying on a current notice regarding disaster assistance check here | 1b | | |
| | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected | | 1 | |
| ٠ | before the first day of the tax year beginning in 2014? | 1c | | Х |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation | 1.5 | | |
| | defined in section 4942(j)(3) or 4942(j)(5)): | | | |
| а | At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning | | | |
| | before 2014? | | | |
| | if "Yes," list the years \blacktriangleright | | | |
| b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect | | | |
| | valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach | | | |
| | statement - see instructions.) N/A | 2b | | |
| 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 | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | | | |
| Ja | during the year? Yes X No | | | |
| h | If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after | | Ì | |
| • | 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 2014) N/A | 3ь | | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | X |
| 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 2014? | 4b | | X |
| | F | orm 990 |)-PF (| (2014) |

| orm 990-PF (2014) MERLIN & VERNA MANATT FA | MILY FOUNDATI | ON Sequired (seeks | 20-81121 | 64 | Page 6 |
|---|------------------------------------|-----------------------------|--|-------------|-----------------------|
| 5a During the year did the foundation pay or incur any amount to: | FOITH 4720 May be i | required (contin | uea) | | |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section | on 4945(e))? | [] Y | es X No | | |
| (2) Influence the outcome of any specific public election (see section 4955); | | | | | |
| any voter registration drive? | | | es 🗶 No | | |
| (3) Provide a grant to an individual for travel, study, or other similar purpose | s? | | es X No | | |
| (4) Provide a grant to an organization other than a charitable, etc., organization | | | | | |
| 4945(d)(4)(A)? (see instructions) | | Ye | s X No | | |
| (5) Provide for any purpose other than religious, charitable, scientific, literary | , or educational purposes, or | | | | |
| the prevention of cruelty to children or animals? | | Ye | es 🗶 No | | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify ur | ider the exceptions described | ın Regulatıons | | 1 | |
| section 53.4945 or in a current notice regarding disaster assistance (see instr | • | | N/A | 5b | |
| Organizations relying on a current notice regarding disaster assistance check | | | ▶□□ | | |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption | | | | 4 | |
| expenditure responsibility for the grant? | | I/A 🗀 Ye | es L 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 | <u> </u> | () | 1 | |
| a personal benefit contract? | | Ye | es X No | . | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a | personal benefit contract? | | ļ | 6b | X |
| If "Yes" to 6b, file Form 8870 | abaltar transaction? | | es X No | | |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax b If "Yes," did the foundation receive any proceeds or have any net income attrib | | Y6 | N/A | 7b | +- |
| Part VIII Information About Officers, Directors, Trust | | nagers Highly | | 70 | |
| Paid Employees, and Contractors | iooo, i odilaation me | inagers, ragin | • | | |
| 1 List all officers, directors, trustees, foundation managers and their | compensation. | | | | |
| | (b) Title, and average | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) | Expense unt, other |
| (a) Name and address | hours per week devoted to position | (If not paid, enter -0-) | and deferred compensation | acco | owances |
| | | | | | |
| | | | | 1 | |
| SEE STATEMENT 8 | | 0. | 0. | , | 0. |
| 4450 | _ | | | | |
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| | - | | | | |
| 2 Compensation of five highest-paid employees (other than those in | cluded on line 1) If none | enter "NONE " | | | |
| | (b) Title, and average | Torres | (d) Contributions to employee benefit plans | (e) | Expense |
| (a) Name and address of each employee paid more than \$50,000 | hours per week devoted to position | (c) Compensation | employee benefit plans and deferred compensation | 1 4000 | unt, other owances |
| NONE | devoted to position | | compensation | 1 4110 | Marious |
| 1101111 | | | | | |
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| | | <u></u> | | <u></u> | |
| Total number of other employees paid over \$50,000 | | | | | 0 |

| Form 990-PF (2014) MERLIN & VERNA MANATT FAMILY FOUR Part VIII Information About Officers, Directors, Trustees, Foundat Paid Employees, and Contractors (continued) | NDATION 20 - 8 ion Managers, Highly | 3112164 Page 7 |
|---|--|------------------|
| 3 Five highest-paid independent contractors for professional services. If none, enter | "NONE." | |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | |
| | | |
| Total number of others receiving over \$50,000 for professional services | = | > 0 |
| Part IX-A Summary of Direct Charitable Activities | | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produced. | cal information such as the uced, etc. | Expenses |
| 1 N/A | | |
| | | |
| | | |
| 2 | | |
| | | |
| 3 | -0.7 | |
| | | |
| | | |
| 4 | | 13100 |
| | | |
| D. LIV. B. C. | | |
| Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on li | nee 1 and 0 | A |
| | nes i and z. | Amount |
| 1 <u>N/A</u> | | |
| | | |
| 2 | | |
| | | |
| | | |
| All other program-related investments. See instructions. | | |
| 3 | | |
| | | |
| | | |

Total. Add lines 1 through 3

MERLIN & VERNA MANATT FAMILY FOUNDATION Form 990-PF (2014) 20-8112164 Page 8 Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 614,564. a Average monthly fair market value of securities 1a 76,738. b Average of monthly cash balances 1b 596. c Fair market value of all other assets. 1c 691,898. d Total (add lines 1a, b, and c) 1đ e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets Subtract line 2 from line 1d 3 691,898. 10,378. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 681,520. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 Minimum investment return. Enter 5% of line 5 34,076. 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.) Minimum investment return from Part X, line 6 34,076. 1 1 323 2a Tax on investment income for 2014 from Part VI, line 5 2a 2b Income tax for 2014. (This does not include the tax from Part VI.) Add lines 2a and 2b 2c Distributable amount before adjustments. Subtract line 2c from line 1 3 3 Recoveries of amounts treated as qualifying distributions 4 0. 753<u>.</u> 5 Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 52,600. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a b Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 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 52,600. Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Form **990-PF** (2014)

323.

5

6

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

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

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

Form 990-PF (2014) Page 9 Part XIII Undistributed Income (see instructions) (b) (c) (d) Years prior to 2013 2013 2014 Corpus 1 Distributable amount for 2014 from Part XI. 33,753. line 7 2 Undistributed income, if any, as of the end of 2014 0 a Enter amount for 2013 only b Total for prior years: 0 3 Excess distributions carryover, if any, to 2014; a From 2009 **b** From 2010 3,033. c From 2011 20,376. d From 2012 6,212. e From 2013 29,621 f Total of lines 3a through e 4 Qualifying distributions for 2014 from 52,600. Part XII, line 4: ► \$ 0 a Applied to 2013, but not more than line 2a b Applied to undistributed income of prior 0 years (Election required - see instructions) c Treated as distributions out of corpus 0 (Election required - see instructions) 33,753. d Applied to 2014 distributable amount 18,847 e Remaining amount distributed out of corpus 0 0. Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: 48.468 a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract 0 line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously 0 assessed d Subtract line 6c from line 6b. Taxable 0 . amount - see instructions e Undistributed income for 2013. Subtract line 0 4a from line 2a. Taxable amount - see instr. f Undistributed income for 2014. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015 0. 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 0 8 Excess distributions carryover from 2009 0 not applied on line 5 or line 7 9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a 48,468 10 Analysis of line 9:

a Excess from 2010

b Excess from 2011 c Excess from 2012

d Excess from 2013 e Excess from 2014

11-24-14

3,033. 20,376. 6,212. 18,847

| Form 990-PF (2014) MERLIN Part XIV Private Operating F | & VERNA MAI | NATT FAMILY | FOUNDATION | | 12164 Page 10 |
|---|-----------------------------------|------------------------------|----------------------------|-----------------------------|---------------------------|
| | | | I-A, question 9) | N/A | |
| 1 a If the foundation has received a ruling of | | | | | |
| foundation, and the ruling is effective for | | - | un contron | 4942(j)(3) or 49 | 140(4)(5) |
| b Check box to indicate whether the foun2 a Enter the lesser of the adjusted net | Tax year | ing roundation described | Prior 3 years | 1 4942(J)(3) OI1 48 |)42(j)(5) |
| income from Part I or the minimum | (a) 2014 | (b) 2013 | (c) 2012 | (d) 2011 | (e) Total |
| investment return from Part X for | (4) | (4) 44 44 | (-) | (-) | (0) 10.21 |
| 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 | | | | | |
| 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 | | | | | ſ |
| 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 | | | | | l |
| (4) Gross investment income | | | | | |
| Part XV Supplementary Info | rmation (Comple | ete this part only | if the foundation | n had \$5,000 or mo | re in assets |
| at any time during | the year-see inst | ructions.) | · | | |
| 1 Information Regarding Foundation | • | | | | |
| a List any managers of the foundation wh | to have contributed more | than 2% of the total cont | tributions received by the | foundation before the clos | e of any tax |
| year (but only if they have contributed r | nore man \$5,000). (See: | section 507(a)(2).) | | | |
| NONE | | | | | |
| b List any managers of the foundation who other entity) of which the foundation has | io own 10% or more of the authors | ne stock of a corporation | (or an equally large porti | on of the ownership of a pa | irtnership or |
| •• | o a 1070 or grouter intere | | | | |
| NONE | | | | | |
| 2 Information Regarding Contribut Check here ► if the foundation of | only makes contributions | to preselected charitable | organizations and does | not accept unsolicited requ | ests for funds. If |
| the foundation makes gifts, grants, etc. | | | | · | d. |
| a The name, address, and telephone num | iber or e-mail address of | the person to whom appl | ications should be addre | ssed: | |
| CEE COMMENSO O | | | | | |
| SEE STATEMENT 9 b The form in which applications should be | as submitted and informs | tion and materials they s | | | |
| The form in which applications should t | | thon and materials they s | nould include. | | |
| c Any submission deadlines: | | | | | |
| d Any restrictions or limitations on award | s, such as by geographic | al areas, charitable fields, | kinds of institutions, or | other factors: | |
| | | | | <u></u> | |
| 423601 11-24-14 | | | | | Form 990-PF (2014) |

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year BROOKLYN COMMUNITY FOUNDATION AED NONE PC TO FUND COMMUNITY BOX 66 PROGRAMS BROOKLYN, IA 52211 22,500. BROOKLYN HISTORICAL MUSEUM NONE PC TO FUND OPERATIONS 304 JACKSON STREET BROOKLYN, IA 52211 2,500. GREATER POWESHIEK COMMUNITY NONE PC TO FUND OPERATIONS FOUNDATION BOX 344 GRINNELL IA 52211 17,100. IOWA TRANSPORTATION MUSEUM NONE PC TO FUND OPERATIONS 927 4TH AVENUE GRINNELL, IA 50112 5,000. NONE MAYFLOWER HOMES so I TO FUND OPERATIONS 616 BROAD STREET GRINNELL, IA 50112 2.000 SEE CONTINUATION SHEET(S) **▶** 3a Total 52,600. b Approved for future payment NONE Total **▶** 3b

423611 11-24-14

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

| Enter gross amounts unless otherwise indicated. | Unrelated | business income | | by section 512, 513, or 514 | (e) |
|---|------------------|-----------------|---|-----------------------------|-------------------|
| 2 | (a) | (b) | (C) Exclu- | (d) | Related or exempt |
| 1 Program service revenue: | Business code | Amount | sion | Amount | function income |
| a | | | | | |
| b | - | | | | |
| C | | - | | | |
| d | 1 | · | | | |
| е | 1 | - , | *** | | |
| 1 | | | | | · |
| g Fees and contracts from government agencies | | | | | · |
| 2 Membership dues and assessments | | | | | |
| -3-Interest on savings and temporary cash | | | | | |
| investments | | | 14 | 2,445. | |
| 4 Dividends and interest from securities | | | 14 | 2,445. 31,852. | |
| 5 Net rental income or (loss) from real estate: | | | | | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal | | | | | |
| property | | | | | |
| 7 Other investment income | | | 14 | -262. | |
| 8 Gain or (loss) from sales of assets other | | | | | |
| than inventory | | | 18 | -2,540. | |
| 9 Net income or (loss) from special events | | | | | |
| 10 Gross profit or (loss) from sales of inventory | | | | | |
| 11 Other revenue: | | | | | |
| a | | | | | |
| b | | | | | |
| c | | | | | |
| d | _ | | | | |
| e | _ | | | | |
| 12 Subtotal. Add columns (b), (d), and (e) | | (| <u>). </u> | 31,495. | 0. |
| 13 Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 31,495 |
| (See worksheet in line 13 instructions to verify calculations.) |) | | | | |

Relationship of Activities to the Accomplishment of Exempt Purposes

| ne 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). | | | | | | | | |
|-------------|---|--|--|--|--|--|--|--|--|
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423621 11-24-14

| Form 99 Part | | | egarding Tran | | T FAMILY FOR and Transactions | | | 8112164 ncharitable | | age 13 |
|-----------------|------------|---------------------------------------|---------------------------------------|--------------------|--|----------------------|---|---------------------------|----------|--------------|
| 1 Dic | the or | | | of the following | ng with any other organizat | ion described in se | ction 501(c) of | | Yes | No |
| | | | | | 27, relating to political orga | | 011011 00 1(0) 01 | | 1.00 | 1 |
| | | from the reporting found | | | | Zationo | | | | |
| | Cash | nom mo roporung round | 2 | 2010 0710.11pt 01 | guuu.o o | | | 1a(1) | | X |
| | Other | assets | | | | | | 1a(2) | <u> </u> | X |
| | | sactions; | | | | | | 14(2) | | |
| | | of assets to a noncharita | able exempt organiza | ation | | | | 1b(1) | | X |
| | | nases of assets from a no | | | | | | 1b(2) | | X |
| | | l of facilities, equipment, | · · · · · · · · · · · · · · · · · · · | J | | | | 1b(3) | | X |
| ٠, | | oursement arrangements | | | | | | 1b(4) | | X |
| | | or loan guarantees | | | | | | 1b(5) | | Х |
| | | rmance of services or me | embership or fundra | ising solicitation | ons | | | 1b(6) | | Х |
| | | facilities, equipment, ma | | | | | | 1c | | Х |
| d If t | he ansv | ver to any of the above is | "Yes," complete the | following sche | edule. Column (b) should a | | | joods, other as: | sets, | |
| | |) the value of the goods, | | | ed less than fair market va | iue in any transacti | on or snaming arrange | ment, snow in | | |
| (a) Line n | 0 | (b) Amount involved | (c) Name o | f noncharitable | e exempt organization | (d) Descripti | on of transfers, transaction | ons, and sharing ar | rangeme | ents |
| | | | | N/A | | | | | | |
| | | | | · | | | | | | |
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| | | | - | | or more tax-exempt organ | nizations described | | | | _ |
| ın s | section | 501(c) of the Code (othe | r than section 501(c | (3)) or in sec | tion 527? | | | Yes | LX | ON [|
| b If " | Yes," cc | mplete the following sch | | | | | | | | |
| | | (a) Name of org | janization | | (b) Type of organization | | (c) Description of re | elationship | | |
| | | N/A | | | | | | | | |
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| | 1 | | | | | <u> </u> | | | | |
| 0: | | | | | ng accompanying schedules an in taxpayer) is based on all infor | | | May the IRS | | |
| Sign Here | N 3 | H)mJ | March | | X Q.Z.C | | n | return with the | (see ins | <u>tr</u>)? |
| 11616 | | 100111 | | ec_ | <u> </u> | | (etan) | _ X Yes | , L | ∟ No |
| | Sign | ature of officer or trustee | | 1 Dean areas | Date | Title | Chook | DTIN | | |
| | | Print/Type preparer's na | ame | Preparer's s | ignature | Date | Check if | PTIN | | |
| Paid | | MATTHEW LE | אמים מגעי | Mammur | W TEURN OP | 7126/15 | self- employed | מפניטים | 600 | |
| Prepa | arer | Firm's name ► CLI | | - | | T 1/246/17 | Firm's EIN ▶ 4 | <u> P00297</u> 1-07467 | | |
| Use (| Only | | | | | | 1 | | | |

Form **990-PF** (2014)

515-222-4400

Firm's address ► 5550 WILD ROSE LANE, SUITE 300 WEST DES MOINES, IA 50266-5304

Phone no.

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

Name of the organization

Employer identification number

| | ME | RLIN & VERNA MANATT FAMILY FOUNDATION | 20-8112164 |
|-----------|--|--|---|
| Organiz | ation type (check o | ne) | |
| Filers of | : | Section: | |
| Form 99 | 0 or 990-EZ | 501(c)() (enter number) organization | |
| | | 4947(a)(1) nonexempt chantable trust not treated as a private foundation | |
| | | 527 political organization | |
| Form 99 | 0-PF | X 501(c)(3) exempt private foundation | |
| | | 4947(a)(1) nonexempt chantable trust treated as a private foundation | |
| | | 501(c)(3) taxable private foundation | |
| | nly a section 501(c) | covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rul | le See instructions. |
| X | | filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor's | |
| Special | Rules | | |
| | sections 509(a)(1) any one contributo | described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, r, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amoun line 1. Complete Parts I and II. | or 16b, and that received from |
| | year, total contribu | described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from a tions of more than \$1,000 exclusively for religious, chantable, scientific, literary, or educately to children or animals. Complete Parts I, II, and III | |
| | year, contributions is checked, enter h purpose. Do not co | described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a exclusively for religious, charitable, etc., purposes, but no such contributions totaled movere the total contributions that were received during the year for an exclusively religious, emplete any of the parts unless the General Rule applies to this organization because it e, etc., contributions totaling \$5,000 or more during the year | ore than \$1,000 if this box , charitable, etc , |
| but it mi | ust answer "No" on | nat is not covered by the General Rule and/or the Special Rules does not file Schedule B Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Forthe filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). | • |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization

Employer identification number

MERLIN & VERNA MANATT FAMILY FOUNDATION

20-8112164

| Part I | . Contributors (see instructions) Use duplicate copies of Part I if | f additional space is needed | |
|-------------|---|------------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | MERLIN MANATT PO BOX 535 BROOKLYN, IA 52211 | \$\$87,685. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Oncash Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 423452 11-0 | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |

Name of organization

Employer identification number

MERLIN & VERNA MANATT FAMILY FOUNDATION

20-8112164

| No. rom art I (a) No. rom | (b) Description of noncash property given (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) | (d) Date received (d) Date received |
|--|--|--|---------------------------------------|
| (a) No. from Part I (a) No. from Part I | | (c) FMV (or estimate) (see instructions) | 1 |
| No. from Part I (a) No. from | | FMV (or estimate) (see instructions) | 1 |
| No. from | | s | |
| No. from | | | |
| | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | <u></u> | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |

| Name of orga | inization | | Employer identification number |
|---------------------------|---|-------------------------------------|---|
| MERLIN Part III | & VERNA MANATT FAMILY Exclusively religious charitable etc contri | FOUNDATION | 20-8112164 in section 501(c)(7), (8), or (10) that total more than \$1,000 for |
| | the year from any one contributor. Complete co completing Part III, enter the total of exclusively religious, | lumns (a) through (e) and the follo | WING LINE ENTRY. For organizations |
| | Use duplicate copies of Part III if additional | space is needed | r less for the year (Enter Inis into once) |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | | |
| | | (e) Transfer of git | t |
| | Transferee's name, address, and | 1 ZIP + 4 | Relationship of transferor to transferee |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | | |
| | | (e) Transfer of gif | t |
| - | Transferee's name, address, and | 1 ZIP + 4 | Relationship of transferor to transferee |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | (e) Transfer of gif | t |
| | Transferee's name, address, and | 1 ZIP + 4 | Relationship of transferor to transferee |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | | |
| - | Transferee's name, address, and | (e) Transfer of gif | Relationship of transferor to transferee |
| | | | |

MERLIN & VERNA MANATT FAMILY FOUNDATION 20-8112164

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient TO FUND MISSIONARY SACRED HEART CATHOLIC NONE PC CHURCH-ELSAVADOR MISSION WORK 1213 S 15TH AVE W NEWTON, IA 50208 1,000. CITIZEN SCHOLARSHIP FOUNDATION OF BGM PC TO FUND SCHOLARSHIPS BOX 469 BROOKLYN TA 52211 2,500. Total from continuation sheets 3,500.

| FORM 990-PF INTERE | ST ON SAVING | S AND T | EMPOR | ARY | CASH | INVES | TMENTS | ST | 'АТЕМЕПТ | 1 | |
|--|----------------------------|-------------------------|----------------------|--------------------|--------------------------------|-----------------------|----------------------------|------------|------------------------------|---|--|
| SOURCE | | RE | (A) VENUE BOOK | | | (B) INVES INCOM | TMENT | | (C) ADJUSTED ET INCOM | | |
| CHARLES SCHWAB FIRST STATE BANK | | | 2,432. 13. | | - | | ,432. 13. | | | | |
| TOTAL TO PART I, LI | NE 3 | | 2,4 | 45. | | 2 | ,445. | | | | |
| FORM 990-PF | DIVIDENDS | AND INT | EREST | FRO | M SEC | URITI | ES | ST | ATEMENT | 2 | |
| SOURCE | GROSS AMOUNT | CAPIT GAIN DIVIDE | S | RE | | | | T - | (C) ADJUSTI NET INCO | | |
| CHARLES SCHWAB BOND/EQUITY FUNDS | 32,267. | | 415. | | 31,85 | 2. 31,852. | | | | | |
| TO PART I, LINE 4 | 32,267. | | 415. 31,852. 31 | | 31,85 | 2. | | | | | |
| FORM 990-PF | | OTHER | INCO | ME | | | | ST | ATEMENT | 3 | |
| DESCRIPTION | | | RE | (A) VENU BOO | | NET | (B) INVEST- INCOME | | (C) ADJUSTEI NET INCOM | | |
| ICAHN ENTERPRISES, KINDER MORGAN ENERG NATURAL RESOURCE PA BOARDWALK PIPELINE | Y PARTNERS, RTNERS L.P. | | | | 228. -379. 223. -334. | | 228 -379 223 -334 | | | | |
| TOTAL TO FORM 990-P | F, PART I, L | INE 11 | | | -262. | | -262 | • | | | |

| FORM 990-PF | TAX | ES | | STATEMENT | 4 |
|-------------------------------|------------------------------|---------------------------------|----------------------------------|-----------------------------|----|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST MENT INCOM | | | |
| FEDERAL TAX | 242. | | 0. | | 0. |
| TO FORM 990-PF, PG 1, LN 18 | 242. | | 0. | | 0. |
| FORM 990-PF | OTHER E | XPENSES | | STATEMENT | 5 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | | (C) - ADJUSTEI E NET INCON | | |
| ADVISORY FEES | 1,737. | 1,73 | 7. | | 0. |
| TO FORM 990-PF, PG 1, LN 23 | 1,737. | 1,73 | 7. | | 0. |
| FORM 990-PF | CORPORAT | E STOCK | | STATEMENT | 6 |
| DESCRIPTION | | | BOOK VALUE | FAIR MARKET VALUE | ı |
| CHARLES SCHWAB FUNDS (SEE ATT | FACHED) | | 655,794. | 699,23 | 6. |
| TOTAL TO FORM 990-PF, PART I | I, LINE 10B | _ | 655,794. | 699,23 | 6. |
| | | | | | |
| FORM 990-PF | CORPORAT | E BONDS | | STATEMENT | 7 |
| FORM 990-PF DESCRIPTION | CORPORAT | | BOOK VALUE | STATEMENT FAIR MARKET VALUE | |
| | | | BOOK VALUE 25,503. | FAIR MARKET | |

| | LIST OF OFFICERS, D AND FOUNDATION MANA | | STATI | EMENT 8 |
|---|--|----|---------------------------------|---------|
| NAME AND ADDRESS | TITLE AND AVRG HRS/WK | | EMPLOYEE BEN PLAN CONTRIB | |
| MARGARET MARY MANATT 1775 OLD 6 ROAD BROOKLYN, IA 52211 | DIRECTOR 1.00 | 0. | 0. | 0. |
| PAM-BENISHEK | SECRETARY 1.00 | 0. | 0. | 0. |
| BRADFORD J MANATT 1775 OLD 6 ROAD BROOKLYN, IA 52211 | PRESIDENT 1.00 | 0. | 0. | 0. |
| MICHELLE M MANATT-MILLER 1775 OLD 6 ROAD BROOKLYN, IA 52211 | DIRECTOR 1.00 | 0. | 0. | 0. |
| ANTHONY JOHN MANATT 1775 OLD 6 ROAD BROOKLYN, IA 52211 | DIRECTOR 1.00 | 0. | 0. | 0. |
| JULIE ANN MANATT 1775 OLD 6 ROAD BROOKLYN, IA 52211 | TREASURER 1.00 | 0. | 0. | 0. |
| TOTALS INCLUDED ON 990-PF, PAG | E 6, PART VIII | 0. | 0. | 0. |

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

BRAD MANATT 1775 OLD 6 ROAD BROOKLYN, IA 52211

TELEPHONE NUMBER

641-522-9206

FORM AND CONTENT OF APPLICATIONS

APPLICATIONS SHOULD BE SUBMITTED IN LETTER FORM WITH THE NAME OF THE ORGANIZATION AND ANY INFORMATION CONCERNING THE REASON THEY ARE SEEKING FUNDS.

ANY SUBMISSION DEADLINES

NONE. HOWEVER, FUNDS WILL BE DISPERSED IN DECEMBER.

RESTRICTIONS AND LIMITATIONS ON AWARDS

ORGANIZATIONS MUST BE TAX-EXEMPT, NON-PROFIT AND LOCATED IN THE BROOKLYN, IOWA AREA.

Merlin & Verna Family Foundation EIN: 20-8112164 Form 990-PF, Part II

Wood Capital Investments Investment Counsel 16772 W Bell Rd. 110-456 Surprise, AZ 85374 (623)399-8510 Fax (623)399-8681

Investment Portfolio As of 12/31/2014

Merlin & Verna Manatt Family Foundation

| 5 5787 A 300 A 300 A 300 A 435 4507 A 500 A 435 4507 A 500 A | Description | Price | Value | Basis | Cost | Unrealized Gain (Loss) | Acquisition |
|--|--------------------------|-------|--------------|----------------|-------------|---------------------------|-------------|
| | | | | | | | |
| | AT&TCom | 33.59 | 187 39 | 193 85 | 34,748 | (6.46) | 11/04/2014 |
| | Aetna Inc New | 88.83 | 26,649 00 | 25,191 15 | 83.971 | 1.457.85 | 09/05/2014 |
| | Albemarle Corp | 60.13 | 18,039.00 | 17,192,55 | 57.309 | 846.45 | 10/23/2014 |
| | Altria Group Inc. | 49.27 | 21.454.66 | 14,587.62 | 33.500 | 6.867.04 | 01/11/2013 |
| | American Capital Agency | 21.83 | 12,089.22 | 12,099.50 | 21.849 | (10.28) | 02/08/2014 |
| | American Express Company | 93.04 | 46,598 79 | 43.705.70 | 87.264 | 2 893 09 | 09/05/2014 |
| | Aspen Insurance Holdings | 43.77 | 13.131.00 | 13.111.65 | 43.706 | 19.35 | 12/10/2014 |
| 200 | CSXCorp | 36.23 | 18,115.00 | 17,491,95 | 34.984 | 623 05 | 12/17/2014 |
| 400 | Cal Maine Foods Inc New | 39.03 | 15,612.00 | 16,358,35 | 40.896 | (746.35) | 12/17/2014 |
| _ | Constellation Brand CI A | 98.17 | 19,634.00 | 17,087,55 | 85.338 | 2.586.45 | 08/14/2014 |
| 500.9805 D | Delta Air Lines Inc New | 49.19 | 24,643,23 | 19,121,95 | 38.169 | 5.521.28 | 10/23/2014 |
| _ | Dow Chemical Company | 45.61 | 13,683.00 | 13,341,95 | 44.473 | 341.05 | 12/17/2014 |
| 302.2799 E | Exxon Mobil Corporation | 92.45 | 27.945.78 | 28,618.35 | 94.675 | (672.57) | 10/23/2014 |
| 200 | Glaxosmithkline Pic Adri | 42 74 | 21,370.00 | 22,744.45 | 45.489 | (1,374,45) | 10/23/2014 |
| 504.6843 H | Hawaiian Elec Industries | 33.48 | 16,896.83 | 13,038.95 | 25.836 | 3,857,88 | 09/05/2014 |
| 535.4627 H | Hi Yid Bond | 28.91 | 15,480.23 | 16,594.95 | 30.992 | (1,114,72) | 04/29/2013 |
| 7.944 Ic | cahn Enterprises Lp | 92.47 | 734 58 | 750.00 | 94.411 | (15.42) | 12/24/2014 |
| 503 0068 Ir | ntel Corp | 36.29 | 18,254.12 | 17,021 95 | 33.840 | 1,232.17 | 10/31/2014 |
| - | Kinder Morgan Inc | 42 31 | 42.31 | 0.00 | 0.000 | 42.31 | 12/03/2014 |
| 403.5964 L | Lexmark Inti Inc CI A | 41.27 | 16,656 42 | 17,355.55 | 43.002 | (699 13) | 10/31/2014 |
| 200 N | Mc Donalds Corp | 93.70 | 18,740 00 | 18,265 55 | 91 328 | 474 45 | 12/17/2014 |
| 300 | P N C Bank Corp | 91.23 | 27,369.00 | 24,655.35 | 82 185 | 2,713 65 | 10/23/2014 |
| 300 T | Feva Pharm Inds Ltd Adrf | 57.51 | 17,253.00 | 17,017.35 | 56.725 | 235.65 | 10/31/2014 |
| 410.7913 V | Vanguard Bond Index Fund | 94 27 | 38,725.30 | 36,930 19 | 89.900 | 1.795.11 | 05/15/2014 |
| 200 | Verifone Systems Inc | 37.20 | 7,440.00 | 7,341,75 | 36.709 | 98.25 | 12/17/2014 |
| 200 | Verizon Communications | 46 78 | 9.356.00 | 9,485,33 | 47 427 | (129 33) | 10/16/2013 |
| | Wal-Mart Stores Inc | 85.88 | 25,764.00 | 25,147.25 | 83 824 | 616.75 | 12/10/2014 |
| | | · | 491,863 86 B | 464,430 74 (A) | | 27,433.12 | |
| | | | | (| | | |
| 7 195 T | Touchstone Strategic | 10.55 | 75.91 (B) | 74 14 (A) | 10.304 — | 1.77 | 12/27/2013 |

Merlin & Verna Family Foundation EIN: 20-8112164 Form 990-PF, Part II

Investment Portfolio As of 12/31/2014

Merlin & Verna Manatt Family Foundation

| Weight | Quantity | Description | Current | Current Value | Cost Basis | Cost | Unrealized Gain (Loss) | Acquisition Date |
|-------------|------------|--|---------|------------------|----------------|--------|---------------------------|---------------------|
| Preferreds | | | | | | | | |
| 1.2% | 325.8029 | Apollo Comi R 8.625% | 26.14 | 8,516.49 | | 25.520 | 201.85 | 10/21/2013 |
| 33% | 1,000 | Dynex Capital 7.625% | 24.20 | 24,200.00 | | 22.221 | 1.979.05 | 08/01/2013 |
| 3.0% | 849.657 | HPT Prefd 7.125% | 26.13 | 22,201 54 | | 24.577 | 1.319.30 | 10/16/2013 |
| 2.8% | 1,064.9791 | Ishares S&P U S Pfd Fund | 39.44 | 42,002.78 | | 37.777 | 1,771,35 | 06/21/2010 |
| 3.4% | 1,004.4168 | Istar Finl Pfd 7.8% | 24.65 | 24,758.87 | 23,556.98 | 23,453 | 1,201,89 | 07/18/2013 |
| 1.5% | 409.0512 | MHO Pfd 9.75% | 25.94 | 10,610 79 | | 25 730 | 85.89 | 09/05/2014 |
| 3.0% | 872.6011 | NLY Preferred 7.5% | 24.85 | 21,684 14 | | 23.117 | 1,512.27 | 10/21/2013 |
| 1.1% | 300 | Red Lion Hotels Pfd 9 5% | 25.65 | 7,695.03 | | 25.508 | 42.76 | 10/21/2013 |
| 16% | 200 | Teekay Offsho Pfd 7.25% | 23.10 | 11,550.00 | | 25.749 | (1.324.55) | 05/21/2014 |
| 1.7% | 200 | Tsakos Energy Pfd 8.875% | 25 45 | 12,725.05 | | 25.239 | 105.60 | 05/21/2014 |
| 2.9% | 854.0733 | Webster Fini Cp 6 4% | 25.00 | 21,351 83 | | 22 414 | 2,208.28 | 09/04/2013 |
| 28.4% | | | • | 207,296 52 (B) | 198,192.83 (A) | | 9,103.69 | |
| Bonds | | | | , | | | | |
| 2 2% | 15,000 | Goodyear Tire | 108.00 | 16,200 00 (D) | 15,044.85 (C) | 00.299 | 1,155.15 | 05/02/2012 |
| | | Accrued Income | | 134.17 D |) | | | |
| Unit Trusts | | | | | | | | |
| 1.5% | 582.4775 | Hi Yld Corp Global Bnd Etf Par 0.00 | 18.80 | 10,950 58 (D) | 10,458.33 | 17.955 | 492.25 | 04/20/2011 |

| | | <u>@</u> |) | | | |
|---|-------------|----------------------|--------|-------|----------|-------------|
| 491,864 + 76 + 207,296 | = 699,236 | | 16,200 | + 134 | + 10,951 | = 27,285 |
| 1-0 Line 10b - FMV 1-1 1-2 1-3 | 1-T Total | 1-0 Line 10c - FMV | 1-1 | 1-2 | 1-3 | 1-T Total |

| ⊗ | <u> </u> |
|--|--|
| 1-0 Line 10b - Cost 464,431 1-1 + 74 1-3 - 6,904 1-4 + 198,193 1-T Total = 655,794 | 1-0 Line 10c - Book Value 15,045 1-1 15,045 1-2 + 10,458 1-T Total = 25,503 |
| | 1-0 1-1 1-2 1-7 |

| © | 9) | | |
|-------|------------|-----------------------|------------------------|
| | 15,045 | 10,458 | 25,503 |
| | | + | B |
| Value | | | |
| Book | | | |
| | Book Value | Book Value 15, | ook Value 15,045 (|

Form **8868** (Rev January 2014)

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Department of the Treasury Internal Revenue Service ► File a separate application for each return.

► Information about Form 8868 and its instructions is at www .ms.gov/fb.m 8868.

| • If you a | ire filing for an Automatic 3-Month Extension, comple | te only Pa | art I and check this box | | | ▶ X | |
|--|--|---------------------------------------|---------------------------------------|---|------------------|------------------|--|
| • If you a | re filing for an Additional (Not Automatic) 3-Month Ex | tension, o | complete only Part II (on page 2 of | this form) | | | |
| Do notco | mplete Part Hunless you have already been granted a | an automa | atic 3-month extension on a previous | sly filed Fo | orm 8868 | | |
| | c filing (e-file). You can electronically file Form 8868 if y | | • | • | | a corporation | |
| | o file Form 990-T), or an additional (not automatic) 3-mo | | | | • | • | |
| | file any of the forms listed in Part I or Part II with the exc | | | | | | |
| | Benefit Contracts, which must be sent to the IRS in pap | | | | | | |
| | irs gov/efile and click on e-file for Chanties & Nonprofits. | | (| | | , | |
| Part I | Automatic 3-Month Extension of Time | | submit original (no copies ne | eded). | | | |
| A corpora | tion required to file Form 990-T and requesting an autor | | | | | | |
| Part I only | | | | | | | |
| | corporations (including 1120-C filers), partnerships, REM | ICs. and t | rusts must use Form 7004 to reques | st an exte | nsion of time | | |
| | ome tax returns. | | | | | ing number | |
| Type or | Name of exempt organization or other filer, see instructions | | | Enter filer's identifying number Employer identification number (EIN) or | | | |
| print | 3 | | | | | | |
| | MERLIN & VERNA MANATT FAMILY FOUNDATION | | | | 20-8112164 | | |
| File by the due date for | the Number of the Political Control of the Pol | | | Social security number (SSN) | | | |
| filing your | 1775 OLD 6 ROAD | · · · · · · · · · · · · · · · · · · · | | | | | |
| return See instructions | 566 | | | | | | |
| | BROOKLYN, IA 52211 | | | | | | |
| | | | | | | | |
| Enter the | Return code for the return that this application is for (file | a separa | te application for each return) | | | 0 4 | |
| | терительный деней и под терительный деней | | | | | <u> </u> | |
| Application | | | Application | | | | |
| ls For | | Code | Is For | | | | |
| Form 990 or Form 990-EZ | | 01 | Form 990-T (corporation) | | | Code 07 | |
| Form 990-BL | | 02 | Form 1041-A | orm 1041-A | | | |
| Form 4720 (individual) | | 03 | Form 4720 (other than individual) | | | 08 | |
| Form 990-PF | | 04 | Form 5227 | | | 10 | |
| Form 990-T (sec. 401(a) or 408(a) trust) | | 05 | Form 6069 | | | 11 | |
| Form 990-T (trust other than above) | | 06 | Form 8870 | | | 12 | |
| | PAM BENISHEK | • | | | | | |
| • The bo | oks are in the care of > 1775 OLD 6 ROAI | о – ві | ROOKLYN, IA 52211 | | | | |
| | one No ▶ 641-522-9206 | | Fax No | | | | |
| | rganization does not have an office or place of business | s in the Ur | | | | | |
| | s for a Group Return, enter the organization's four digit | | • | f this is fo | r the whole o | roup, check this | |
| box ▶ [| If it is for part of the group, check this box | | | | | | |
| | quest an automatic 3-month (6 months for a corporation | | | | 7010 1110 071101 | 101071101011 | |
| | | - | tion return for the organization name | | The extension | on | |
| ıs fo | or the organization's return for | · g | | | | | |
| | X calendar year 2014 or | | | | | | |
| اً ﴿ | tax year beginning | an | d ending | | | | |
| | | , | | · · · | | | |
| 2 If th | e tax year entered in line 1 is for less than 12 months. c | heck reas | on. Initial return | Final retu | rn | | |
| <u> </u> | If the tax year entered in line 1 is for less than 12 months, check reason. Change in accounting period | | | | | | |
| 3a If th | | | | | | | |
| | nonrefundable credits. See instructions | | | 3a | \$ | 323. | |
| | If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and | | | sa | | | |
| | mated tax payments made Include any pnor year overp | | | - OF | | 475. | |
| | ance due. Subtract line 3b from line 3a. Include your pa | | | 3b | \$ | 4/3. | |
| | ising FFTPS (Flectronic Federal Tax Payment System). | • | | 30 | | 0 | |

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

Form 8868 (Rev. 1-2014)

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