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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.

OMB No 1545-0052

Department of the Treasury Internal Revenue Service ▶ Information about Form 990-PF and its separate instructions is at www.ms.gov/form 990pf. For calendar year 2014 or tax year beginning and ending A Employer identification number Name of foundation BSL FOUNDATION 26-1326999 Number and street (or P O box number if mail is not delivered to street address) Room/suite **B** Telephone number 2404 NE PARK DRIVE 515-253-0084 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here 50111 GRIMES, IA G Check all that apply: Initial return Initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust _____ Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year J Accounting method: X Cash F If the foundation is in a 60-month termination Other (specify) under section 507(b)(1)(B), check here (from Part II, col. (c), line 16) (Part I, column (d) must be on cash basis) ▶\$ 150,284. Part I Analysis of Revenue and Expenses (d) Disbursements (c) Adjusted net (a) Revenue and (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) charitable purposes (cash basis only) expenses per books income ıncome N/A 0. Contributions, gifts, grants, etc., received 2 Check X If the foundation is not required to attach Sch B Interest on savings and temporary cash investments 331 331 STATEMENT 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 0. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 331 331 12 Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees c Other professional fees ම් 17 Interest MAY 2 1 18 Taxes 19 Depreciation and depletion OGDEN 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses Operating 24 Total operating and administrative expenses. Add lines 13 through 23 67,450 25 Contributions, gifts, grants paid 26 Total expenses and disbursements 67,450 0 67,450. Add lines 24 and 25

C Adjusted net income (if negative, enter -0-) LHA For Paperwork Reduction Act Notice, see instructions.

a Excess of revenue over expenses and disbursements

b Net investment income (if negative, enter -0-)

27 Subtract line 26 from line 12:

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331

-67,119

N/A

For	n 99	0-PF (2014) BSL FOUNDATION		26-2	1326999 Page 2
D	art	Bàlance Sheets Attached schedules and amounts in the description	Beginning of year	End of	
Column Should be for end-or-year amounts only		column should be for end-of-year amounts only	(a) Book Value		(c) Fair Market Value
	1	Cash - non-interest-bearing	217,403.	150,284.	150,284.
		Savings and temporary cash investments			· -
	3	Accounts receivable ►			
		Less: allowance for doubtful accounts ▶			
		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 ▶			· · · · · · · · · · · · · · · · · · ·
ts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges		<u> </u>	
⋖		Investments - U.S. and state government obligations			
		Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment; basis			
		Less accumulated depreciation			····
		Other assets (describe)			
	16	Total assets (to be completed by all filers - see the	01 5 400	150 004	150 004
_	_	instructions. Also, see page 1, item I)	217,403.	150,284.	150,284.
	l	Accounts payable and accrued expenses			
	18	Grants payable			
ies	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>ia</u>	21	Mortgages and other notes payable			
	22	Other liabilities (describe)			
		- 111 1111 (add as 47 through 00)	0.	0.	
_	23	Total liabilities (add lines 17 through 22)	U•	<u></u>	
		Foundations that follow SFAS 117, check here			
S		and complete lines 24 through 26 and lines 30 and 31.			
Net Assets or Fund Balances	24	Unrestricted			
ala	25	Temporarily restricted			
B 0	26	Permanently restricted Foundations that do not follow SFAS 117, check here			
F		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
<u>p</u>	27	Capital stock, trust principal, or current funds	0.	0.	
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
1SS	29	Retained earnings, accumulated income, endowment, or other funds	217,403.	150,284.	
et/	30	Total net assets or fund balances	217,403.	150,284.	
Z	30	Total liet assets of fully balances	217, 103	130,201.	
	31	Total liabilities and net assets/fund balances	217,403.	150,284.	
\equiv					
LP	art	III Analysis of Changes in Net Assets or Fund B	alances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)		1	217,403.
2	-	r amount from Part I, line 27a		2	-67,119.
3		er increases not included in line 2 (itemize)		3	0.
4	Add	lines 1, 2, and 3		4	150,284.
5	Dec	reases not included in line 2 (itemize)		5	0.
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	150,284.
					Form 990-PF (2014)

Form 990-PF (2014) BS: Part IV Capital Gains	L FOU	NDATION sses for Tax on Ir	nyestmen	t Income		2	<u> 26-1326</u>	5999	Page 3
(a) List and des	scribe the ki	nd(s) of property sold (e.g or common stock, 200 sh	J., real estate,	Lincome	(b) How acquired P - Purchase D - Donation	(c) Date (mo.,	acquired day, yr.)	(d) Dat (mo., da	e sold ay, yr.)
1a								-	
b No	ONE								
<u> </u>									
_d									
<u>e</u>	1 (0.1	D	1.0-	-	<u> </u>			 	
(e) Gross sales price	(1)	Depreciation allowed (or allowable)		st or other basis expense of sale			Gain or (loss) is (f) minus (g	3)	
a b						-			
C						-			
d		· · · · · · · · · · · · · · · · · · ·							
е									
Complete only for assets show	ving gain in	column (h) and owned by	the foundation	n on 12/31/69			Col. (h) gaın r		
(i) F.M.V. as of 12/31/69	((j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any	cò	l. (k), but Losses	not less than s (from col. (h	-0-) or)))	
a		···-							
b									
d									
<u>e</u>									
2 Capital gain net income or (net	capital loss)	If gain, also ente $f(x) = \int_{0}^{x} f(x) dx$			} 2				
3 Net short-term capital gain or (I if gain, also enter in Part I, line if	8, column (d		nd (6):		$\left \cdot \right $				
If (loss), enter -0- in Part I, line Part V Qualification		section 4940(e) for	Reduced	Tax on Net	lnvestment in	nome			
(For optional use by domestic priva						301116			
		•	4340(a) tax on	i ilet ilivestillelit il	icome.)				
If section 4940(d)(2) applies, leave	this part bl	ank.							
Was the foundation liable for the se If "Yes," the foundation does not qu				•	riod?		ļ	Yes	X No
1 Enter the appropriate amount i					entries.			-	
(a) Base period years Calendar year (or tax year begin	ning in)	(b) Adjusted qualifying dis	stributions	Net value of no	(c) encharitable-use assets		Distribu (col. (b) divid	d) ition ratio ded by col.	(c))
2013		5	2,700.		47,668	3.			05563
2012		3	5,700.		10,671				45516
2011			4,950.		20,742			2.64	49214
2010			9,525.		25,019				<u> 79799</u>
2009		3	3,200.		34,658	3.		.9!	<u>57932</u>
2 Total of line 1, column (d)						2		9.63	38024
3 Average distribution ratio for th the foundation has been in exis		•	on line 2 by 5,	or by the number	of years	3		1.92	27605
4 Enter the net value of noncharit	able-use as	sets for 2014 from Part X,	line 5			4		189	,489.
5 Multiply line 4 by line 3						5		365	,260.
6 Enter 1% of net investment inco	ome (1% of	Part I, line 27b)				6			3.
7 Add lines 5 and 6						7		365	,263.
8 Enter qualifying distributions fro	om Part XII.	line 4				8			,450.
If line 8 is equal to or greater the See the Part VI instructions.			t 1b, and comp	lete that part usin	g a 1% tax rate.	<u> </u>		<u> </u>	
						_		. 000	DE (0044)

	n 990-PF (2014) BSL_FOUNDATION art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	<u>26-</u> 948 -	1326 - see i	<u>999</u> nstru	ıctio	Page 4
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.		T			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1	ļ			7.
	of Part I, line 27b					
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				7.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5				7.
6	Credits/Payments;					
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a		i			
b	Exempt foreign organizations - tax withheld at source					
C	: Tax paid with application for extension of time to file (Form 8868)		ŀ			
	I Backup withholding erroneously withheld 6d					
7	Total credits and payments. Add lines 6a through 6d	7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8	l .			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	ľ			7.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
	Enter the amount of line 10 to be: Credited to 2015 estimated tax	11				
	art VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın			Yes	No
	any political campaign?			1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition	?		1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published					
	distributed by the foundation in connection with the activities					
C	Did the foundation file Form 1120-POL for this year?			1c		x
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				-	
	(1) On the foundation. \blacktriangleright \$ 0 . (2) On foundation managers. \blacktriangleright \$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ►\$ 0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		x
	If "Yes," attach a detailed description of the activities.		Ì	_		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, o	r				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b	o If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	law				
	remain in the governing instrument?			6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV			7	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	IA					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		_			1
	of each state as required by General Instruction G? If "No," attach explanation			_8b		X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar				
	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		<u>x</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses S'	<u> TMT</u>		10	Х	
			Forn	n 990	-PF((2014)

		<u> 26-1326</u>	<u>999</u>	F	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		<u> </u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory p	rıvıleges?			
	If "Yes," attach statement (see instructions)		12		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	X	
	Website address ► N/A				
14	The books are in care of ► BRUCE A. BAUMGARN Telephone no.			084	
	Located at ► 2404 NE PARK DRIVE, GRIMES, IA	ZIP+4 ► <u>50</u>	111		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			, ▶	Ш
	and enter the amount of tax-exempt interest received or accrued during the year	15		/A	NI-
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,		· •	Yes	No
	securities, or other financial account in a foreign country?		16	+	<u> </u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name	e or the			
Pa	foreign country ► Int 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.		Ţ	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?	s X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
		s X No			
		s X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	es 🗶 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)?	s X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"				
	ıf the foundation agreed to make a grant to or to employ the official for a period after				
	- · · · · · · · · · · · · · · · · · · ·	s X 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			ŀ	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here	▶∟		ŀ	
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			- [37
_	before the first day of the tax year beginning in 2014?		1c		<u>X</u>
Z	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)):			İ	
	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginnin	a			
a		es X No			
	If "Yes," list the years \blacktriangleright	.5 (22) 110		Ì	
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	1	
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
	>				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				
		es X No			
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons aff				
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to d				
	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	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		<u> </u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purposi	e that	,		77
	had not been removed from jeopardy before the first day of the tax year beginning in 2014?		4b		<u> X</u>

4b X Form **990-PF** (2014)

Orm 990-PF (2014) BSL FOUNDATION Part VILB Statements Departing Activities for Which I	Farma 4700 May 5	.	<u> 26-13269</u>	199	Page 6
Part VII-B Statements Regarding Activities for Which	rorm 4/20 May Be F	required (contin	ued)	ı	
5a During the year did the foundation pay or incur any amount to:	10.15())0				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section)			es X No		
(2) Influence the outcome of any specific public election (see section 4955); o	or to carry on, directly or indire		[32]		
any voter registration drive?	0		es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		[TE]		
4945(d)(4)(A)? (see instructions)			es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or i		च्चि		
the prevention of cruelty to children or animals?	dar tha avecations decorbed		es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unsection 53.4945 or in a current notice regarding disaster assistance (see instru		in Regulations	NT / 7	r.	
Organizations relying on a current notice regarding disaster assistance check h	•		N/A	5b	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		unod		İ	İ
expenditure responsibility for the grant?					
If "Yes," attach the statement required by Regulations section 53 494.		I/A L Ye	es L No		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	• •				
a personal benefit contract?	pay premiums on	[] v.	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	percenal hanafit contract?	16		C.	v
If "Yes" to 6b, file Form 8870.	iersonai benenii contract?		-	6b	<u> </u>
7a At any time during the tax year, was the foundation a party to a prohibited tax s	halter transaction?		es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attributed tax s		T 6		7b	
Part VIII Information About Officers, Directors, Trust		nagers Highly		/ U	
Paid Employees, and Contractors	ccs, i candation in	inagers, riiging			
List all officers, directors, trustees, foundation managers and their	compensation.	*			
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e)	Expense unt, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	acco	unt, other owances
BRUCE A. BAUMGARN	PRESIDENT/SEC	 	oo iii poiloadani		
2404 NE PARK DRIVE					
GRIMES, IA 50111	1.00	0.	0.		0.
BARBARA K. BAUMGARN	VICE PRESIDEN				
2404 NE PARK DRIVE					
GRIMES, IA 50111	1.00	0.	0.		0.
				İ	
Compensation of five highest-paid employees (other than those inc		enter "NONE."			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e)	Expense unt, other
	devoted to position	(6) 55	compensation	allo	wances
NONE					
· · · · · · · · · · · · · · · · · · ·					
				ļ	
				L	
otal number of other employees paid over \$50,000			>		0

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Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	dation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, en	iter "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		▶ (
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant stanumber of organizations and other beneficiaries served, conferences convened, research papers p	atistical information such as the	Expenses
1 N/A	Toddood, etc.	
1 Μ/Δ		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2.	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		
3		

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Total. Add lines 1 through 3

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

4940(e) reduction of tax in those years.

	2	6-1326999	Page 8
gn foui		ns, see instructions)	
	1a		<u> </u>
	1b	192,	<u>0.</u> 375.
	1c		
	1d	192	375.
0.			
	2		0.
	3	192	375.
	4	2	886.
	5	189	375. 886. 489.
	6	9	474.
tions ar	nd certa		
	1	9	474.
7.	-	_	
	2c		7.
	3	9	7. 467. 0. 467.
	4	- 1	0.
	5	9	467
	6		0.
	7	0	167

а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	67,450.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	<u>-</u>
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	67,450.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	<u> </u>
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	67,450.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies	for the section

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Part XIII Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI,				
line 7				9,467.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			0.	
b Total for prior years:	į			
		0.		
3 Excess distributions carryover, if any, to 2014:				
a From 2009 31, 467.		:		
b From 2010 38,274.				
c From 2011 53,913.				
d From 2012 35, 166.				
e From 2013 50,317.	200 127			
f Total of lines 3a through e	209,137.			
4 Qualifying distributions for 2014 from				
Part XII, line 4: > \$ 67, 450.			0.	
a Applied to 2013, but not more than line 2a				
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)		- 0.		
c Treated as distributions out of corpus	0.			
(Election required - see instructions) d Applied to 2014 distributable amount	0.			9,467.
e Remaining amount distributed out of corpus	57,983.			9,407.
5 Excess distributions carryover applied to 2014	0.			0.
(If an amount appears in column (d), the same amount	0.			<u> </u>
must be shown in column (a))				
6 Enter the net total of each column as indicated below:	0.65 100			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	267,120.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of				
deficiency has been issued, or on which				
the section 4942(a) tax has been previously		0.		
assessed		0.		
d Subtract line 6c from line 6b. Taxable		0.		
amount - see instructions e Undistributed income for 2013. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2014. Subtract			•	18041
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				
not applied on line 5 or line 7	31,467.			
9 Excess distributions carryover to 2015.				
Subtract lines 7 and 8 from line 6a	235,653.			
10 Analysis of line 9:				
a Excess from 2010 38,274.				
b Excess from 2011 53,913.				
c Excess from 2012 35, 166.				
d Excess from 2013 50, 317.				
e Excess from 2014 57,983.	İ			Form 990-PF (2014)
11-24-14				FORTH 330-F F (2014)

Part XIV Private Operating Fo		structions and Part VII-	A guestion 9)	26-1	326999 Page 10
1 a If the foundation has received a ruling or	· · · · · · · · · · · · · · · · · · ·		7.; question 5)		· · · · · · · · · · · · · · · · · · ·
foundation, and the ruling is effective for			_ 1	0/24/07	
b Check box to indicate whether the found		=	· —		4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		1042())(0)_
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for	(-)	(-/	ζ-7	(-/	(0)
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,				
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization		· · · · · · · · · · · · · · · · · · ·			
(4) Gross investment income Part XV Supplementary Info	rmation (Comple	ate this part only	if the foundati	ion had \$5 000 or n	nore in assets
at any time during t			ii tii e loundati	ion nau \$5,000 or i	ilole III assets
1 Information Regarding Foundation	-				
a List any managers of the foundation who		than 2% of the total cont	ributions received by	the foundation before the c	lose of any tay
year (but only if they have contributed in			indutions received by	the loundation before the c	lose of any tax
NONE		· // //			
b List any managers of the foundation wh	o own 10% or more of t	he stock of a conforation (or an equally large o	ortion of the ownership of a	nartnership or
other entity) of which the foundation has			or arroquany large p	ortion of the ownership of a	partitoromp of
NONE	_				
2 Information Regarding Contributi	ion Grant Gift Loan	Scholarshin etc. Pr	ourame:	.	·
Check here I if the foundation o				ies not accept upsolicited re	quests for funds. If
the foundation makes gifts, grants, etc.	•	•	=	•	•
a The name, address, and telephone num	`				
BRUCE A. BAUMGARN, 5					
2404 NE PARK DRIVE,					
b The form in which applications should b			nould include.		
CONTACT THE FOUNDATI					
c Any submission deadlines:	011 1 011 111 11	<u> </u>			
NONE					
d Any restrictions or limitations on awards	s, such as by geographic	cal areas, charitable fields	kinds of institutions	or other factors:	
NONE	s, caon as of goograpine	a. arous, onurnation noids,	as or montations,		
					
423601 11-24-14					Form 990-PF (2014)

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year ALPHA CENTER NONE PUBLIC CHARITY OPERATING 801 EAST 41ST STREET SIOUX FALLS, SD 57105 500. NONE PUBLIC CHARITY OPERATING AMERICA'S FAMILY COACHES 2540 106TH STREET 1,000. URBANDALE, IA 50322 NONE PUBLIC CHARITY OPERATING ASSUMPTION CATHOLIC CHURCH 1906 SYCAMORE GRANGER, IA 50109 12,500. BENET PLACE NONE PUBLIC CHARITY OPERATING 420 MINNESOTA BLVD. SE SAINT CLOUD, MN 56304 2,000. BERNIE LORENZ RECOVERY HOUSE NONE PUBLIC CHARITY OPERATING 4014 KINGMAN BLVD DES MOINES IA 50311 500. CONTINUATION SHEET(S) ➤ 3a 67,450. Total b Approved for future payment NONE Total **▶** 3b

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)
Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
	- 5555	**-			
b	-		1		
c	1				1
d	1				
e			 		· · · · · · · · · · · · · · · · · · ·
f					
g Fees and contracts from government agencies	-				
Membership dues and assessments					
Interest on savings and temporary cash					
investments			14	331.	
Dividends and interest from securities					
5 Net rental income or (loss) from real estate:					
a Debt-financed property					- 45
b Not debt-financed property					
3 Net rental income or (loss) from personal					
property					
7 Other investment income			1		
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a			-		
b					
C					
c	_		-		
c	_				
	_	0	•	331.	
e2 Subtotal. Add columns (b), (d), and (e)	_	0	•		331
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e)		0	•		
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.				13	
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities	s to the Acce	omplishment of I	Exemp	13 _ t Purposes	331
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Acco	omplishment of I	Exemp	13 _ t Purposes	331
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities	s to the Acco	omplishment of I	Exemp	13 _ t Purposes	331
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Acco	omplishment of I	Exemp	13 _ t Purposes	331
e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Acco	omplishment of I	Exemp	13 _ t Purposes	331
e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Acco	omplishment of I	Exemp	13 _ t Purposes	331
e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Acco	omplishment of I	Exemp	13 _ t Purposes	331
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Acco	omplishment of I	Exemp	13 _ t Purposes	331
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Acco	omplishment of I	Exemp	13 _ t Purposes	331
e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Acco	omplishment of I	Exemp	13 _ t Purposes	331
e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Acco	omplishment of I	Exemp	13 _ t Purposes	331
e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Acco	omplishment of I	Exemp	13 _ t Purposes	331
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Acco	omplishment of I	Exemp	13 _ t Purposes	331
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Acco	omplishment of I	Exemp	13 _ t Purposes	331
e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Acco	omplishment of I	Exemp	13 _ t Purposes	331
e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Acco	omplishment of I	Exemp	13 _ t Purposes	331
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Acco	omplishment of I	Exemp	13 _ t Purposes	331
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Acco	omplishment of I	Exemp	13 _ t Purposes	331
e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Acco	omplishment of I	Exemp	13 _ t Purposes	331
e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Acco	omplishment of I	Exemp	13 _ t Purposes	331
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Acco	omplishment of I	Exemp	13 _ t Purposes	331

Part XVI		OUNDATION		nd Transaction		d Deletiensk		1326999	Page 13
Part AVI	Exempt Organ		sters to a	nd Transaction	s an	a Relations	iips with Nor	icnaritable	
4 Distance			of the fallering	- with any other organi	-at-an	described in contro	n F01(a) of		es No
	organization directly or indir						סו 50 ו(כ) סו		62 140
	le (other than section 501(c)				yanıza	11101157		ł l	
	rs from the reporting founda	ation to a nonchanta	die exempt org	janization of.				4-(4)	
(1) Ca								1a(1)	X X
	ner assets							1a(2)	- X
_	ansactions:		_						
	les of assets to a noncharital							1b(1)	- X
	rchases of assets from a nor		organization					1b(2)	Х Х Х
	ntal of facilities, equipment,	or other assets						1b(3)	- X -
	imbursement arrangements							1b(4)	X
	ans or loan guarantees							1b(5)	<u> X</u>
	rformance of services or me							1b(6)	<u> </u>
-	of facilities, equipment, ma	-						1c	X
	nswer to any of the above is	· ·							s,
	ices given by the reporting fo			ed less than fair market	value i	in any transaction	or sharing arrangei	ment, show in	
	(d) the value of the goods,								
(a) Line no	(b) Amount involved	(c) Name o		exempt organization		(0) Description	of transfers, transaction	ns, and sharing arrar	gements
			N/A						
	··· · · · · ·								
				<u> </u>					
				 -					
	344-								
						<u> </u>			
	oundation directly or indirec	-			ganızat	tions described		г	[]
	on 501(c) of the Code (other)(3)) or in sect	tion 52/7				L Yes	X No
b If "Yes,	complete the following sch			(h) Turn of accompat	<u></u>		a) December of re	letionabia	
	(a) Name of org	janization		(b) Type of organizati	on	(c) Description of re	lationship	
	N/A								
			·						
									
Lin	der penalties of perjury, I declare	that I have examined th	io return, includin	a accompanying schedules	and eta	atemente, and to the l	pact of my knowledge		
	d belief, it is true, correct, and cor							May the IRS dis	
Here	May	/		4 notiztic	_	PREGER		shown below (s	ee instr)?
	Signature of officer or trustee			Doto		PRESID	ENT.	_ LX Yes	U No
	· 		Droparor'o o	Date	l r	Date	Check If	PTIN	
	Print/Type preparer's na		Preparer's s	ignatur c	'		self- employed	I TITY	
Paid	RONALD E.		DONE	, 10 Min	, 4	5/11/10	oon omployed	D010641	0.0
Prepare	CPA/ABV, A			E. NIELSE	74 ~	-1.1/12	Frants Fin N 4	P010641	
Use Onl		r TONLARS(маггди	דחד			Firm's EIN ► 4	1-0/46/4	7
JJ U UIII		EO MITTO	000 13	NTS CITTOR	200		-		
	Firm's address ► 55						Dhans E1	E 222 44	0.0
	_ WE	ST DES MO	TNES,	IA 50266-5	<u> 3 U 4</u>		Phone no. 51	5-222-44	
								Form 990-	 (2014)

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BSL FOUNDATION

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution show any relationship to Foundation Amount status of any foundation manager Name and address (home or business) or substantial contributor recipient NONE PUBLIC CHARITY OPERATING BIRTHRIGHT, LTD 5806 HICKMAN ROAD 500. DES MOINES, IA 50322 NONE PUBLIC CHARITY OPERATING CRU 100 LAKE HART DRIVE ORLANDO, FL 32832 20,000. CREIGHTON UNIVERSITY NONE PUBLIC CHARITY OPERATING 2500 CALIFORNIA PLAZA OMAHA, NE 68178 550. PUBLIC CHARITY OPERATING NONE DOWLING CATHOLIC HIGH SCHOOL 1400 BUFFALO ROAD WEST DES MOINES, IA 50265 2,750. NONE PUBLIC CHARITY OPERATING FAMILY LIFE PO BOX 7111 LITTLE ROCK, AR 72223 300. NONE PUBLIC CHARITY OPERATING FEED MY STARVING CHILDREN 401 93RD AVENUE NW 1,000. COON RAPIDS, MN 55433 PUBLIC CHARITY OPERATING FOOD FOR THE POOR NONE 6401 LYONS ROAD COCONUT CREEK, FL 33073 1,200. NONE PUBLIC CHARITY OPERATING HERITAGE FOUNDATION 214 MASSACHUSETTS AVENUE NE WASHINGTON, DC 20002-4999 5,000. HILLSDALE COLLEGE NONE PUBLIC CHARITY OPERATING 33 EAST COLLEGE STREET 1,050. HILLSDALE, MI 49242 JAMESTOWN COLLEGE NONE PUBLIC CHARITY OPERATING 6000 COLLEGE LANE JAMESTOWN ND 58405 5,000. Total from continuation sheets 50 950

26-1326999

_•	BSL	FOU	NDATION

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
MAKE-A-WISH FOUNDATION OF IOWA	NONE	PUBLIC CHARITY	OPERATING	
3024 104TH STREET JRBANDALE, IA 50322				1,00
MARY'S WISH	NONE			
РО ВОХ 586				!
WACONIA, MN 55387		<u> </u>	OPERATING	1,50
MOTHER OF GOD MONASTERY	NONE	PUBLIC CHARITY	OPERATING	
ATERTOWN, SD 57201				50
NEBRASKA FAMILY ALLIANCE	NONE	PUBLIC CHARITY	OPERATING	
1106 E STREET LINCOLN. NE 68508				30
OMAHA FOOD BANK	NONE	PUBLIC CHARITY	OPERATING	
10525 J STREET				
OMAHA, NE 68127				30
PARADISUS DEI	NONE		OPERATING	
PO BOX 19127	NONE		OF ERRITING	
HOUSTON, TX 77224				50
PUPPY JAKE FOUNDATION 4020 JOHN LYNDE ROAD	NONE	PUBLIC CHARITY	OPERATING	
DES MOINES, IA 50312				1,00
RUTH HARBOR	NONE	PUBLIC CHARITY	OPERATING	
534 42ND STREET DES MOINES, IA 50312				50
SECOND SIDE MINISTRIES	NONE	PUBLIC CHARITY	OPERATING	
900 MEMORY LANE				4.50
PIERRE, SD 57501				4,50
SMILE TRAIN	NONE	PUBLIC CHARITY	OPERATING	
РО ВОХ 96231	[
WASHINGTON DC 20090-6231 Total from continuation sheets			<u> </u>	50

26-1326999

	_		BSL	FOUN	<u> MOITADI</u>

Part XV Supplementary Information	า			
3 Grants and Contributions Paid During the	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
ST. JUDE'S CHILDREN'S RESEARCH HOSPITAL	NONE	PUBLIC CHARITY	OPERATING	
332 N. LAUDERDALE				
MEMPHIS, TN 38105				1,500.
WOUNDED WARRIOR PROJECT 4899 BELFORT ROAD, SUITE 300 JACKSONVILLE, FL 32256	NONE	PUBLIC CHARITY	OPERATING	500.
SIENA/FRANCIS HOUSE MEN'S SHELTER	NONE	PUBLIC CHARITY	OPERATING	
1702 NICHOLAS ST. OMAHA, NE 68102				500.
NORTHVIEW COMMUNITY CHURCH 18303 BOTHELL EVERETT HWY	NONE	PUBLIC CHARITY	OPERATING	
BOTHELL, WA 98012				500.
				-
Total from continuation sheets				<u> </u>

FORM 990-PF I	NTEREST	ON	SAVINGS	AND	TEMPORAL	RY C	CASH	INVESTMENTS	STATEMENT	1
SOURCE BANK IOWA TOTAL TO PART I, LINE 3			_	(A) REVENUE PER BOOKS		(B) NET INVESTMENT INCOME		(C) ADJUSTED NET INCOME		
			-	331.		1.	331.			
		3		331.		1.	331.			
FORM 990-PF		LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10					STATEMENT	2		
NAME OF CONTRI	BUTOR			7	ADDRESS					
BRUCE A. BAUMG	ARN			-	2404 NE	PARI	K DR	IVE		

GRIMES, IA 50111