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Department of the Treasury

Internal Revenue Service

Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. OMB No 1545-0052

Open to Public Inspection

For calendar year 2014 or tax year beginning 2014, and ending Name of foundation A Employer identification number TOMSON FAMILY FOUNDATION TRUST 35-6947483 Number and street (or P O box number if mail is not delivered to street address) Room/suite Telephone number (see instructions) (641) 423-1600 2601 FOURTH STREET SW City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here • • MASON CITY, IA 50401 G Check all that apply Initial return of a former public charity Initial return 1 Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach Address change Name change computation H Check type of organization: X Section 501(c)(3) exempt private foundation 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 . J Accounting method X Cash Fair market value of all assets at Accrual F If the foundation is in a 60-month termination end of year (from Part II, col (c), line Other (specify) under section 507(b)(1)(B), check here . > 6,096,280. 16) ▶ \$ (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The (d) Disbursements (a) Revenue and total of amounts in columns (b), (c), and (d) (b) Net investment (c) Adjusted net for charitable expenses per may not necessarily equal the amounts in income income purposes books column (a) (see instructions)) (cash basis only) 329,745. Contributions, gifts, grants, etc , received (attach schedule) . if the foundation is **not** required to attach Sch B 2 Check ▶ 370 370 ATCH 1 3 Interest on savings and temporary cash investments. 179,840. 179,840. ATCH 2 Dividends and interest from securities Net rental income or (loss) CLANNED MAY 2 49,787. Net gain or (loss) from sale of assets not on line 10 Gross sales pnce for all assets on line 6a 907,251 49,787 Capital gain net income (from Part IV, line 2) . Net short-term capital gain. . . Income modifications . 10a Gross sales less returns and allowances . . Less Cost of goods sold . Gross profit or (loss) (attach schedule) Other income (attach schedule) 11 559,742 Total. Add lines 1 through 11 229,997 12 13 Compensation of officers, directors, trustees, etc . . Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits 56 16a Legal fees (attach schedule) ATCH 3.... 56. 750. 750 b Accounting fees (attach schedule)ATCH 4 Administrative 1,044 1,044 Other professional fees (attach schedule), [5] 17 1,917. 1,917. 18 Taxes (attach schedule) (see instructions)[6]. 19 Depreciation (attach schedule) and depletion. 20 21 Travel, conferences, and meetings 22 Printing and publications пg 23 Other expenses (attach schedule) Operații 25 Total operating and administrative expenses. 3,767 3,767 Add lines 13 through 23. 426,000. 426,000. Contributions, gifts, grants paid 429,767. 3,767 426,000. 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12 129,975. a Excess of revenue over expenses and disbursements . . 226,230. b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-).

2779323

Form 990-PF (2014)

| Fo | rm 990 | -PF (2014) TOMSON FAMILY FOUNDAT | TION TRUST | 3 | 5-6947483 Page 2 |
|-------------------------|----------|---|--|-----------------|--|
| | | Attached schedules and amounts in the | Beginning of year | End | of year |
| ľ | art II | Balance Sheets description column should be for end-of-year amounts only (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash - non-interest-bearing | | | |
| | 2 | Savings and temporary cash investments | 219,064. | 110,262 | . 110,262 |
| | 3 | Accounts receivable | | | |
| | | Less allowance for doubtful accounts ▶ | | | |
| | 4 | Pledges receivable | | | |
| | | Less allowance for doubtful accounts ▶ | | | |
| | 5 | Grants receivable | | | |
| | 6 | Receivables due from officers, directors, trustees, and other | | | |
| | • | disqualified persons (attach schedule) (see instructions) | | | |
| | 7 | Other notes and loans receivable (attach schedule) | · · | | , |
| | ' | Less allowance for doubtful accounts ▶ | | | |
| s | 8 | Inventories for sale or use | | | |
| Assets | 9 | Prepaid expenses and deferred charges | | | |
| As | 10 a | | | | |
| - | I TO a | Investments - U S and state government obligations (attach schedule). Investments - corporate stock (attach schedule) ATCH 7 | 3,933,934. | 4,647,711 | 5,986,018. |
| | ь | investments - corporate stock (attach schedule) | 475,000. | 4,047,711 | 3,500,010 |
| | 11 C | Investments - corporate bonds (attach schedule) ATCH 8 Investments - land, buildings, and equipment basis Less accumulated depreciation (attach schedule) | 475,000. | | |
| | | (attach schedule) | | | |
| | 12 13 | Investments - mortgage loans | | | |
| | 14 | | | | _ |
| | | equipment basis Less accumulated depreciation | | | |
| | l | equipment basis Less accumulated depreciation (attach schedule) | | | + |
| | 15 | Other assets (describe | | | |
| | 16 | Total assets (to be completed by all filers - see the | 4 605 000 | 4 858 083 | , |
| _ | | instructions Also, see page 1, item I) | 4,627,998. | 4,757,973 | . 6,096,280 |
| | 17 | Accounts payable and accrued expenses | | | 4 |
| | 18 | Grants payable | | | 4 |
| es | 19 | Deferred revenue | | | 4 |
| ≣ | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | 4 |
| Liabilities | 21 | Mortgages and other notes payable (attach schedule) | | | _} |
| _ | 22 | Other liabilities (describe | | | |
| | | | | | |
| _ | 23 | Total liabilities (add lines 17 through 22) | 0 | | <u>d</u> |
| S | | Foundations that follow SFAS 117, check here . ▶ ☐ and complete lines 24 through 26 and lines 30 and 31. | | | |
| nces | 24 | Unrestricted | | | _ |
| Net Assets or Fund Bala | 25 | Temporarily restricted | | | |
| 8 | 26 | Permanently restricted | | | |
| Ĕ | | Foundations that do not follow SFAS 117, $\blacktriangleright \boxed{X}$ | | | |
| ī | 1 | check here and complete lines 27 through 31. | | | |
| 0 | 27 | Capital stock, trust principal, or current funds | | | |
| šet | 28 | Paid-in or capital surplus, or land, bldg , and equipment fund | | | 7 |
| Asi | 29 | Retained earnings, accumulated income, endowment, or other funds | 4,627,998. | 4,757,973 | .] |
| t e | 30 | Total net assets or fund balances (see instructions) | 4,627,998. | 4,757,973 | .] |
| Z | 31 | Total liabilities and net assets/fund balances (see | | | 7 |
| | | instructions) | 4,627,998. | 4,757,973 | |
| E | art | Analysis of Changes in Net Assets or Fund Balan | | <u> </u> | |
| | | al net assets or fund balances at beginning of year - Part I | | ust agree with | |
| • | | I-of-year figure reported on prior year's return) | | - | 4,627,998 |
| 2 | | er amount from Part I, line 27a | | | 129,975 |
| 2 | Oth | | | | |
| | | I lines 1, 2, and 3 | | | 4,757,973 |
| | | creases not included in line 2 (itemize) ▶ | | | + |
| | | al net assets or fund balances at end of year (line 4 minus | line 5) - Part II, column (h) | | 4,757,973 |
| | | ar not assets of fund balances at end of year (line 4 Illinus | into o _{f i} artii, widitiii (b | <u>, 00 0</u> | 1,.3,,5,5 |

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| _ | • |
|---|---|
| | |
| | |

| Part | Capital Gains | and Losses for Tax on Inv | estment Income | | | |
|------------|-------------------------------------|---|---|------------------------------|--|--------------------|
| | (a) List and | d describe the kind(s) of property sold (| (e g , real estate, | (b) How acquired | (c) Date | (d) Date sold |
| | 2-story b | rick warehouse, or common stock, 200 | shs MLC Co) | P - Purchase D - Donation | acquired (mo, day, yr) | (mo, day, yr) |
| 1a | SEE PART IV SCHEI | DULE | | | | |
| b | | | | | | |
| _c | <u> </u> | - | | | | |
| _d | | | | | | |
| е | | | | | | |
| | (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | | (h) Gain or (lo (e) plus (f) minu | |
| a | | | | | | |
| <u>b</u> | | | | ļ | | |
| _ <u>c</u> | | | | | | |
| _d | | | | | | |
| _е | | | | | | |
| | Complete only for assets | showing gain in column (h) and owner | ed by the foundation on 12/31/69 | (1) | Gains (Col (h) g | ain minus |
| (i) | F M V as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col (i) over col (j), if any | | (k), but not less t Losses (from co | han -0-) or |
| a | | | | | | |
| _b_ | | | | | | |
| <u> </u> | | | | | | |
| _d | | | | | | |
| е | | | | | | |
| 2 (| Capital dain not income | or (not contol loss) | gain, also enter in Part I, line 7 | | | |
| 2 (| Capital gain net income of | or (net capital loss) | (loss), enter -0- in Part I, line 7 | 2 | | 49,787. |
| 3 N | let short-term capital ga | ain or (loss) as defined in sections | 1222(5) and (6) | | | |
| lf | gain, also enter in Pa | art I, line 8, column (c) (see ins | structions) If (loss), enter -0- ın 🕽 | | | |
| P | art I, line 8 | | | 3 | | -5,406. |
| Part | | | duced Tax on Net Investment I | ncome | | |
| Was t | | the section 4942 tax on the distril | butable amount of any year in the b | ase perio | d? | Yes X No |
| | | not qualify under section 4940(e) | | | | |
| 1 E | | nount in each column for each yea | ar; see the instructions before makir | ng any ent | | |
| | (a) Base penod years | (b) | (c) | | (d) Distribution ra | atio |
| Calen | dar year (or tax year beginning in) | Adjusted qualifying distributions | Net value of nonchantable-use assets | | (col (b) divided by | col (c)) |
| | 2013 | 171,701. | 4,201,186. | | | 0.040870 |
| | 2012 | 78,772. | 2,346,711. | | | 0.033567 |
| | 2011 | | 1,510,853. | | | |
| | 2010 | | | | | |
| | 2009 | | | | | |
| | | | | | | |
| 2 T | otal of line 1, column (d | 1) | | 2 | | 0.074437 |
| 3 A | verage distribution ratio | for the 5-year base period - divid | de the total on line 2 by 5, or by the | | | |
| n | umber of years the four | ndation has been in existence if les | ss than 5 years | 3 | | 0.024812 |
| | | | | | | |
| 4 E | nter the net value of no | ncharitable-use assets for 2014 fr | rom Part X, line 5 | 4 | 5, | 655,439. |
| | | | | | | |
| 5 M | fultiply line 4 by line 3 | | | 5 | | 140,323. |
| • | iditiply line 4 by line 0. | | * | | | <u> </u> |
| 6 E | nter 1% of net investme | ent income (1% of Part I, line 27b) | | 6 | | 2,262. |
| | 170 of flot life of file | 5.1.1.1001110 (170 011 GICI, IIIIO 210) | | | | |
| 7 A | dd lines 5 and 6 | | | 7 | | 142,585. |
| . ^ | писэ с ани с , | | | | | |
| | | | | | | |
| 8 E | nter qualifying distribute. | one from Part XII line 4 | | 8 | | 426,000. |

| Form | 990-PF(2014) TOMSON FAMILY FOUNDATION TRUST 35-694 | 7483 | Р | age 4 |
|--------|--|---------|--------|-------|
| Par | t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see | instru | ctions | s) |
| 1a | Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1 | | | |
| | Date of ruling or determination letter (attach copy of letter if necessary - see instructions) | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check | | 2,2 | 62. |
| | here 🕨 🗓 and enter 1% of Part I, line 27b | | | |
| C | All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of ${\cal J}$ | | | |
| | 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 | | | |
| 3 | Add lines 1 and 2 | | 2,2 | 62. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | 2 2 | 162 |
| 5 | Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0 | | 2,2 | 62. |
| 6 | Credits/Payments 2014 estimated tax payments and 2013 overpayment credited to 2014 6a 1,000. | | | |
| | | | | |
| þ | Exempt foreign organizations - tax withinto at source ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; | | | |
| C | | | | |
| d | Backup withholding erroneously withheld | | 1.0 | 000. |
| 7 8 | Enter any penalty for underpayment of estimated tax. Check here | | | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | 1,2 | 262. |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | | |
| 11 | Enter the amount of line 10 to be Credited to 2015 estimated tax | | | |
| Par | t VII-A Statements Regarding Activities | | | |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it | | Yes | No |
| | participate or intervene in any political campaign? | 1a | | Х |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see | | | İ |
| | 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 or distributed by the foundation in connection with the activities | | | |
| С | Did the foundation file Form 1120-POL for this year? | 1c | | X |
| d | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year | | | |
| | (1) On the foundation ► \$ (2) On foundation managers ► \$ | | | |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on | | | |
| | foundation managers ▶ \$ | | | |
| 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 | | | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of | , | | Х |
| | incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | 3 4a | | X |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4b | | X |
| | If "Yes," has it filed a tax return on Form 990-T for this year? | 5 | | X |
| 5 | 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 | | | |
| ٠ | 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 | Х | |
| 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 | |
| | 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) of each state as required by General Instruction G? If "No," attach explanation | 8b | Х | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or | | | |
| | 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," | | | - |
| | complete Part XIV | 9 | Х | |
| 10 | Did any persons become substantial contributors during the tay year? If "Yes" attach a schedule listing their | 1 | l | l |

Form **990-PF** (2014)

names and addresses

| Pa | t VII-A | Statements Regarding Activities (continued) | 0047 | | | |
|-----|-----------|--|---------------|----------|---------|---------------|
| | | time during the year, did the foundation, directly or indirectly, own a controlled entity with | T | | | |
| • • | | of section 512(b)(13)? if "Yes," attach schedule (see instructions). | | 44 | | x |
| 12 | | | | 11 | | |
| 12 | | foundation make a distribution to a donor advised fund over which the foundation or a dis | | 40 | | x |
| 12 | | ad advisory privileges? If "Yes," attach statement (see instructions) | | 12 | x | |
| 13 | | foundation comply with the public inspection requirements for its annual returns and exemption app | lication / [| 13 | Λ | <u></u> |
| 14 | | address \blacktriangleright N/A (s are in care of \blacktriangleright O . JAY TOMSON Telephone no \blacktriangleright 6 | 41-423- | 160 | | |
| 14 | The book | As are in care of \blacktriangleright O. JAY TOMSON Telephone no \blacktriangleright 6 at \blacktriangleright 2601 FOURTH STREET SW MASON CITY, IA | 0401 | 100 | <u></u> | |
| 4.5 | | | | | | Т |
| 15 | | 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here | | • • | | . — |
| 46 | | r the amount of tax-exempt interest received or accrued during the year | | | Yes | No |
| 10 | | time during calendar year 2014, did the foundation have an interest in or a signature or other | - 1 | 4.0 | 105 | X |
| | | ink, securities, or other financial account in a foreign country? | | 16 | | |
| | | instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90- ter the name of the foreign country ▶ | -22 1) | | | |
| Pai | t VII-B | Statements Regarding Activities for Which Form 4720 May Be Required | | | | L |
| 112 | | m 4720 if any item is checked in the "Yes" column, unless an exception applies. | | | Yes | No |
| 4. | | • | - | | 162 | NO |
| 1 4 | • | ne year did the foundation (either directly or indirectly) age in the sale or exchange, or leasing of property with a disqualified person? Yes | X No | | | |
| | | ow money from, lend money to, or otherwise extend credit to (or accept it from) a | NO | | | |
| | | | X No | | | |
| | | | , | | | |
| | | | X No No | | | |
| | | sfer any income or assets to a disqualified person (or make any of either available for | NO | | | |
| | | | X No | | | |
| | | e to pay money or property to a government official? (Exception. Check "No" if the | NO | | | |
| | | dation agreed to make a grant to or to employ the official for a period after | | | | |
| | | | X No | | | |
| | | nswer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Reg | | | | |
| | | 3 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | Julations | 1b | | х |
| | | tions relying on a current notice regarding disaster assistance check here | | 110 | | |
| | _ | foundation engage in a prior year in any of the acts described in 1a, other than excepted ac | te that | | | |
| ٠ | | corrected before the first day of the tax year beginning in 2014? | | 1c | | х |
| 2 | | n failure to distribute income (section 4942) (does not apply for years the foundation was a | | 10 | | |
| - | | g foundation defined in section 4942(j)(3) or 4942(j)(5)) | private | | | |
| 9 | | and of tax year 2014, did the foundation have any undistributed income (lines 6d and | | | | |
| | | | X No | | | |
| | | list the years | <u></u> 140 | | | |
| h | - | re any years listed in 2a for which the foundation is not applying the provisions of section 49 | M2(a)(2) | | | |
| _ | | to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a | I | | | |
| | | listed, answer "No" and attach statement - see instructions) | ' ' ' I | 2b | | |
| c | | ovisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | - | | | |
| _ | • | | | | | |
| 3 a | | foundation hold more than a 2% direct or indirect interest in any business enterprise | | | | |
| • | | · | X No | | | |
| h | | did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation | | | | |
| • | | ed persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved | 1 | | | |
| | | sioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the li- | · / | | | |
| | | , 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine | | | | |
| | | on had excess business holdings in 2014) | | 3b | | |
| 4 2 | | foundation invest during the year any amount in a manner that would jeopardize its charitable pu | | 4a | | |
| | | foundation make any investment in a prior year (but after December 31, 1969) that could jeopai | | <u>a</u> | | - |
| | | e purpose that had not been removed from jeopardy before the first day of the tax year beginning in | | 4b | | х |
| | Juantable | s perpose that had not been removed from jeoperay before the first day of the tax year beginning if | | | n-DE | (2014) |

| orm 9 | 90-PF (2014) TOMSON FAMILY | FOUNDATION T | RUST | | 35-6947483 | Page 6 |
|---------|--|---|---|--|--------------------|--------------------|
| Par | t VII-B Statements Regarding Activities | for Which Form | 4720 May Be Red | uired (continue | ed) | |
| 5a | During the year did the foundation pay or incur any amo | ount to | | | | ĺ |
| | (1) Carry on propaganda, or otherwise attempt to influ | | on 4945(e))? | . Yes 2 | X No | |
| | (2) Influence the outcome of any specific public ele | | | | _ | |
| | directly or indirectly, any voter registration drive? | • | • | | X No | |
| | (3) Provide a grant to an individual for travel, study, or of | | | · — · · · - | X No | |
| | (4) Provide a grant to an organization other than a | • • | | | | |
| | section 4945(d)(4)(A)? (see instructions) | | | | X No | |
| | (5) Provide for any purpose other than religious, cl | | | . — — | | |
| | | | = | | No | İ |
| | purposes, or for the prevention of cruelty to children | | | . — — | | |
| b | If any answer is "Yes" to 5a(1)-(5), did any of the Regulations section 53 4945 or in a current notice regains | | • | • | | |
| | - · | = | • | | 5b | |
| | Organizations relying on a current notice regarding disa | | | | · - | |
| С | If the answer is "Yes" to question 5a(4), does the | | • | | ¬ | İ |
| | because it maintained expenditure responsibility for the | • | • • • • • • • • • • • | Yes | _ No | · |
| | If "Yes," attach the statement required by Regulations se | ction 53 4945-5(d) | | | <u> </u> | |
| 6a | Did the foundation, during the year, receive any fur | • | | | a | |
| | on a personal benefit contract? | | | . — – | X No | |
| b | Did the foundation, during the year, pay premiums, dire | ectly or indirectly, on a | personal benefit contra | act? | 6b | X |
| | If "Yes" to 6b, file Form 8870 | | | | _ | |
| 7a | At any time during the tax year, was the foundation a p | • | | | <u>X</u> No | |
| b | If "Yes," did the foundation receive any proceeds or ha | | | | | X |
| Par | t VIII Information About Officers, Directo and Contractors | rs, Trustees, Fou | indation Manager | s, Highly Paid | Employees, | |
| 1 | List all officers, directors, trustees, foundation r | managers and thei | r compensation (see | instructions). | | |
| | (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit pla and deferred compens | ans (e) Expense of | account, rances |
| | | | | | | _ |
| ATC | I 9 | | C | | d | 0 |
| | | | | · | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 2 | Compensation of five highest-paid employees | (other than thos | se included on lin | e 1 - see insti | ructions). If non | e, enter |
| | "NONE." | | | C- 40 0 | | |
| (a) | Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week | (c) Compensation | (d) Contributions employee benefit | lit (e) Expense a | account, |
| | | devoted to position | (-, | plans and deferre compensation | | ances |
| | | | | | | |
| | NONE | | | | | |
| | | | | | | |
| | | | | | | |
| | | "- | | | - | |
| | | | | | | |
| | | | <u>. </u> | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| otal | number of other employees paid over \$50,000. | | | | | |
| J - 441 | Table of Galler Chiprojeco paid of all woo, bool i | | | | Form 990-I | PF (2014) |
| | | | | | | |

4E1460 1 000 7232DB 1504

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|---|-----------------------------------|------------------|
| Part VIII Information About Officers, Directors, Trustees, Foundation Man and Contractors (continued) | agers, Highly Paid Employ | /ees, |
| 3 Five highest-paid independent contractors for professional services (see instr | uctions). 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 | | |
| Part IX-A Summary of Direct Charitable Activities | | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical organizations and other beneficianes served, conferences convened, research papers produced, etc. | information such as the number of | Expenses |
| 1 N/A | | |
| N/A | | |
| | | |
| 2 | | |
| | | |
| | | |
| 3 | | |
| | | |
| *************************************** | | |
| 4 | | |
| | | |
| | | |
| Part IX-B Summary of Program-Related Investments (see instructions) | | |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 a | nd 2 | Amount |
| 1 NONE | | |
| | | |
| | | |
| 2 | | |
| | | |
| All other program-related investments See instructions | | |
| 3 NONE | | |
| | | |
| | | |
| Total. Add lines 1 through 3 | | |

Form **990-PF**(2014)

Form 990-PF (2014) Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, Part X see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., 1a 5,619,088. 1b 122,474. 10 1đ 5,741,562. Reduction claimed for blockage or other factors reported on lines 1a and 2 Subtract line 2 from line 1d 5,741,562. 3 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)..... 86,123. 5 5,655,439. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 6 282,772. Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ X and do not complete this part.) 1 2a Tax on investment income for 2014 from Part VI, line 5 Income tax for 2014. (This does not include the tax from Part VI). 3 3 4 4 5 Add lines 3 and 4 6 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 426,000. 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., 2 3 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) **b** Cash distribution test (attach the required schedule) 3b Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 426,000. Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions) 2,262. Adjusted qualifying distributions. Subtract line 5 from line 4

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

qualifies for the section 4940(e) reduction of tax in those years.

Form 990-PF (2014)

423,738.

Form 990-PF (2014) Page 9 Part XIII Undistributed Income (see instructions) (b) (c) (d) Corpus Years prior to 2013 2013 2014 Distributable amount for 2014 from Part XI, 0 Undistributed income, if any, as of the end of 2014 a Enter amount for 2013 only b Total for pnor years 20 12 ,20 11 ,20 10 Excess distributions carryover, if any, to 2014 a From 2009 **b** From 2010 c From 2011 d From 2012 79,500. e From 2013 | 172,700. f Total of lines 3a through e 252,200 4 Qualifying distributions for 2014 from Part XII, line 4. ▶ \$ 426,000. a Applied to 2013, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions). c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2014 distributable amount 426,000. e Remaining amount distributed out of corpus . . . 5 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: 678,200. a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b Taxable amount - see instructions
Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount - see f Undistributed income for 2014 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015 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) 8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions) . . . Excess distributions carryover to 2015. 678,200. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2010 . . . b Excess from 2011 . . . 79,500. c Excess from 2012 . . . 172,700. d Excess from 2013 . . . 426,000. e Excess from 2014 . . .

Form 990-PF (2014)

| ۲a | Private Op | erating Foundations | (see instructions ar | id Part VII-A, questio | on 9) | |
|-----|---|--|--------------------------|---------------------------|--------------------------|-----------------------|
| 1 a | | received a ruling or de | | | ting | |
| | | g is effective for 2014, er | | | ▶ <u></u> | |
| Þ | Check box to indicate v | whether the foundation | is a private operating f | | section X 4942(j) | (3) or 4942(j)(5) |
| 2 a | Enter the lesser of the ad- justed net income from Part | (a) 2014 | (b) 2013 | Prior 3 years (c) 2012 | (d) 2011 | (e) Total |
| | for the minimum investment | (4) 2014 | (5) 2010 | (0) 20 12 | (0)2011 | |
| | return from Part X for each year listed | | 1,900. | 14,476. | | 16,376. |
| b | 85% of line 2a | | 1,615. | 12,305. | | 13,920. |
| C | Qualifying distributions from Part | | | | | . – |
| | XII, line 4 for each year listed | 426,000. | 172,700. | 79,500. | | 678,200. |
| a | Amounts included in line 2c not used directly for active conduct of exempt activities | | _ | | | |
| 0 | Qualifying distributions made directly for active conduct of | | | | | |
| | exempt activities. Subtract line | 426 000 | 170 700 | 70 500 | | 670 000 |
| 3 | 2d from line 2c Complete 3a, b, or c for the | 426,000. | 172,700. | 79,500. | | 678,200. |
| | alternative test relied upon | | | | | |
| а | "Assets" alternative test - enter (1) Value of all assets | 6,096,280. | 5,617,216. | 3,391,482. | 1,533,861. | 16,638,839. |
| | (2) Value of assets qualifying under section | | | | | |
| ь | 4942(j)(3)(B)(i), | | | | | |
| | enter 2/3 of minimum invest- | | | | | |
| | ment return shown in Part X, line 6 for each year listed | | | | | |
| C | "Support" alternative test - enter | | | | | |
| | (1) Total support other than gross investment income | | | | | |
| | (interest, dividends, rents, payments on securities | | | | | |
| | loans (section 512(a)(5)), | | | | | |
| | or royalties) (2) Support from general | | | | | |
| | public and 5 or more exempt organizations as | | | | | |
| | provided in section 4942 ()(3)(B)(iii) | | | | | |
| | (3) Largest amount of sup- port from an exempt | | | | | |
| | organization | | | · | | |
| D۵ | (4) Gross investment income . rt XV Supplement | lary Information (| Complete this part | only if the found | ation had \$5 000 | or more in accets |
| га | | during the year - se | | only if the lound | auon nau \$5,000 | or more in assets |
| 1 | | g Foundation Manager | • | | | |
| а | | the foundation who ho tax year (but only if th | | | | ed by the foundation |
| | O. JAY TOMS | ON & PATRICIA A | . TOMSON | | | |
| b | | the foundation who | | | | large portion of the |
| | ownership of a partner | ship or other entity) of | which the foundation | has a 10% or greater | ınterest | |
| | /- | | | | | |
| 2 | N/A Information Regarding | g Contribution, Grant, | Gift Loan Scholarsh | in etc. Programs: | | |
| - | | he foundation only i | | • • | table erganizations o | nd door not accept |
| | unsolicited requests for | or funds. If the foundablete items 2a, b, c, and | ation makes gifts, gra | | | |
| а | | nd telephone number | | ne person to whom app | olications should be add | lressed: |
| | ATCH 10 | · <u></u> | | | | |
| b | The form in which appl | lications should be sub | mitted and informatio | n and materials they s | should include. | |
| | NO STANDARD | | | | | |
| С | Any submission deadli | iles | | | | |
| | NONE | | | | | |
| d | | mitations on awards, | such as by geogra | phical areas, charitat | ole fields, kınds of ıı | nstitutions, or other |
| | factors. | | | | | |

JSA 4 E 1 4 O D 1 O O Form **990-PF** (2014)

| Part XV Supplementary Information | (continued) | | | |
|-------------------------------------|--|--------------------------------|-------------------------------------|-------------------------|
| 3 Grants and Contributions Paid Du | ring the Year or App | roved for Fi | uture Payment | |
| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | Contribution | |
| a Paid during the year | | | | |
| ADOLL 10 | | | | |
| ATCH 12 | | 1 | | |
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| | | 1 | | |
| Total | | <u> </u> | > 3a | 426,000 |
| b Approved for future payment | | | | 120,000 |
| 2 represed to rataro payment | | | | |
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| Total | | | ▶ 3b | |
| SA | | | | Form 990-PF (201 |

JSA 4E1491 1 000

| Part XVI-A Analysis of Income-Produ Enter gross amounts unless otherwise indicated | | | d business income | Excluded by section 512, 513, or 514 | | (e) |
|--|---|-----------------------|-------------------|--------------------------------------|---------------------------|--------------------------------------|
| _ | | (a) Business code | (b) Amount | (c) | (d) Amount | Related or exemption function income |
| - | service revenue | - | | | 7 | (See instructions |
| | | _ | | + +- | | |
| | | | | | | |
| | | · · | _ _ | | | |
| d B | | | | | | |
| - — f | | - | | | | |
| | and contracts from government agencies | | | | | |
| _ | ship dues and assessments | | ····· | | | |
| | on savings and temporary cash investments | | | 14 | 370. | |
| | ds and interest from securities | | <u> </u> | 14 | 179,840. | |
| | al income or (loss) from real estate | - | • | | | |
| | -financed property | | <u></u> | | | |
| | debt-financed property | | | | | |
| | I income or (loss) from personal property | | | | | |
| | vestment income | | | | | |
| | loss) from sales of assets other than inventory | | | 18 | 49,787. | |
| | ome or (loss) from special events | | | | | |
| | rofit or (loss) from sales of inventory. | | | | | |
| • | venue a | - - | | | | |
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| е | | | | | 229,997. | |
| e Subtotal | Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) | | | | <u> </u> | 229,9 |
| e Subtotal Total. A e worksl | Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calc | ulations) | | | 13 | 229,9 |
| e Subtotal Total. A e worksl | Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce. Relationship of Activities | ulations) | omplishment of E | xempt Purpos | 13 | |
| e Subtotal Total. Ac e worksl art XVI- | Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce. Relationship of Activities Explain below how each activit | ulations) to the Acco | omplishment of E | xempt Purpos | es of Part XVI-A contribu | ited importantly to |
| e Subtotal Total. A e worksl | Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce. Relationship of Activities | ulations) to the Acco | omplishment of E | xempt Purpos | es of Part XVI-A contribu | ited importantly to |
| e Subtotal Total. A e worksl art XVI- ne No | Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce. Relationship of Activities Explain below how each activit | ulations) to the Acco | omplishment of E | xempt Purpos | es of Part XVI-A contribu | ited importantly to |
| e Subtotal Total. A e worksl art XVI- ne No | Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce. Relationship of Activities Explain below how each activit | ulations) to the Acco | omplishment of E | xempt Purpos | es of Part XVI-A contribu | ited importantly to |
| e Subtotal Total. Ac e worksl art XVI- | Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce. Relationship of Activities Explain below how each activit | ulations) to the Acco | omplishment of E | xempt Purpos | es of Part XVI-A contribu | ited importantly to |
| e Subtotal Total. Ac e worksl art XVI- | Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce. Relationship of Activities Explain below how each activit | ulations) to the Acco | omplishment of E | xempt Purpos | es of Part XVI-A contribu | ited importantly to |
| e Subtotal Total. Ac e worksl Irt XVI- | Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce. Relationship of Activities Explain below how each activit | ulations) to the Acco | omplishment of E | xempt Purpos | es of Part XVI-A contribu | ited importantly to |
| e Subtotal Total. Ac e worksl Irt XVI- | Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce. Relationship of Activities Explain below how each activit | ulations) to the Acco | omplishment of E | xempt Purpos | es of Part XVI-A contribu | ited importantly to |
| e Subtotal Total. Ac e worksl Irt XVI- | Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce. Relationship of Activities Explain below how each activit | ulations) to the Acco | omplishment of E | xempt Purpos | es of Part XVI-A contribu | ited importantly to |
| e Subtotal Total. Ac e worksl Irt XVI- | Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce. Relationship of Activities Explain below how each activit | ulations) to the Acco | omplishment of E | xempt Purpos | es of Part XVI-A contribu | ited importantly to |
| e Subtotal Total. Ac e worksl Irt XVI- | Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce. Relationship of Activities Explain below how each activit | ulations) to the Acco | omplishment of E | xempt Purpos | es of Part XVI-A contribu | ited importantly to |
| e Subtotal Total. Ac e worksl Irt XVI- | Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce. Relationship of Activities Explain below how each activit | ulations) to the Acco | omplishment of E | xempt Purpos | es of Part XVI-A contribu | ited importantly to |
| e Subtotal Total. Ac e worksl Irt XVI- | Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce. Relationship of Activities Explain below how each activit | ulations) to the Acco | omplishment of E | xempt Purpos | es of Part XVI-A contribu | ited importantly to |
| e Subtotal Total. Ac e worksl art XVI- | Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce. Relationship of Activities Explain below how each activit | ulations) to the Acco | omplishment of E | xempt Purpos | es of Part XVI-A contribu | ited importantly to |
| e Subtotal Total. Ac e worksl Irt XVI- | Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce. Relationship of Activities Explain below how each activit | ulations) to the Acco | omplishment of E | xempt Purpos | es of Part XVI-A contribu | ited importantly to |
| e Subtotal Total. Ac e worksl Irt XVI- | Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce. Relationship of Activities Explain below how each activit | ulations) to the Acco | omplishment of E | xempt Purpos | es of Part XVI-A contribu | ited importantly to |
| e Subtotal Total. Ac e worksl Irt XVI- | Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce. Relationship of Activities Explain below how each activit | ulations) to the Acco | omplishment of E | xempt Purpos | es of Part XVI-A contribu | ited importantly to |
| e Subtotal Total. Ac e worksl Irt XVI- | Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce. Relationship of Activities Explain below how each activit | ulations) to the Acco | omplishment of E | xempt Purpos | es of Part XVI-A contribu | ited importantly to |
| e Subtotal Total. Ac e worksl Irt XVI- | Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce. Relationship of Activities Explain below how each activit | ulations) to the Acco | omplishment of E | xempt Purpos | es of Part XVI-A contribu | ited importantly to |
| e Subtotal Total. Ac e worksl Irt XVI- | Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce. Relationship of Activities Explain below how each activit | ulations) to the Acco | omplishment of E | xempt Purpos | es of Part XVI-A contribu | ited importantly t |
| e Subtotal Total. Ac e worksl Irt XVI- | Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce. Relationship of Activities Explain below how each activit | ulations) to the Acco | omplishment of E | xempt Purpos | es of Part XVI-A contribu | ited importantly t |
| e Subtotal Total. A e worksl art XVI- ne No | Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce. Relationship of Activities Explain below how each activit | ulations) to the Acco | omplishment of E | xempt Purpos | es of Part XVI-A contribu | ited importantly to |
| e Subtotal Total. Ac e worksl Irt XVI- | Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce. Relationship of Activities Explain below how each activit | ulations) to the Acco | omplishment of E | xempt Purpos | es of Part XVI-A contribu | ited importantly to |
| e Subtotal Total. Ac e worksl Irt XVI- | Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calce. Relationship of Activities Explain below how each activit | ulations) to the Acco | omplishment of E | xempt Purpos | es of Part XVI-A contribu | ited importantly t |

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

| 1 | Did the | e organization direct | ly or indirectly | engage in any of th | e following | with any | other orga | nızatıon | described | | Yes | No |
|-------|-----------|---|------------------------|------------------------------|-----------------|------------------|------------------|-------------|-------------------|------------------|-----------|---------|
| | in sect | tion 501(c) of the Co | de (other than | section 501(c)(3) or | rganizations | s) or in se | ction 527, | relating t | to political | | | |
| | organi | zations? | | | | | | | | | | ĺ |
| а | Transf | ers from the reportin | g foundation to | a noncharitable exe | empt organi | ization of: | | | | | | ĺ |
| | (1) Cas | sh | | | | | | | | 1a(1) | | Х |
| | | ner assets | | | | | | | | 1a(2) | | Х |
| b | | transactions | | | | | | | | | | |
| | • | les of assets to a no | ncharitable exer | mot organization | | | | | | 16(1) | | х |
| | (2) Pu | rchases of assets fro | om a noncharita | ıble exempt organiza | tion | | | | | 1b(2) | | Х |
| | (3) Re | ntal of facilities, equi | oment, or other | assets | | | | | | 1b(3) | | _ x |
| | (4) Re | imbursement arrange | ements | | | | | | | 1b(4) | | Х |
| | (5) Los | ans or loan guarantee | ooo | | | | | | | 1b(5) | | X |
| | | rformance of service | | | | | | | | | | Х |
| c | | g of facilities, equipm | | | | | | | | | | X |
| | | answer to any of th | | | | | | | | | faır m | |
| u | | of the goods, other | | | | | | | | | | |
| | | in any transaction or | | | | | | | | | | |
| /a) I | ine no | (b) Amount involved | T | noncharitable exempt orga | 1 | | | | ctions, and shar | | | |
| (a) L | ille illo | N/A | (c) Name of t | ionenantable exempt orga | inzation | N/A | irption of trans | icis, nansa | Citoris, and sna | ing ana | ingeme | IIIS . |
| | | N/A | | | | N/A | | | | | | |
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| h | | ." complete the follow | | | .(0)(0), 0. | 0000.011 | 02 | | | <u> </u> | JU | |
| | | (a) Name of organization | | (b) Type of o | roanization | | | (c) Descrip | tion of relations | hip | | |
| - | | | | (-/)+ | <u> </u> | | | .,, | | | | |
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| | | | | | | | | | | | | |
| | Under | penalties of perjury, I decla | are that I have examin | ned this return, including a | ccompanying sci | hedules and s | tatements, and | to the best | of my knowledg | e and t | elief, it | is true |
| | correc | ct, and complete Declaration of | | | | reparer has an | y knowledge | | , | | | |
| Sigr | י ווי | Mansa | / | 15/5/1 | a- | | oident | , - | May the IRS | | | |
| Her | e 🖳 | nature of officer or trustee | <i>~</i> | Date | | Title | olaen | | with the pr | | 7 6 | |
| | 3,91 | nate of onice of trustee | | Vale | | THE | | | (see instruction | »)´ [| Yes _ | No |
| | | Print/Type preparer's na | me | Preparer's signature | | | Date | | . . . | אודי | | |
| Paic | ł | | | | Jansen | | | | " | | | |
| | parer | STACY JANSSEI | • | | | | 4/30/15 | | | P004 | | ರ |
| | | | MG LLP | | | | | Firm's Ell | <u>N</u> ▶13-55 | 6520 | J.7 | |
| use | Only | 1 | | ENUE, SUITE 25 | 000 | | | | | | | |
| | |] DE | S MOINES, | IA | | 503 | 09-2578 | Phone no | 515-28 | | 165 | |
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Form **990-PF** (2014)

Schedule B

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

Schedule of Contributors

OMB No 1545-0047

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

Department of the Treasury
| Department of the Treasury
| Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs gov/form990 Name of the organization

Employer Identification number

| TOMSON FAMILI FOUND | ATION TRUST | 35-6947483 |
|--|--|---|
| Organization type (check or | ne)· | <u> </u> |
| Filers of: | Section: | |
| Form 990 or 990-EZ | 501(c)() (enter number) organization | |
| | 4947(a)(1) nonexempt charitable trust not treated as | a private foundation |
| | 527 political organization | |
| Form 990-PF | X 501(c)(3) exempt private foundation | |
| | 4947(a)(1) nonexempt charitable trust treated as a pi | rivate foundation |
| | 501(c)(3) taxable private foundation | |
| | s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the Genera | ıl Rule and a Special Rule. See |
| General Rule | | |
| • | on filing Form 990, 990-EZ, or 990-PF that received, during the y y or property) from any one contributor. Complete Parts I and II contributions. | • |
| Special Rules | | |
| regulations under 13, 16a, or 16b, a | on described in section 501(c)(3) filing Form 990 or 990-EZ that sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule and that received from any one contributor, during the year, total of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990 | A (Form 990 or 990-EZ), Part II, line contributions of the greater of (1) |
| contributor, during | on described in section 501(c)(7), (8), or (10) filing Form 990 or 990 the year, total contributions of more than \$1,000 exclusively for ional purposes, or the prevention of cruelty to children or animals | r religious, charitable, scientific, |
| contributor, during contributions total during the year fo General Rule app | on described in section 501(c)(7), (8), or (10) filing Form 990 or so the year, contributions exclusively for religious, charitable, etc., ed more than \$1,000. If this box is checked, enter here the total or an exclusively religious, charitable, etc., purpose. Do not complifies to this organization because it received nonexclusively religious more during the year | purposes, but no such contributions that were received lete any of the parts unless the us, charitable, etc., contributions |
| Caution. An organization that | at is not covered by the General Rule and/or the Special Rules d | loes not file Schedule B (Form 990, |

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

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)

7232DB 1504

Employer identification number 35-6947483

| Part I | Contributors (see instructions). Use duplicate copies of Par | rt I if additional space is nee | ded. |
|--------------|---|---------------------------------|---|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1_ | O. JAY TOMSON 12 BRIARSTONE COURT MASON CITY, IA 50401-4647 | \$250,000. | Person X Payroll Noncash (Complete Part II for noncash contributions) |
| (a) _ No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 2_ | O. JAY TOMSON 12 BRIARSTONE COURT MASON CITY, IA 50401-4647 | \$79,745. | 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 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) |

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization TOMSON FAMILY FOUNDATION TRUST

Employer identification number

35-6947483

| Part II | Noncash Property (see instructions). Use duplicate copies of Pa | art II if additional space is nee | eded. |
|---------------------------|--|--|----------------------|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |

Employer Identification number

35-6947483

| Part III | Exclusively religious, charitable, etc. | ., contributions to o | rganizations desc | ribed in section 501(c)(7), (8), or (10) |
|--------------------------|--|------------------------|--------------------|--|
| | that total more than \$1,000 for the y | | | |
| | following line entry. For organizations | | | |
| | contributions of \$1,000 or less for th | e vear. (Enter this in | formation once. So | ee instructions.) ▶\$ |
| | Use duplicate copies of Part III if addit | ional space is neede | ed. | |
| (a) No. from | ľ | - | | |
| from Part I | (b) Purpose of gift | (c) Use | of gift | (d) Description of how gift is held |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | (e) Transf | er of aift | |
| | | (0) | or or gint | |
| | Transferee's name, address, ar | nd ZIP + 4 | Relatio | nship of transferor to transferee |
| | Transists o name, address, dr | | | ionip of transfer to danser to |
| | | | | |
| | | | | |
| | | | | - |
| (a) No. | | | | ···· |
| (a) No. from | (b) Purpose of gift | (c) Use | of gift | (d) Description of how gift is held |
| Part I | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | (e) Transf | ar of aift | |
| | | (e) ITalisi | er or gift | |
| | Transferee's name, address, ai | nd 7IP + 4 | Pelatio | nship of transferor to transferee |
| | Transferee 3 ffame, address, an | 10 211 1 4 | Kelation | ising of transferor to transferee |
| | | | | |
| | | | | |
| | | | | |
| (a) No | | | | |
| (a) No from Part I | (b) Purpose of gift | (c) Use | of gift | (d) Description of how gift is held |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | (e) Transf | er of nift | |
| | | (0) 1141131 | or or gint | |
| | Transferee's name, address, ar | nd ZIP + 4 | Relation | nship of transferor to transferee |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| (a) No. from | | | | |
| from Part I | (b) Purpose of gift | (c) Use | of gift | (d) Description of how gift is held |
| 1 4111 | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | (e) Transf | er of gift | |
| | | (c) Transi | ci oi giit | |
| | Transferee's name, address, ar | nd ZIP + 4 | Relation | nship of transferor to transferee |
| | The state of the s | <u> </u> | | |
| | | | | |
| | | | | |
| | | | | |

ATTACHMENT 1

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7232DB 1504

PART I - INTEREST ON TEMPORARY CASH INVESTMENTS FORM 990PE,

| NET INVESTMENT INCOME | 370. | 370. |
|---|------------------------------|-------|
| REVENUE AND EXPENSES PER BOOKS | 370. | 370. |
| | | TOTAL |
| DESCRIPTION | FIRST CITIZENS NATIONAL BANK | |

ATTACHMENT

ATTACHMENT 2 PAGE 22

PART I - DIVIDENDS AND INTEREST FROM SECURITIES FORM 990PF,

TOMSON FAMILY FOUNDATION TRUST

| NET INVESTMENT INCOME | 340. 179,840. |
|----------------------------------|---------------|
| . REVENUE AND EXPENSES PER BOOKS | 179,840. |
| DESCRIPTION | DIVIDENDS |

179,840.

179,840.

TOTAL

TOMSON FAMILY FOUNDATION TRUST

ATTACHMENT

| | | CHARITABLE | PURPOSES | | |
|---------------------------------|----------------|------------|-------------|------------|--------|
| | ADJUSTED | NET | INCOME | | |
| | NET | INVESTMENT | INCOME | 56. | 56. |
| | REVENUE AND | EXPENSES | PER BOOKS | 56. | 56. |
| FORM 990PE, PART I - LEGAL FEES | | | | | TOTALS |
| FORM 990PE, PART | | | DESCRIPTION | LEGAL FEES | |

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ATTACHMENT 3 PAGE 23 ATTACHMENT 4

2779323

ATTACHMENT 4 PAGE 24

7232DB 1504

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| CHARITABLE <u>PURPOSES</u> | | |
|---|-------------------|--------|
| ADJUSTED NET INCOME | | |
| NET INVESTMENT INCOME | 750. | 750. |
| REVENUE AND EXPENSES PER BOOKS | 750. | 750. |
| | | TOTALS |
| DESCRIPTION | PROFESSIONAL FEES | |

TOMSON FAMILY FOUNDATION TRUST

ATTACHMENT 5

- OTHER PROFESSIONAL FEES PART I FORM 990PE, REVENUE AND EXPENSES PER BOOKS

NET INVESTMENT INCOME

1,044.

INVESTMENT FEES

DESCRIPTION

1,044.

TOTALS

1,044.

1,044.

ATTACHMENT 5 PAGE 25

ATTACHMENT 6

FORM 990PF, PART I - TAXES

| NET INVESTMENT · INCOME | 918. | 1,917. |
|---|-------------------------------------|--------|
| REVENUE AND EXPENSES PER BOOKS | 918. | 1,917. |
| | | TOTALS |
| DESCRIPTION | FOREIGN TAXES FEDERAL INCOME TAX | |

ATTACHMENT 6 PAGE 26

ATTACHMENT 7

FORM 990PF, PART II - CORPORATE STOCK

| ENDING <u>FMV</u> | 48,705. 67,076. | 63,099. | 0,31 | 5,651 |) | 131,342. | | 47,677. | 8,342 | | 00 | 8,65 | | 1,74 | 6,22 | 1,00 | 8,11 | | 9,15 | 3,116 | 34,051. | 5,49 | 9,97 |
|-------------------------|--|--|------------------------------|--|-------------------------------|--|-----------------|---------|-----------------|-------------------------|-------------|----------------|------------------|----------------|------------------|--------------------|---------------------|---------------|------------------------------|---------|----------------------|----------------|--------------------|
| ENDING BOOK VALUE | 42,646. 48,080. | 204 311 | 3,560 | 6,54 8,21 |) | 77,631. | | 43,545. | 8,031 | | 9 | 6,70 | 0,190 | 9,311 | 3,309 | 3,97 | 5,472 | | 1,40 | 3,680 | 25,569. | 9,74 | 4,86 |
| BEGINNING BOOK VALUE | 19,566. 24,890. 4.967. | , 58 , 26 | 3,56 | 6,543 | 8,42 | 7,63 | 4,17 | 1,213 | 8,03 | 3,62 | 3,51 | 7,87 | 3,840 | 9,311 | 5,29 | 3,97 | 177 | , 18 | , 40 | 3,68 | 5,56 | | 24,867. |
| DESCRIPTION | AT&T INC COM ABBVIE INC ALLEGION PLC | ALLIANT COPR STOCK ALTRIA GROUP INC | APPLE INC BANK OF AMERICA | BAXTER INTL INC COMMON STOCK RERKSHIRF HATHAWAY INC CL R | BHP BILLITON LIMITED SPON ADR | BRISTOL MYERS SQUIBB CO COM CATERPILLAR INC | CENTURYLINK INC | ш | CONOCO PHILLIPS | CONSOLIDATED EDISON INC | COMMINS INC | DEERE & CO COM | DUKE ENERGY HLDG | ELI LILLY & CO | EXXON MOBIL CORP | FORD MOTOR COMPANY | GENERAL ELEC CO COM | GENERAL MILLS | GLAXOSMITHKILNE PLC SPON ADR | HCP INC | HEALTH CARE REIT INC | HOME DEPOT INC | HONEYWELL INTL INC |

2779323

ATTACHMENT 7 PAGE 27

ATTACHMENT 7 (CONT'D)

FORM 990PF, PART II - CORPORATE STOCK

| ENDING <u>FMV</u> | 50,712. 22,462. 133,848. 209,389. 270,641. 131,223. 425,035. 80,910. 14,640. 20,697. 69,284. 72,324. 72,324. 72,324. 72,324. 72,324. 72,324. 72,324. 72,324. 72,326. 72,668. 72,326. 72,679. 73,950. 65,356. 65,356. 67,771. |
|-------------------------|--|
| ENDING BOOK VALUE | 43,313. 19,370. 135,927. 190,0854. 136,586. 297,828. 52,383. 52,383. 52,383. 62,372. 24,039. 23,995. 46,492. 24,492. 24,492. 24,492. 24,299. 24,299. 24,299. 24,299. |
| BEGINNING BOOK VALUE | 19,485. 19,370. 135,927. 193,884. 136,586. 297,828. 136,586. 257,039. 137,183. 25,027. 24,483. 25,027. 24,483. 25,027. 24,483. 25,027. 24,299. 24,112. |
| DESCRIPTION | INGERSOLL-RAND PUBLIC LTD CO INTL BUSINESS MACHINES ISHARE DSCI EAFE FUND ISHARE DOW JONES REAL ESTATE ISHARE DOW JONES INTL DIV IDX ISHARE DOW JONES INTL DIV IDX ISHARE DOW JONES TECH ISHARE DOW JONES TELECOM ISHARE DOW JONES TELECOM ISHARE DOW JONES TELECOM ISHARE DOW JONES TELETITES ISHARE DOW JONES FINANCIAL ISHARE DOW JONES FINANCIAL ISHARE DOW JONES FINANCIAL ISHARE DOW JONES ENERGY ISHARE DOW JONES CONS NON CYCL ISHARE DOW JONES BASIC MATERIA ISHARE DOW JONES BASIC MATERIA ISHARE SEP SMALLCAP 600 GROWTH JOHNSON & JOHNSON COM KIMBERLY CLARK CORP KRAFT FOODS INC LOCKHEED MARTIN LORILLARD INC MERCK & CO INC COM MICROSOFT CORP MONDELEZ INTERNATIONAL NATIONAL GRID PLC GBP NETLE S A SPONSORED ADR |

35-6947483

FORM 990PF, PART II - CORPORATE STOCK

| ENDING ENDING BOOK VALUE FMV | 48,062. 12,881. 49,806. 40,806. 40,917. 47,265. 39,944. 24,419. 49,828. 40,276. 49,152. 49,152. 40,276. 47,360. 59,708. 38,333. 253,012. 48,553. 106,979. 253,012. 48,553. 234,117. 400,000. 70,310. 48,248. 75,671. 32,120. 32,120. 32,120. 32,120. 32,120. 32,120. 46,955. 59,708. 392,541. 48,248. 32,120. 32,120. 46,027. 59,708. 392,541. 48,248. 38,748. |
|------------------------------|---|
| BEGINNING BOOK VALUE | 25,009. 12,881. 23,298. 23,298. 24,057. 16,385. 49,828. 40,276. 49,152. 23,494. 23,494. 24,387. 24,387. 24,387. 24,387. 24,387. 253,012. 26,595. |
| DESCRIPTION | NEWMONT MINING CORP PNC FINANCIAL SERVICES CORP PACWEST BANCORP DEL PEPSICO INC COM PFIZER INC PHILLIPS 66 PROCTOR & GAMBLE RAYTHEON COMPANY NEW REYNOLDS AMERN INC ROYAL DUTCH SHELL PLC SPON ADR SEACOAST BK CORP FLA STATOILHYDRO ASA SPONSORED ADR TOTAL S.A. SPONS ADR UNILEVER PLC COMP UNILEVER PLC CORP UNION PACIFIC CORP VANGUARD EMERGING MARKETS EFT VANGUARD HIGH YIELD CORPORATE VANGUARD HIGH YIELD CORPORATE VANGUARD HIGH YIELD CORPORATE VERIZON COMMUNICATIONS INC VODAFONE GROUP PLC WELLS FARGO & CO WHIRLPOOL CORPORATION |

| | | 2779323 |
|--|--|---------|

| NT 8 | | ENDING <u>EMV</u> | | |
|--------------|---------------------------------------|-------------------------|---|----------|
| ATTACHMENT 8 | | ENDING BOOK VALUE | | |
| | NDS | BEGINNING BOOK VALUE | 150,000. | 475,000. |
| | FORM 990PF, PART II - CORPORATE BONDS | DESCRIPTION | PIMCO TOTAL RETURN FUND FEDERATED ULTRASHORT BOND FUND | TOTALS |

ATTACHMENT 8 PAGE 30 ATTACHMENT 9

| II | COMPENSATION | 0 | 0 | 0 |
|---|---|--|---|--------------|
| FORM 990PE, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES | TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION | PRESIDENT/SECRETARY | VICE PRESIDENT | GRAND TOTALS |
| FORM 990PF, PART VIII - L. | NAME AND ADDRESS | O. JAY TOMSON 2601 FOURTH STREET SW MASON CITY, IA 50401 | PATRICIA A. TOMSON 2601 FOURTH STREET SW MASON CITY, IA 50401 | |

ATTACHMENT 9 PAGE 31

ATTACHMENT 10

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

2601 FOURTH STREET SW MASON CITY, IA 50401 641-423-1600

TOMSON FAMILY FOUNDATION TRUST

35-6947483

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|----------|-------|------|-----------|------|---|
| Δ | 1 A | t Hi | יוויריווי | | |

990PF, PART XV - RESTRICTIONS OR LIMITATIONS ON AWARDS

THE REQUESTS MUST BE EXCLUSIVELY FOR EDUCATIONAL, SCIENTIFIC, AND CHARITABLE PURPOSES WITH THE MEANING OF SECTION 501(C)(3) OF THE CODE.

TOMSON FAMILY FOUNDATION TRUST

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

| EORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR | DURING THE YEAR | | |
|---|---|---|---------------|
| | | ATT | ATTACHMENT 12 |
| | RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR | | |
| | AND | | |
| RECIPIENT NAME AND ADDRESS | FOUNDATION STATUS OF RECIPIENT | PURPOSE OF GRANT OR CONTRIBUTION | AMOUNT |
| LUTHER | MONE | Tanadis alloading | 000 |
| 2481 COMO AVENTIE | I. C. | | |
| ST PAUL, MN 55108 |); | | |
| | | | |
| MASON CITY FAMILY YMCA | NONE | 2014 ANNUAL YOUTH CAMPAIGN | 2,000. |
| 1840 S MONROE | 2 | | |
| MASON CITY, IA 50401 | | | |
| | | | |
| WIRTH CENTER FOR THE PERFORMING ARTS | NONE | SCHOLARSHIPS | 1,000 |
| P O BOX 2 | PC PC | | |
| MAPLE PLAIN, MN 55359 | | | |
| | | | |
| LUTHER COLLEGE | NONE | TOMSON FAMILY ENDOWED CHAIR | 100,000 |
| 700 COLLEGE DRIVE | PC | | |
| DECORAH, IA 52101 | | | |
| LUTHERAN MUSIC PROGRAM | NONE | SCHOLARSHIPS FOR THE LUTHERAN SUMMER MUSIC | 5,000 |
| 122 W FRANKLIN AVE | PC | ACADEMY AND FESTIVAL | |
| SUITE 230 | | | |
| MINNEAPOLIS, MN 55404 | | | |
| | | | |
| MASON CITY HIGH SCHOOLS | NONE | SUPPORT FOR MASON CITY PUBLIC SCHOOL PROGRAMS | s 1,400 |
| 1700 4TH STREET SE | PC | | |
| MASON CITY, IA 50401 | | | |

2779323

ATTACHMENT 12 (CONT'D)

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR.

| | AMOUNT | 200 | | 2, 000 | | | | 100,000 | | | 1,000 | | | 200,000 | | | LOPMENT 100 | | | |
|---|----------------------------------|--|----------------------|--------------------------------------|-------------|----------------|-------------------|------------------|-------------------|-------------------|-------------------------------------|----------------|------------------|--|-----------------------|----------------------|--|--------------------------------|------------------------|----------------------|
| | PURPOSE OF GRANT OR CONTRIBUTION | SCHOLARSHIPS | | CAPITAL CAMPAIGN | | | | SCHOLARSHIPS | | | SUPPORT FOR WOUNDED SERVICE MEMBERS | | | DEBT FORGIVENESS FOR NURSES | | | YOUTH INVESTING ENERGY IN LEADERSHIP DEVELOPMENT | | | |
| RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND | FOUNDATION STATUS OF RECIPIENT | NONE | | NONE | PC | | | NONE | PC | | NONE | PC | | NONE | PC | | NONE | PC | | |
| PARTICLE THE THE PROTECTION | KECIFLENI NAME. AND ADDRESS | STEBENS CHILDREN'S THEATER 616 N DELAWARE AVE | MASON CITY, IA 50401 | VESTERHEIM NORWEGIAN-AMERICAN MUSEUM | P 0 BOX 379 | 502 W WATER ST | DECORAH, IA 52101 | WARTBURG COLLEGE | 100 WARTBURG BLVD | WAVERLY, IA 50677 | WOUNDED WARRIOR PROJECT | P O BOX 758517 | TOPEKA, KS 66675 | MERCY MEDICAL CENTER FOUNDATION - NORTH IOWA | 1000 FOURTH STREET SW | MASON CITY, IA 50401 | YOUTH INVESTING ENERGY | MASON CITY CHAMBER OF COMMERCE | 9 NORTH FEDERAL AVENUE | MASON CITY, IA 50401 |

TOTAL CONTRIBUTIONS PAID

426,000

ATTACHMENT 12 PAGE 35

2779323

SCHEDULE D (Form 1041)

Department of the Treasury

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T.

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

OMB No 1545-0092

Internal Revenue Service ▶ Information about Schedule D and Its separate Instructions is at www.irs.gov/form1041. Name of estate or trust Employer identification number TOMSON FAMILY FOUNDATION TRUST 35-6947483 Note: Form 5227 filers need to complete only Parts I and II Short-Term Capital Gains and Losses - Assets Held One Year or Less See instructions for how to figure the amounts to enter on (h) Gain or (loss) (g) Adjustments to gain or loss from the lines below Subtract column (e) from column (d) and Proceeds This form may be easier to complete if you round off cents (or other basis) Form(s) 8949, Part I, combine the result with (sales price) column (g) line 2, column (g) to whole dollars Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b. Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 474,593. 479,999. -5,406. Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 4 5 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts 5 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2013 Capital Loss 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). Enter here and on -5,406. Long-Term Capital Gains and Losses - Assets Held More Than One Year See instructions for how to figure the amounts to enter on (g) Adjustments (h) Gain or (loss) Subtract column (e) the lines below. (d) Proceeds to gain or loss from Form(s) 8949, Part II, from column (d) and combine the result with Cost This form may be easier to complete if you round off cents (sales price) (or other basis) column (g) line 2, column (g) to whole dollars. Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b. 8b Totals for all transactions reported on Form(s) 8949 with Box D checked...... Totals for all transactions reported on Form(s) 8949 10 Totals for all transactions reported on Form(s) 8949 432,658. 377,465. 55,193. 11 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 11 12 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts. 12 13 13 14 14 15 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2013 Capital Loss 15 Net long-term capital gain or (loss). Combine lines 8a through 15 in column (h) Enter here and on 55,193.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2014

| Sched | ule D (Form 1041) 2014 | | | | Page 2 |
|-----------|---|------------|--|--|-------------------------------|
| Par | t III Summary of Parts I and II | | (1) Beneficiaries' | (2) Estate's | |
| | Caution: Read the instructions before completing this p | art. | (see instr) | or trust's | (3) Total |
| 17 | Net short-term gain or (loss) | 17 | | | -5,406. |
| 18 | Net long-term gain or (loss): | | | | |
| а | Total for year | 18a | | | 55,193. |
| b | Unrecaptured section 1250 gain (see line 18 of the wrksht.) | 18b | | | |
| С | 28% rate gain | 18c | | | |
| | Total net gain or (loss). Combine lines 17 and 18a ▶ | 19 | | | 49,787. |
| Note | : If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 go to Part V, and do not complete Part IV If line 19, column (3), is a r | or For | rm 990-T, Part I, line complete Part IV a | 4a) If lines 18a and 1 ad the Capital Loss Ca | 19, column (2), are ne |
| neces | sary | 7CT 1000, | , complete vart iv a | to the Suprius 2000 G | |
| Par | t IV Capital Loss Limitation | | | | |
| 20 | Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, I | Part I, la | ne 4c, if a trust), the s | maller of | , |
| a Note | The loss on line 19, column (3) or b \$3,000 | 0200 1 | | 20 (| complete the Canita |
| Loss (| Carryover Worksheet in the instructions to figure your capital loss carryover | page | i, iiie 22 (Oi i Giiii 9 | 70-1, IIII 0 34), IS & 1033 | s, complete the capita |
| Par | t V Tax Computation Using Maximum Capital Gains Rat | es | | | |
| | 1041 filers. Complete this part only if both lines 18a and 19 in co | | | amount is entered ii | Part I or Part II and |
| | is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mo | | | | |
| | ion: Skip this part and complete the Schedule D Tax Worksheet in the | ınstruc | ctions if: | | |
| | ther line 18b, col (2) or line 18c, col (2) is more than zero, or the form 1041, line 2b(1), and Form 4952, line 4g are more than zero. | | | | |
| | i 990-T trusts. Complete this part only if both lines 18a and 19 | are nai | ns or qualified div | idends are included | in income in Part |
| | orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part | | | | |
| | ner line 18b, col (2) or line 18c, col. (2) is more than zero | | | | |
| 21 | Enter taxable income from Form 1041, line 22 (or Form 990-T, line | 34) | 21 | | |
| 22 | Enter the smaller of line 18a or 19 in column (2) | • ., | · - - | | |
| | but not less than zero | | | | |
| 23 | Enter the estate's or trust's qualified dividends | | | | |
| | from Form 1041, line 2b(2) (or enter the qualified | | | | |
| | dividends included in income in Part I of Form 990-T) 23 | | | | |
| 24 | Add lines 22 and 23 24 | | | | |
| | If the estate or trust is filing Form 4952, enter the | | | | |
| | amount from line 4g, otherwise, enter -0 ▶ 25 | | 1 | | |
| 26 | Subtract line 25 from line 24 If zero or less, enter -0- | | 26 | | |
| 27 | Subtract line 26 from line 21 If zero or less, enter -0- | | 27 | | |
| 28 | Enter the smaller of the amount on line 21 or \$2,500 | | . 28 | | |
| 29 | Enter the smaller of the amount on line 27 or line 28 | | . 29 | | |
| 30 | Subtract line 29 from line 28 If zero or less, enter -0 This amount is | staxed | at 0% | ▶ 30 | |
| 31 | Enter the smaller of line 21 or line 26 | | . 31 | | |
| 32 | Subtract line 30 from line 26 | | . 32 | | |
| 33 | Enter the smaller of line 21 or \$12,150 | | ·)———— | | |
| 34 | Add lines 27 and 30 | | | | |
| 35 | Subtract line 34 from line 33. If zero or less, enter -0 | | | | |
| 36 | Enter the smaller of line 32 or line 35 | | | | |
| 37 | Multiply line 36 by 15% | | | ▶ 37 | |
| 38 | Enter the amount from line 31 | | | | |
| 39 | Add lines 30 and 36 | | | | |
| 40 | Subtract line 39 from line 38. If zero or less, enter -0 | | | | |
| 41 | Multiply line 40 by 20% | | 1 1 | ▶ 41 | |
| 42 | Figure the tax on the amount on line 27 Use the 2014 Tax Rate Schedule for | | 1 1 | | |
| 40 | and Trusts (see the Schedule G instructions in the instructions for Form 1041) | | | | |
| 43 | Add lines 37, 41, and 42 | | · + | | |
| 44 | Figure the tax on the amount on line 21 Use the 2014 Tax Rate Schedule for | | 1 1 | | |
| 4- | and Trusts (see the Schedule G instructions in the instructions for Form 1041) | • | | Cahadula | |
| 45 | Tax on all taxable income. Enter the smaller of line 43 or line 44 G line 1a (or Form 990-T line 36) | nere a | na on Form 1041, | Schedule As | |

Schedule D (Form 1041) 2014

TOMSON FAMILY FOUNDATION TRUST

FORM 990-PF - PART IV

CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

| | HINE OA | INS AND LO | SSES FUI | K IAX UN | INVESI | MENT INCOM | |
|--|---------------------------------------|-------------------------|--------------------------|--------------------------------|------------------------------|----------------------|------------|
| Kınd of F | Property | | Desc | ription | | or Date | Date sold |
| Gross sale price less expenses of sale | Depreciation allowed/ allowable | Cost or other basis | FMV as of 12/31/69 | Adj basis as of 12/31/69 | Excess of FMV over adj basis | Gain or (loss) | |
| 417. | | ISHARE DOW 3 | JONES INTL : | SELECT | | VARIOUS 417. | 12/29/2014 |
| 39,276. | | BHP BILLITON 48,425. | limited s | VARIOUS -9,149. | 02/13/2014 | | |
| 19,398. | | CENTURYLINK 24,179. | INC. | VARIOUS -4,781. | 02/13/2014 | | |
| 21,290. | | CONSOLIDATED | DEDISON | 01/27/2012 -2,338. | 02/13/2014 | | |
| 63,256. | | DEERE & CO C | COM | | | VARIOUS 12,083. | 02/13/2014 |
| 9,584. | | GENERAL MILI 6,189. | LS INC. | | | 05/08/2008 3,395. | 02/13/2014 |
| 1,664. | | HALYARD HEAL | TH INC. | | | VARIOUS 650. | 12/04/2014 |
| 145,229. | | ISHARE S&P S 95,796. | EMALLCAP 60 | 0 BARRA | | VARIOUS 49,433. | 05/16/2014 |
| 21,322. | | MONDELEZ INT | CERNATIONAL | VARIOUS 6,267. | 02/13/2014 | | |
| 52,714. | | NESTLE S A S 41,182. | SPONSORED AI | DR | | VARIOUS 11,532. | 02/13/2014 |
| 11,553. | | NEWMONT MINI 25,009. | NG CORP | | | VARIOUS -13,456. | 02/13/2014 |
| 46,890. | | STATOILHYDRO | ASA SPONS | ORED ADR | | VARIOUS 1,140. | 02/13/2014 |
| | | : | | | | | |
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TOMSON FAMILY FOUNDATION TRUST

FORM 990-PF - PART IV

CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

| | | INS AND LO | | | | P | Date | Date sold |
|--|---------------------------------|------------------------|----------------------|--------------------|------------------------------------|----|-----------------------------|------------|
| Kind of F | roperty | | Desc | ription | | pı | Date acquired | Date sold |
| Gross sale price less expenses of sale | Depreciation allowed/ allowable | Cost or other | FMV as of | Adj basis as of | Excess of FMV over adj basis | Ĭ | Gain or | |
| 29. | allowable | basis HALYARD HEAI | 12/31/69 LTH INC. | <u>12/31/69</u> | adj Dasis | | (loss) 01/27/2012 11. | 12/17/2014 |
| / 36. | | VODAFONE GRO | OUP PLC | | | | VARIOUS -11. | 03/13/2014 |
| 322,885. | | FEDERATED UI | TRA SHORT I | BOND | | | 03/26/2013 -2,115. | 02/11/2014 |
| 145,058. | | PRIMCO TOTAL | RETURN FUI | ND #35 | | | 03/26/2013 -4,942. | 02/11/2014 |
| 6,604. | | ALLEGION PLO 4,954. | : | | | | 07/29/2013 1,650. | 02/13/2014 |
| 32. | | VERIZON COMN | 1 INC | | | | 02/27/2014 -1. | 03/12/2014 |
| 14. | | ALLEGION PLO | 2 | | | | 07/29/2013 2. | 01/10/2014 |
| 'OTAL GAIN(L | oss) | | | | | | 49,787. | |
| | | | | | | | | |
| | | | | | | • | | |
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Form 8949

Sales and Other Dispositions of Capital Assets

▶ Information about Form 8949 and its separate instructions is at www.irs.gov/form8949.

Department of the Treasury Internal Revenue Service

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

OMB No 1545-0074

Name(s) shown on return

TOMSON FAMILY FOUNDATION TRUST

(C) Short-term transactions not reported to you on Form 1099-B

Social security number or taxpayer identification number

Adjustment if any to only as less

35-6947483

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments your bought in 2014 or later)

Short-Term. Transactions involving capital assets you held 1 year or less are short-term. For long-term transactions, see page 2.

Note. You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 1a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need. (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (B) Short-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS

| (a) Description of property | (b) Date acquired | (c) Date sold or | (d) Proceeds (sales proce) | (e) Cost or other basis See the | If you enter an a enter a co | (h) Gain or (loss). Subtract column (e | |
|--|-----------------------------------|---------------------------------|------------------------------------|--|-------------------------------------|--|--|
| (Example 100 sh XYZ Co) | (Mo, day, yr) | disposed (Mo , day, yr) | (sales pnce) (see instructions) | Note below and see Column (e) in the separate instructions | (f) Code(s) from instructions | (g) Amount of adjustment | from column (d) and combine the result with column (g) |
| FEDERATED ULTRA SHORT | | | | - | | | |
| BOND | 03/26/2013 | 02/11/2014 | 322,885. | 325,000. | | | -2,115 |
| PRIMCO TOTAL RETURN | | | | | | | |
| FUND #35 | 03/26/2013 | 02/11/2014 | 145,058. | 150,000. | | | -4,942 |
| ALLEGION PLC | 07/29/2013 | 02/13/2014 | 6,604. | 4,954. | | | 1,650 |
| VERIZON COMM INC | 02/27/2014 | 03/12/2014 | 32. | 33. | | ! | -1 |
| ALLEGION PLC | 07/29/2013 | 01/10/2014 | 14. | 12. | | | 2 |
| | | | | | | | |
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| | | | | | | | |
| 2 Totals Add the amounts in colum act negative amounts) Enter eac your Schedule D, line 1b (if Box A Box B above is checked), or line 3 | h total here an above is check | d include on ed), line 2 (if | 474,593. | 479,999. | | | -5,406. |

Note. If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

Name(s) shown on return Name and SSN or taxpayer identification no not required if shown on other side

TOMSON FAMILY FOUNDATION TRUST

Social security number or taxpayer identification number

35-6947483

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments you bought in 2014 or later)

Part II

Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
 (E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
- X (F) Long-term transactions not reported to you on Form 1099-B

| | <u>,</u> | | | | | | |
|--|-----------------------------------|---|---|---|----------------------------------|---|--|
| (a) Description of property (Example 100 sh XYZ Co) | (b) Date acquired (Mo , day, yr) | (c) Date sold or disposed (Mo , day, yr) | (d) Proceeds (sales price) (see instructions) | (e) Cost or other basis See the Note below and see Column (e) | If you enter an a enter a cod | iny, to gain or loss. mount in column (g), le in column (f) rate instructions (g) | (h) Gain or (loss). Subtract column (e) from column (d) and combine the result |
| | | (mo , day, yr) | , | in the separate | Code(s) from instructions | Amount of adjustment | with column (g) |
| ISHARE DOW JONES INTL | | | | | | | |
| SELECT | VARIOUS | 12/29/2014 | 417. | | | | 417 |
| BHP BILLITON LIMITED SPON ADR | VARIOUS | 02/13/2014 | 39,276. | 48,425. | | | -9,149. |
| CENTURYLINK INC. | VARIOUS | 02/13/2014 | 19,398. | 24,179. | | | -4,781. |
| CONSOLIDATED EDISON | 01/27/2012 | 02/13/2014 | 21,290. | 23,628. | | | -2,338. |
| DEERE & CO COM | VARIOUS | 02/13/2014 | 63,256. | 51,173. | | | 12,083. |
| GENERAL MILLS INC. | 05/08/2008 | 02/13/2014 | 9,584. | 6,189. | | | 3,395. |
| HALYARD HEALTH INC. | VARIOUS | 12/04/2014 | 1,664. | 1,014. | | | 650 |
| ISHARE S&P SMALLCAP 60 BARRA | VARIOUS | 05/16/2014 | 145,229. | 95,796. | | | 49,433. |
| MONDELEZ INTERNATIONAL | VARIOUS | 02/13/2014 | 21,322. | 15,055. | | | 6,267. |
| NESTLE S A SPONSORED ADR | VARIOUS | 02/13/2014 | 52,714. | 41,182. | | | 11,532. |
| NEWMONT MINING CORP | VARIOUS | 02/13/2014 | 11,553. | 25,009. | | | -13,456. |
| STATOILHYDRO ASA SPONSORED ADR | VARIOUS | 02/13/2014 | 46,890. | 45,750. | | | 1,140. |
| HALYARD HEALTH INC. | 01/27/2012 | 12/17/2014 | 29. | 18. | | | 11. |
| VODAFONE GROUP PLC | VARIOUS | 03/13/2014 | 36. | 47. | | | -11. |
| 2 Totals. Add the amounts in colu (subtract negative amounts). El include on your Schedule D, linichecked), line 9 (if Box E above (if Box F above is checked) ▶ | nter each tota e 8b (if Box D | here and above is | 432,658. | 377,465. | : | | 55,193. |

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment