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For calendar year 2014, or tax year beginning 01-01-2014

Department of the Treasury

Internal Revenue Service

DLN: 93491104003015

OMB No 1545-0052

Open to Public Inspection

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 instructions is at <u>www.irs.gov/form990pf</u>.

, and ending 12-31-2014

		undation INDOWMENT FOUNDATION		A Employer identification number 42-1214699							
Nicon	L	Laterat (as B.O. have seen for a face of	1-1	I D /		B Telephone number (see instructions)					
	ber and D BOX 1	I street (or P O box number if mail is not a 567	delivered to street address)	Room/suite		(641) 423-5154					
				(041) 423-3134							
		n, state or province, country, and ZIP or for 7, IA 504021567	reign postal code			C If exemption	application is pendin	g, check here 🕨			
G C ł	neck a	ll that apply Initial return	Initial return of a fo	ormer public charity	y	D 1. Foreign or	ganizations, check he	ere 🕨 🗀			
		Final return	A mended return			2. Foreign or	ganizations meeting	·			
			Name change				k here and attach co Indation status was t	mputation '			
	-	ype of organization	01(c)(3) exempt private				507(b)(1)(A), chec				
			Accounting method			E If the found	ition is in a 60-mont	h tamination			
ofy	year <i>(f</i>	from Part II, col. (c),	Cother (specify)				1 507(b)(1)(B), chec				
line	e 16) F	\$ 5,931,177 (F	Part I, column (d) must b	e on cash basıs.)							
Pa	rt I	Analysis of Revenue and total of amounts in columns (b), (c), a necessarily equal the amounts in columnstructions))	nnd (d) may not	(a) Revenue and expenses per books	(b) N	let investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)			
	1	Contributions, gifts, grants, etc , i	received (attach								
		schedule)									
	2	Check 🕨 🔽 If the foundation is no	t required to attach								
		Sch B									
	3	Interest on savings and temporar	y cash investments								
	4	Dividends and interest from secui	rities	215,941		215,941					
	5a	Gross rents									
٠.	b	Net rental income or (loss)									
Ę	6a	Net gain or (loss) from sale of ass	ets not on line 10								
Revenue	b	Gross sales price for all assets or	n line 6 a								
	7	Capital gain net income (from Par	t IV, line 2)			162,181					
	8	Net short-term capital gain									
	9	Income modifications									
	10a	Gross sales less returns and									
	١.	allowances									
	b	Less Cost of goods sold Gross profit or (loss) (attach sche									
	11	Other income (attach schedule)									
	12	Total. Add lines 1 through 11 .		215,941		378,122					
	13	Compensation of officers, director		1,672		1,672		1,672			
	14	Other employee salaries and wag	· · · · -	· · ·		·					
φ	15	Pension plans, employee benefits									
Expenses	16a	Legal fees (attach schedule)		16,129		16,129		16,129			
¥	ь	Accounting fees (attach schedule)								
	С	O ther professional fees (attach so	chedule)								
) tiv	17	Interest									
Administrative	18	Taxes (attach schedule) (see inst	,								
Ξ	19	Depreciation (attach schedule) ar	· · · · · · · · · · · · · · · · · · ·								
Ę	20	Occupancy	-					_			
A D	21	Travel, conferences, and meeting	<u> </u>								
and	22	Printing and publications Other expenses (attach schedule	<u> </u>	5,456							
Ē	23	Total operating and administrativ	<u> </u>	5,430				_			
Operating	24	Add lines 13 through 23	·	23,257		17,801		17,801			
<u>a</u>	25	Contributions, gifts, grants paid.	—	271,800		1.,001		271,800			
U	26	Total expenses and disbursement:	F	,-,-							
		25	S. Aud illes 24 dilu	295,057		17,801		289,601			
	27	Subtract line 26 from line 12									
	a	Excess of revenue over expenses	_	-79,116							
	b	Net investment income (if negative	· · · · · · -			360,321					
	С	Adjusted net income (if negative,	enter -0 -)								

Da	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year		of year
-		Balance Sheets Attached schedules and amounts in the 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	15,103	<u> </u>	
	2	Savings and temporary cash investments	165,344	216,590	216,590
	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 🟲			
sets	8	Inventories for sale or use			
Ϋ́	9	Prepaid expenses and deferred charges			
∢	10a	Investments—U S and state government obligations (attach schedule)		_	111,987
	b	Investments—corporate stock (attach schedule)			3,532,484
	С	Investments—corporate bonds (attach schedule)	1,964,484	1,954,146	2,056,523
	11	Investments—land, buildings, and equipment basis 🟲			
		Less accumulated depreciation (attach schedule) -			
		Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis 🟲			
		Less accumulated depreciation (attach schedule) -			
	15	Other assets (describe 🟲)			
	16	Total assets (to be completed by all filers—see the			
		instructions Also, see page 1, item I)	5,111,614	5,193,479	5,931,177
	17	Accounts payable and accrued expenses			_
v	18	Grants payable			
₽	19	Deferred revenue			_
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			_
٦ ا	21	Mortgages and other notes payable (attach schedule)		057	
	22	Other liabilities (describe	-4,400		4
	23	Total liabilities (add lines 17 through 22)	-4,400	-5,600	<u> </u>
y.		Foundations that follow SFAS 117, check here			
Balance		and complete lines 24 through 26 and lines 30 and 31.			
<u> </u>	24	Unrestricted			_
	25	Temporarily restricted			_
Fund	26	Permanently restricted			_
F		Foundations that do not follow SFAS 117, check here F and complete lines 27 through 31.			
s or	27	Capital stock, trust principal, or current funds			
Ą.	27	Paid-in or capital surplus, or land, bldg, and equipment fund			-
Assets	28 29	Retained earnings, accumulated income, endowment, or other funds	5,116,014	5,199,079	_
Net	30	Total net assets or fund balances (see instructions)	5,116,014		4
Z	31	Total liabilities and net assets/fund balances (see instructions)	5,111,614		4
Da	31 rt II I		3,111,011	3,133,17	1
		, ,	(a) line 20 (grae	
1		Total net assets or fund balances at beginning of year—Part II, column with end-of-year figure reported on prior year's return)	(a), line 30 (must a		5,116,014
2			 		-79,116
3		Other increases not included in line 2 (itemize)		· · · · · · · · · · · · · · · · · · ·	162,181
4		Add lines 1, 2, and 3			5,199,079
5		Decreases not included in line 2 (itemize)	· ·	5	- 1- 2 2 1 2 . 3
6		Total net assets or fund balances at end of year (line 4 minus line 5)—I	Part II, column (b), l		5,199,079

the Part VI instructions

(a) List and describ- 2-story brick ware		(b) How acquired P—Purchase D—Donation	e (c) Date acquired		(d) Date sold (mo , day, yr)			
1 a WACHOVIA SETTL	EMENT				Р	200	9-01-01	2014-02-20
b CAPITAL GAIN DIV	/IDENDS				P	201	0-01-01	2014-12-31
c REDEMPTION OF 6	3 SH VAN I	(AMPEN TRUST 70			P	200	5-01-01	2014-10-27
d								
e								
(e) Gross sales price		(f) Depreciation allowe (or allowable)	d		or other basıs bense of sale			or (loss)) mınus (g)
a	983		0		C			983
b	152,852		0		(152,852
С	15,233		0		6,887	7		8,346
d								
e								
Complete only for assets	showing gai	n ın column (h) and owne	d by th	e foundation	on 12/31/69	(I)	Gains (Col	(h) gain minus
(i) F M V as of 12/31/69		(j) Adjusted basis as of 12/31/69		(k) Exce	ess of col (ı) ol (j), ıf any			ess than -0-) or
a	0		0		C			983
b	0		0		C			152,852
С	0		0		C)		8,346
d								
e								
		coss) as defined in sectio 8, column (c) (see instru 	ns 122	2(5) and (6)	ter -0-	3		162,181
Part V Qualification For optional use by domestic		ction 4940(e) for R						
f section 4940(d)(2) applies, Was the foundation liable for t f "Yes," the foundation does i	leave this p he section 4 not qualify u	art blank 942 tax on the distributa nder section 4940(e) Do	able am o not co	nount of any y omplete this p	ear in the base pe part	riod?		┌ Yes ┍ No
(a) Base penod years Calendar		(b)		(c)			(d) Distribution	n ratio
year (or tax year beginning in)	Aujusted	qualifying distributions	net va	aiue or nonchari	table-use assets	(c	ol (b) divided	
2013	<u> </u>	251,326			5,524,231			0 045495
2012	-	227,748			5,176,887			0 043993
2011	1	241,873			5,060,334			0 047798
2010	+	218,497 165,950			4,792,919			0 045587
	nn (d).	•				2		0 220221
3 A verage distribution					2 by 5, or by	3		0 044044
4 Enter the net value of noncharitable-use assets for 2014 from Part X, line			-	" · · ·			5,846,613	
								257,508
6 Enter 1% of net investment income (1% of Part I, line 27b)								
						· · · · · · · · · · · · · · · · · · ·		
	Add lines 5 and 6					7		261 111
8 Enter qualifying dist		m Part XII, line 4				7 8		261,111 289,601

Add lines 1 and 2	Form	990-PF (2014)		Р	age 4
on line 1 Date of nulsing or determination letter Date of nulsing or determination letter (attach copy of letter if necessary-see instructions)	Pai	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the ins	tructio	ns)	
Date of ruling or determination letter	1a	Exempt operating foundations described in section 4940(d)(2), check here 🟲 🦵 and enter "N/A"			
instructions) Domestic foundations that meet the section 4940(s) requirements in Part V, check her ₱ ₱ ₱ ₱ ₱ ₱ ₱ ₱ ₱ ₱ ₱ ₱ ₱ ₱ ₱ ₱ ₱ ₱ ₱					
b Domestic foundations that meet the section 4940 (e) requirements in Part V, check					
here ▶ Fand enter 1% of Part I, line 27b All other connects (conditions enter 2% of line 27b exempt foreign organizations enter 4% of Part I, line 12, col. (b) Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-1 3	h	·			2 60 2
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(e)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2. 3 3 3,603 4 Subticle 4, (income) tax (domestic section 4947(e)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0 5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0 5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0 5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0 6 Creates/Payments 2 2 3 3,603 3 3,603 6 Creates/Payments 2 2 3 3 3,603 6 Creates/Payments 4 2 5 3,600 6 Creates/Payments 5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0 6 Exempt foreign organizations—law withheld at source. 6 G G G G G G G G G G G G G G G G G G	D	J 		•	3,603
Part I, Ine 12, col. (b) 2 Tax under section 511 (dismestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-1 3 Add lines 1 and 2. 3 Add lines 1 and 2. 3 Add lines 1 and 2. 4 Subtrite A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-1 5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-1 5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-1 5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-1 5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-1 6 De Exempt Foreign organizations—law withheld at source					
2 3 3 3,603 3 3,603 3 3,	С				
a Note in the content of the content	2				
4 Subtile A (norone) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter-0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter-0 5 Credits/Payments 2014 exempt foreign organizations—tax withheld at source. 6 Lexempt foreign organizations—tax withheld at source. 6 Lexempt foreign organizations—tax withheld at source. 6 Lexempt foreign organizations—tax withheld at source. 6 Leave and with application for extension of time to file (Form 8868). 6 Letter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 7 Total credits and payments. Add lines 6 a through 6d. 7 Total credits and payments Add lines 6 at horough 6d. 7 Total credits and payments. Add lines 5 and 8 is more than line 7, enter amount ower. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount ower. 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount ower. 11 Enter the amount of line 10 to be Credited to 2015 estimated tax. 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 10 Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)?. 17 If the answer is "Yes" to la or 1b, stateh a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. 10 Did it be foundation in Form 1120-PDU for this year? 11 Line No 12 Line foundation in Advanced the proper of the activities (section 4955) imposed during the year. 13 Line foundation made any changes, not previously reported to the IRS? 14 Enter the enumulation and the proper of the activities. 15 Lin					0
enter-0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter-0 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter-0 5 Tax based on investment sand 2013 overpayment credited to 2014 6 Exempt foreign organizations—tax withheld at source. 6 Bextow with application for extension of time to file (Form 868). 6 Tax paid with application for extension of time to file (Form 868). 6 Tax based with application for extension of time to file (Form 868). 7 Total credits and payments. Add lines 6 a through 6d. 7 Total credits and payments. Add lines 6 a through 6d. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount overpaid. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount overpaid. 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 2018 settimated tax 12 During the tax year, did the foundation attempts or influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a During the tax year, did the foundation attempts to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a During the tax year, did the foundation after description of the activities and copies of any materials published or distributed by the foundation in concention with the activities. 1b No 1f the answer is 'Tes' to lar or 16, statich a cetaled description of the activities and copies of any materials published or distributed by the foundation in concention with the activities. 1 Description of the condition of the activities and copies of any materials published or distributed by the foundation in concention with the activities. 1 Description of the condition and any changes, not previously reported to the activities and confoundation and any changes, not previously into the distributed by the condition of the ac	3	Add lines 1 and 2			3,603
5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0	4				
a 2014 estimated tax payments and 2013 overpayment credited to 2014	_	check o')			
a 20.44 estimated tax payments and 2013 overpayment credited to 2014 66 5,600 b Exempt foreign organizations—tax withheld at source				•	3,603
b Exempt foreign organizations—tax withheld at source 6 b 6 c 1 ax paid with application for extension of time to file (Form 8868) 6 c 1 ax paid with application for extension of time to file (Form 8868) 6 c 1 ax paid with application for extension of time to file (Form 8868) 6 c 1 ax paid with application for extension of time to file (Form 8868) 6 c 1 ax paid with application for extension of time to file (Form 8868) 6 c 1 ax paid with application for extension of the file (Form 8868) 6 c 1 ax paid with application of the file (Form 8868) 6 c 1 ax paid (Form 8868) 7 c 1 ax paid with application of the file (Form 8868) 7 c 1 ax paid (Form 8868) 8 c 1 ax paid	_				
c Tax paid with application for extension of time to file (Form 8868). 6c d Backup withholding erroneously withheld. 6d 7 Total credits and payments Add lines 6s through 6d. 7 5,600. 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed . 9 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. 10 1,997 11 Enter the amount of line 10 to be credited to 2015 estimated tax. 1,997 Refunded 11 11 Enter the amount of line 10 to be credited to 2015 estimated tax. 1,997 Refunded 11 11 Enter the amount of line 10 to be credited to 2015 estimated tax. 1,997 Refunded 11 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1 10 1,997 Refunded 11 13 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1 10 10 10 10 10 10 10					
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7 Total credits and payments Add lines 6a through 6d. 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 222 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed. 9 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. 1997 Refunded 11 10 13,99? 11 Enter the amount of line 10 to be credited to 2015 estimated tax. 1998 Refunded 11 10 13,99? 11 Enter the amount of line 10 to be credited to 2015 estimated tax. 1998 Refunded 10 11 12 12 12 12 12 12 12 12 12 12 12 12	C				
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed. 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 1,997 Refunded 11 221	d				
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owerpaid. ▶ 10 10 1,997 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. ▶ 10 10 1,997 11 Enter the amount of line 10 to be Cerebide to 2015 estimated tax ▶ 1,997 Refunded ▶ 11 Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	7	Total credits and payments Add lines 6a through 6d			5,600
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. ▶ 10 1,997 11 Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ 1,997 Refunded ▶ 11 PORT VITA Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached 8			
Part VII - A Statements Regarding Activities 13 Durng the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 14 Durng the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 15 Durng the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 16 Durl it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? 16 Durl it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? 17 Durl it fermal the foundation in connection with the activities and copies of any materials published or distributed by the foundation in connection with the activities. 18 Durl the foundation ▶ \$ (2) On foundation managers ▶ \$ (1) On the foundation ▶ \$ (2) On foundation managers ▶ \$ (2) On foundation managers ▶ \$ (3) On the foundation managers ▶ \$ (4) On foundation managers ▶ \$ (5) On foundation managers ▶ \$ (7) On the foundation managers ▶ \$ (7) On the foundation managers ▶ \$ (7) On the foundation managers ▶ \$ (7) On foundation foundation foundatio	9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? 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 and copies of any materials published or distributed by the foundation in connection with the activities. C Did the foundation file Form 1120-POL for this year? C Did the foundation in Form 1120-POL for this year? C Did the foundation in Form 1120-POL for this year? Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► s Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► s Has the foundation managers In such that have not previously been reported to the IRS? 2 No If "Yes," attach a detailed description of the activities. 3 Has the foundation on appaged in any activities that have not previously been reported to the IRS? 3 Has the foundation on appaged in any activities that have not previously been reported to the IRS? 3 No If "Yes," attach a state detailed description of the activities. 3 Has the foundation have unrelated business gross income of \$1,000 or more during the year? 4a No 4b If "Yes," has it filed a tax return on Form 990-T for this year? 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 No If "Yes," attach the statement required by General Instruction 7. 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? • Did the founda	10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10			1,997
Table 1. During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? 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. C Did the foundation file Form 1120-POL for this year? C Did the foundation file Form 1120-POL for this year? C Did the foundation file Form 120-POL for this year? C Did the foundation file Form 1120-POL for this year? C Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year C Did the foundation file Form 1120-POL for this year? C Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ E Has the foundation had any activities that have not previously been reported to the IRS? 2 No If "Yes," attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 3 No If "Yes," has it filed a tax return on Form 990-T for this year? 4 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 No If "Yes," attach the statement required by General Instruction T. 6 Are the requirements of section 503(e) (relating to sections 4941 through 4945) satisfied either 9 By language in the governing instrument, or 9 By language in the governing instrument? 6 Yes 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 Yes 8a Enter the states to which the foundation reports or with which	11	Enter the amount of line 10 to be Credited to 2015 estimated tax 1,997 Refunded 11			
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? 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. c Did the foundation file Form 1120-POL for this year? c Did the foundation file Form 1120-POL for this year? 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 ▶ \$ e 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 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," estach a conformed copy of the changes 3 No Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a No If "Yes," has it filed a tax return on Form 990-T for this year? 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either 9 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 so that no mandatory directions that conflict with the state law remain in the governing instrument? 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 Yes 8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ No 1 If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	Par	t VII-A Statements Regarding Activities			
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? 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. c Did the foundation file Form 1120-POL for this year? c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$	1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No
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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. C Did the foundation file Form 1120-POL for this year?		for definition)?	1b		No
published or distributed by the foundation in connection with the activities. c Did the foundation file Form 1120-POL for this year? (1) On the foundation Form 1120-POL for this year? (1) On the foundation S (2) On foundation managers S Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers S 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 No If "Yes," attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 3 No 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4b S 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 No If "Yes," attach the statement required by General Instruction 7. 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 so that no mandatory directions that conflict with the state law remain in the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument so that no mandatory directions and Part XV. 7 Yes 8a Enter the states to which the foundation reports or with which it is registered (see instructions) I I S S No					
to Did the foundation file Form 1120-POL for this year?. d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$					
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation	c		1c		No
e 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 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 3 No 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a No b If "Yes," has it filed a tax return on Form 990-T for this year? 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 No 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 so that no mandatory directions that conflict with the state law remain in the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument so that no mandatory directions 5 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 Yes 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) of each state as required by General Instruction 6? If "No," attach explanation. 8b Yes 9 Is the foundation		·			
e 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? 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4 In the foundation have unrelated business gross income of \$1,000 or more during the year? 4 In the foundation have unrelated business gross income of \$1,000 or more during the year? 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 6 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either 9 By language in the governing instrument, or 9 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? 5 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. 8a Enter the states to which the foundation reports or with which it is registered (see instructions) 1 Did the foundation claiming status as a private operating foundation within the meaning of section 4942(1)(3) or 4942(1)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? 1 If "Yes," complete Part XIV 9 No 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names	_				
on foundation managers \$ \$	e				
Has the foundation engaged in any activities that have not previously been reported to the IRS?	_				
If "Yes," attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	2	- · · · · · · · · · · · · · · · · · · ·	,		No
Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	_		┝╧		-110
of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	_				
Did the foundation have unrelated business gross income of \$1,000 or more during the year?	3		_		NI-
b If "Yes," has it filed a tax return on Form 990-T for this year?	_				
Was there a liquidation, termination, dissolution, or substantial contraction during the year?	_				NO
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?					
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?	5		. 5		No
 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?		If "Yes," attach the statement required by General Instruction T.			
 ■ 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		ļ		
that conflict with the state law remain in the governing instrument?					
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		By state legislation that effectively amends the governing instrument so that no mandatory directions]		
and Part XV		that conflict with the state law remain in the governing instrument?	. 6	Yes	
Enter the states to which the foundation reports or with which it is registered (see instructions) ▶IA ■ 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. ■ 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 ■ No ■ No ■ No	7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c),			
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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. 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 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names	8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
General (or designate) of each state as required by General Instruction G? If "No," attach explanation. 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		► <u>IA</u>			
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	b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney			
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		General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	8b	Yes	
If "Yes," complete Part XIV	9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)			
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names		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		No
and addresses	10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			
		and addresses.	10		No

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►N/A			
14	The books are in care of ►HEINY LAW FIRM PLC Telephone no ►(641)	423-	5154	
	Located at ►11 FOURTH ST NE MASON CITY IA ZIP+4 ►50401			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here			─
13	and enter the amount of tax-exempt interest received or accrued during the year		,	,
	- · · · · · · · · · · · · · · · · · · ·		1	l
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over	۱	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country			
Par	TT VII-B Statements Regarding Activities for Which Form 4720 May Be Required		I I	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	 	Yes	No
1a	During the year did the foundation (either directly or indirectly)	1		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	1		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes Vo	1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V No	1		
	(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)?	1		
	for the benefit or use of a disqualified person)?	1		
	if the foundation agreed to make a grant to or to employ the official for a period	1		
	after termination of government service, if terminating within 90 days) Yes V No	1		
ь	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations	1		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
_	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,	1		
	that were not corrected before the first day of the tax year beginning in 2014?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	<u> </u>		110
_	operating foundation defined in section 4942(1)(3) or 4942(1)(5))	1		
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d	1		
_	and 6e, Part XIII) for tax year(s) beginning before 2014?	1		
	If "Yes," list the years > 20, 20, 20, 20	1		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	l		
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	1		
	to all years listed, answer "No" and attach statement—see instructions)	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	► 20, 20, 20, 20	1		
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at	l		
	any time during the year?	İ		
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation	ĺ		
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved	ĺ		
	by the Commissioner under section $4943(c)(7)$) to dispose of holdings acquired by gift or bequest, or (3)	l		
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine	ĺ		
	ıf the foundation had excess business holdings in 2014.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		No

Pa	rt VII-B	Statements Rega	rdiı	ng Activities for	Wŀ	ich Form 4720	May	Be Required <i>(cont</i>	inue	ed)	
5a	During th	e year dıd the foundatıor	рау	or incurany amoun	t to						
	(1) Carry	on propaganda, or other	wise	attempt to influence	e leg	ıslatıon (section 494	45(e)) [?]	No		
	(2) Influe	nce the outcome of any	spec	ıfıc publıc electıon (see	section 4955), or to	car	ry			
	on, di	rectly or indirectly, any	ote	registration drive?.				⊤ Yes ▽	, No		
	(3) Provid	de a grant to an individu	al for	travel, study, or oth	ers	ımılar purposes?		☐ Yes ☑	No		
	(4) Provid	de a grant to an organıza	tıon	other than a charita	ble,	etc , organization de:	scrib	ped			
	ın sec	ction 4945(d)(4)(A)? (se	e in	structions)				┌ Yes ▽	No		
	(5) Provid	de for any purpose other	thar	religious, charitable	e, sc	ientific, literary, or					
	educa	ational purposes, or for t	ne pr	evention of cruelty t	o ch	ıldren or anımals?.			No		
b	If any ans	swerıs "Yes" to 5a(1)–(5), d	ıd any of the transac	tion	s fail to qualify unde	r the	exceptions described in			
	Regulatio	ns section 53 4945 or i	nac	current notice regarding disaster assistance (see instructions)?							
	O rganızat	tions relying on a curren	t not	ice regarding disaster assistance check here							
c		wer is "Yes" to question									
	tax becau	ise it maintained expend	ıture	responsibility for th	ie gr	ant?		Г Yes Г	- No		
		attach the statement requ									
6a		undation, during the yea					prer	niums on			
		al benefit contract?							- No		
b	Did the fo	undation, during the yea	r, pa	y premiums, directly	orı	ndirectly, on a perso	nal	benefit contract?		6b	No
		o 6b, file Form 8870.									
7a	At any tir	ne during the tax year, v	as t	ne foundation a party	/ to a	a prohibited tax shel	ter ti	ransaction? TYes V	No		
ь	b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?								7b		
								n Managers, Highly		d Emp	lovees,
Pa		and Contractors		, 						•	
1	List all off	icers, directors, trustees									
	(a) Na	me and address	(b)	Title, and average hours per week		c) Compensation If not paid, enter		(d) Contributions to mployee benefit plans	(e)	Expens	e account,
	(a) Ivai	ille allu audress	d d	evoted to position	'	-0-)		deferred compensation	0	therallo	owances
JAME	S R HEINY		PRE	RESIDENT		1,672		. 0			0
MAS	ON		7 00	10		·					
CIT	Y,IA 5040	01									
FRAN	K B INGHRAM	1		P,TREASURER		0		0			0
MAS			12 (00							
	Y,IA 5040										
	LD M STAMBA	AUGH	SEC 7 00			0		0			0
MAS	ON Y,IA 5040	n 1	, 00	,							
			emi	olovees (other than i	thos	e included on line 1—	see	instructions). If none, er	ter"	NONE."	,
	- Componion	and an arrangment para						(d) Contributions to			
(a)		l address of each employ	ee	(b) Title, and avera		(c) Compensatio	n	employee benefit			e account,
	paid r	nore than \$50,000		devoted to position		(5, 5 5 , 5 5		plans and deferred compensation	0	ther all	owances
NON	IF							compensation			
-	· <u> </u>			1							
				1							
								<u> </u>			
Taka		fathar amplayage paid a		+ E A A A A							

Form 990-PF (2014)		Page /
Part VIII Information About Officers, Directors, True and Contractors (continued)	ıstees, Foundation Managers, Highly	Paid Employees,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, enter "NONE".	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		· 0
Total number of others receiving over \$50,000 for professional service	es	-
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year Include organizations and other beneficiaries served, conferences convened, research papers		Expenses
1	produced, etc	
2		
3		
4		
Part IX-B Summary of Program-Related Investment		1
Describe the two largest program-related investments made by the foundation du	ring the tax year on lines 1 and 2	A mount
1		1
		-
2		
		1
All other program-related investments See instructions		
3		
		4
Total. Add lines 1 through 3		
Total , ad in ough 5		I

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations. see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc. 1 purposes 1a 5.925.492 1h 10.156 1c 1d 5.935.648 Reduction claimed for blockage or other factors reported on lines 1a and 1e 2 2 3 3 Subtract line 2 from line 1d. 5.935.648 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see 4 89.035 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4. 5 5.846.613 5 292,331 **Distributable Amount** (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and Part XT certain foreign organizations check here $\blacktriangleright \Gamma$ and do not complete this part.) 292.331 1 Tax on investment income for 2014 from Part VI, line 5. 3.603 2a Income tax for 2014 (This does not include the tax from Part VI). . . 2c 3.603 3 3 288.728 4 4 5 5 288.728 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . 7 288.728 7 Part XIII Oualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 1 Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. 1a 289,601 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. 2 2 3 Amounts set aside for specific charitable projects that satisfy the За. 3b 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 289,601 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 3,603 285,998 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

P	art XIII Undistributed Income (see instr	ructions)			
	·	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1	Distributable amount for 2014 from Part XI, line 7				288,728
2	Undistributed income, if any, as of the end of 2014				
	Enter amount for 2013 only			249,161	
Ь	Total for prior years 20, 20, 20				
3					
а	From 2009				
b	From 2010				
C	From 2011				
d	From 2012				
	From 2013				
f	Total of lines 3a through e				
4	Qualifying distributions for 2014 from Part				
	XII, line 4 🕨 \$ 289,601				
	Applied to 2013, but not more than line 2a			249,161	
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				40,440
е	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).)				
6	Enter the net total of each column as indicated below:				
_					
	Corpus Add lines 3f, 4c, and 4e Subtract line 5 Prior years' undistributed income Subtract				
U	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)				
الہ	tax has been previously assessed			+	
a	Subtract line 6c from line 6b Taxable amount —see instructions				
е	Undistributed income for 2013 Subtract line				
	4a from line 2a Taxable amount—see				
_	instructions				
T	Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must				
	be distributed in 2015				248,288
7	A mounts 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)				
9	Excess distributions carryover to 2015.				
_	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9				
а	Excess from 2010				
b	Excess from 2011				
	Excess from 2012				
	Excess from 2013				
е	Excess from 2014				

P	art XIV Private Operating Four	ıdations (see ıı	nstructions and P	art VII-A, question	on 9)	
.a	If the foundation has received a ruling or d		-			
	foundation, and the ruling is effective for 2	-	_			
b	Check box to indicate whether the organiza	ition is a private o	perating foundation	described in section	on - 4942(j)(3)	or 「 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) local
	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 "Assets" alternative test—enter					
а	(1) Value of all assets					
	(2) Value of assets qualifying				1	
	under section 4942(J)(3)(B)(I)					
b	"Endowment" alternative test— enter 2/3					
	of minimum investment return shown in					
c	Part X, line 6 for each year listed "Support" alternative test—enter					
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments					
	on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(III)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Pa	rt XV Supplementary Information	n (Complete t	his part only if	the organizati	on had \$5,000	or more in
	assets at any time during	the year—see	instructions.)			
	Information Regarding Foundation Manage					. d . s
а	List any managers of the foundation who had before the close of any tax year (but only in				•	idation
	before the close of any tax year (bacomy n	ene, nave continu	racea more enam po,	,000) (000 50000	50, (d)(L),	
	NONE					
b	List any managers of the foundation who ov	vn 10% or more of	f the stock of a corp	oration (or an equa	lly large portion of t	he
	ownership of a partnership or other entity)					
	NONE					
	NONE	Cift Lase Cal !	laushin sta D			
	Information Regarding Contribution, Grant					
	Check here if the foundation only mal					
	unsolicited requests for funds If the found other conditions, complete items 2a, b, c,	- :	grants, etc (see in	structions) to indiv	iuuais oi oiganizati	ons under
	, , , , , , , , , , , , , , , , , , , ,					
2	The name, address, and telephone number	or e-mail address	s of the person to w	hom applications ch	ould be addressed	
-	GERALD M STAMBAUGH SECRETARY	J. S Man addices	and person to wi	applications st	50 444105564	
	P O BOX 1567					
	MASON CITY, IA 504021567					
	(641) 423-5154					
b	The form in which applications should be s		rmation and materia	als they should inclu	ıde	
	WRITTEN REQUEST IN SPECIFIC FORM					
C	Any submission deadlines					
	JANUARY THRU APRIL 30 EACH YEAR					
d	Any restrictions or limitations on awards,	such as by geogra	iphical areas, charit	able fields, kinds of	institutions, or oth	er
	factors					
	NONE					

3 Grants and Contributions Paid		proved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year See Additional Data Table	or substantial contributor	recipient		
Total	<u> </u>	<u> </u>	3a	271,800
			1	

Form 990-PF (2014)	-1				Page 12
Part XVI-A Analysis of Income-Produ Enter gross amounts unless otherwise indicated		es Susiness income	Excluded by section	n 512 513 or 514	(e)
1 Program service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	Related or exempt function income (See instructions)
a b					mstructions)
c					
e					
g Fees and contracts from government agencies Membership dues and assessments Interest on savings and temporary cash investments					
4 Dividends and interest from securities 5 Net rental income or (loss) from real estate					215,941
a Debt-financed property					
6 Net rental income or (loss) from personal property.					
7 O ther investment income8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events10 Gross profit or (loss) from sales of inventory.					
11 Other revenue a					
c					
e					
12 Subtotal Add columns (b), (d), and (e).13 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify				 3	215,941 215,941
Part XVI-B Relationship of Activities t	to the Accom				
Line No. Explain below how each activity for whethe accomplishment of the foundation instructions)					
4 INVESTMENT INCOME IS THE SOUR	CE FOR THE DI	STRIBUTIONS TO	501(C)(3)		
4 ORGANIZATIONS					

Form 990-P	F (2014)								Рa	ge 13	
Part XVI	Information R Noncharitable				sactio	ns and Relations	ships With				
	organization directly or i								Yes	No	
organıza	tions?										
a Transfer	s from the reporting fou	ndation to a n	noncharıtable	e exempt organiz	atıon of	F					
(1) Cas	h							1a(1)		No	
(2) Oth	erassets							1a(2)		No	
b Other tra											
	es of assets to a noncha									No	
(2) Pur	chases of assets from a	noncharitabl	e exempt org	ganızatıon				. 1b(2)		No	
(3) Ren	tal of facilities, equipme	ent, or other a	issets					1b(3)		No	
(4) Reir	mbursement arrangeme	nts						1b(4)		No	
(5) Loa	ns or loan guarantees.							1b(5)		No	
(6) Perfo	ormance of services or r	membership o	or fundraising	; solicitations.				1b(6)		No	
c Sharing	of facılıtıes, equipment,	maılıng lısts,	, other assets	s, or paid employ	ees.			1c		No	
of the go in any tr	swer to any of the above ods, other assets, or se ansaction or sharing arr	ervices given rangement, sh	by the repor	ting foundation In (d) the value o	f the fo f the go	undation received le pods, other assets, or	ss than fair mark services receive	et value ed	e		
(a) Line No	(b) Amount involved	(c) Name of I	noncnaritable ex	xempt organization	(a)	Description of transfers,	transactions, and sno	aring arra	ingemei	nts	
describe	undation directly or indi d in section 501(c) of t complete the following	he Code (othe	*	•				. Γ _Y €	es F	√ _{No}	
	(a) Name of organizatio	n		(b) Type of organiza	ition	(c	Description of relati	onship			
the		and belief, it i rer has any ki	s true, corre	s true, correct, and complete Declar		retúr 			he IRS discuss this the preparer shown		
			<u> </u>			Date	Check if self-	PTIN		_	
	Print/Type preparer' F B INGHRAM	s name	Preparer's	Signature		2015-04-14	employed •	PIIN			
Paid Prepare		Firm's name ► HEINY MCMANIGAL LAW FIRM PLC									
Use Only		SON CITY, IA	A 5040215	67			Phone no (641)423- 5154				
	i						I				

Recipient	If recipient is an individual,	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	recipient		
a Paid during the year				
KINNEY PIONEER MUSEUM P O BOX 421 MASON CITY,IA 50402		501C3	PLAYERREPAIR MUSIC	3,000
TLC BROADCASTING CORPORATION 600 FIRST STREET N W MASON CITY,IA 50401		501C3	EQUIPMENT &ENGINEERINGCONSTRUCTION COSTS	15,000
CHARLIE BROWN PRESCHOOL 600 FIRST STREET N W MASON CITY,IA 50401		501C3	SURFACINGPLAYGROUNDSYSTEMS	10,000
COMMUNITY KITCHEN N I P O BOX 58 MASON CITY, IA 50402		501C3	PURCHASESFOOD	4,000
MEALS ON WHEELS P O BOX 58 MASON CITY, IA 50402		501C3	MEALSSUPPLEMENT	3,000
OPPORTUNITY VILLAGE 1200 NORTH 9TH STREET WEST CLEAR LAKE,IA 50428		501C3	BLADDER1/2 COST OFSCANNER	3,000
FRANCIS LAUER YOUTH SERVICES 50 NORTH EISENHOWER AVE MASON CITY,IA 50401		501C3	ACCREDITATION &OPERATIONSCONTINUING EDUCATION	35,000
CARING PREGNANCY CTR INC 830 15TH STREET S W MASON CITY,IA 50401		501C3	SUPPLIES	4,000
NIACC FOUNDATION 500 COLLEGE DRIVE MASON CITY,IA 50401		501C3	FARM REMODELINGSCHOLARSHIPS	20,000
FRIENDS OF IOWA CASA 220 NORTH WASHINGTON AVE MASON CITY,IA 50401		501C3	RECRUITMENTVOLUNTEER	1,000
NORTH IOWA VOCATIONAL CENTER INC 1225 SOUTH HARRISON AVE MASON CITY,IA 50401		501C3	EFFICIENCYENERGY	3,500
THE CHORAL MUSIC GUILD 1700 FOURTH STREET S E MASON CITY,IA 50401		501C3	SYSTEMSMICROPHONE	2,500
NORTHERN LIGHTS ALLIANCE FOR HOMELESS 50 CRESCENT DR MASON CITY,IA 50401		501C3	OPERATIONS	5,000
NORTH CENTRAL IA AG IN THE CLASS PROGRAM 65 STATE STREET PO BOX 68 GARNER,IA 504380068		501C3	AG EDUCATION	1,000
NORTH IOWA BAND FESTIVAL FD 25 WEST STATE STREET MASON CITY,IA 50401		501C3	FOR HIGH SCHOOLTRAVEL STIPENDSMARCHING BANDS	7,500
Total				271,800

Name and address (home or business) Name and address (home or business) a Paid duning the year HANCOCK CO AGRICULTURAL MUSEUM 2090 JAMES AVENUE BRITT, IA 50423 CITY OF MASON CITY 303 2ND STEET, IA 50423 CITY OF MASON CITY 303 2ND STEE SECOND TO STEET AND STEED TO STEE					
A Paid dumng the year HANCOCK CO AGRICULTURAL MUSEUM 2090 JAMES AVENUE BRITT, IA 50423 CITY OF MASON CITY 303 2ND ST SE MASON CITY 303 2ND ST SE MASON CITY, IA 50401 COMMUNITY POLICING AD BD 78 S GEORGIA AVE MASON CITY, IA 50401 ROCKWELL SWALEDALE EMT 3 WALNUT COURT ROCKWELL, IA 50469 CITY OF SWALEDALE 3 WALNUT COURT ROCKWELL, IA 50469 CITY OF SWALEDALE 3 WALNUT COURT ROCKWELL, IA 50469 YOUTH SPORTS FOUNDATION 2923 CEDAR ST SUITE 3 INSCHOLARSHIPSMASON CITY AREA CLINIC 1443 EAST STREET MASON CITY, IA 50401 CERRO GORDO FREE HEALTH CARE CLINIC 1443 EAST STREET MASON CITY, IA 50401 NIAD CENTER FOR HUMAN DEV PO BOX 556 MASON CITY, IA 50402 NORTH IOWA COMMUNITY ACTION PO BOX 1627 MASON CITY, IA 50401 HABITAT FOR HUMANITY 1411 SOUTH ACTION PO BOX 1627 MASON CITY, IA 50401 WINNEBAGO HISTORIAL SOUTH AS 50102 IMPROVE BARNLABOR TOFACILITIES MINNEBAGO HISTORIAL SOUTH AS 50103 IMPROVE BARNLABOR TOFACILITIES TORRESCRIPTION THAN THE SOUTH ACTION POR BARNLABOR TOFACILITIES TRUCKPURCHASE BOX MINITY ACTION PO BOX 1627 MASON CITY, IA 50401 WINNEBAGO HISTORIAL SOUTH TAFT AVENUE MASON CITY, IA 50401 WINNEBAGO HISTORIAL SOUTH TAFT AVENUE MASON CITY, IA 504360027	Name and address (home or	individual, show any relationship to any foundation manager	status of		A mount
HANCOCK CO AGRICULTURAL MUSEUM 2090 JAMES AVENUE BRITT, IA 50423 CITY OF MASON CITY 303 2ND ST SE MASON CITY, IA 50401 COMMUNITY POLICING AD BD 78 S GEORGIA AVE MASON CITY, IA 50401 ROCKWELL SWALEDALE EMT 3 WALNUT COURT ROCKWELL, IA 50469 CITY OF SWALEDALE 3 WALNUT COURT ROCKWELL, IA 50469 YOUTH SPORTS FOUNDATION 2923 CEDAR ST SUITE 3 MCSCAUSEL, IA 50469 CERRO GORDO FREE HEALTH CARE CLINIC 1443 EAST STREET MASON CITY, IA 50401 NIAD CENTER FOR HUMAN DEV PO BOX 556 MASON CITY, IA 50402 NORTH IOWA COMMUNITY AND COURT ROSS OF MASON CITY, IA 50401 NORTH IOWA COMMUNITY AND COURT ROSS OF MASON CITY, IA 50401 NORTH IOWA COMMUNITY ACTION PO BOX 1627 MASON CITY, IA 50401 HABITAT FOR HUMANITY 1411 SOUTH AFT AVENUE MASON CITY, IA 50401 WINNEBAGO HISTORIAL SOICS IMPROVEMENTSREMODELING SOICS IMPROVEMENTSREMODELING SOILS IMPROVE BARNLABOR MATERIALS SOICS IMPROVE BARNLABOR CONSCIPLING IMPROVEMENTSREMODELING MINDRO CITY, IA 50401 TRUCKPURCHASE BOX IMPROVEMENTSREMODELING MINDRO CITY, IA 50401 IMPROVE BARNLABOR TO FACILITIES TO ICC MENT TO THE TURN THE TU	a Paid during the year	or substantial contributor			
ST SE MASON CITY, IA 50401 COMMUNITY POLICING AD BD 78 S GEORGIA AVE MASON CITY, IA 50401 ROCKWELL SWALEDALE EMT 3 WALNUT COURT ROCKWELL, IA 50469 CITY OF SWALEDALE 3 WALNUT COURT ROCKWELL, IA 50469 YOUTH SPORTS FOUNDATION 2923 CEDAR ST SUITE 3 MUSCATINE, IA 52761 CERRO GORDO FREE HEALTH CARE CLINIC 1443 EAST STREET MASON CITY, IA 50401 NIAD CENTER FOR HUMAN DEV P O BOX 656 MASON CITY, IA 50402 NORTH IOWA COMMUNITY ACTION PO BOX 1627 MASON CITY, IA 50401 HABITAT FOR HUMANITY 1411 SOUTH TAFT AVENUE MASON CITY, IA 50401 WINNEBAGO HISTORIAL SOUTH SOUTH SOUTH AS SOUTH TAFT AVENUE MASON CITY, IA 50401 WINNEBAGO HISTORIAL SOUTH SOUTH SOUTH AS SOUTH TO FACILITIES DEPT DEPT BUILD MATERIAL SEPTION AND COUNTERED OF WALL SOUTH TAFT AVENUE MASON CITY, IA 50401 TO SOUTH TAFT AVENUE MASON CITY, IA 50401 WINNEBAGO HISTORIAL SOUTH TO BOX 27 FOREST CITY, IA 504360027 FOREST CITY, IA 504360027	HANCOCK CO AGRICULTURAL MUSEUM 2090 JAMES AVENUE		501C3	IMPROVEMENTSREMODELING	2,000
78 S GEORGIA AVE MASON CITY, IA 50401 ROCKWELL SWALEDALE EMT 3 WALNUT COURT ROCKWELL, IA 50469 CITY OF SWALEDALE 3 WALNUT COURT COURT COURT COURT COURT SPORTS FOUNDATION 2923 CEDAR ST SUITE 3 MUSCATINE, IA 52761 CERRO GORDO FREE HEALTH CARE CLINIC 1443 EAST STREET MASON CITY, IA 50401 NIAD CENTER FOR HUMAN DEV PO BOX 656 MASON CITY, IA 50402 NORTH IOWA COMMUNITY ACTION PO BOX 1627 MASON CITY, IA 50401 HABITAT FOR HUMANITY 1411 SOUTH TAFT AVENUE MASON CITY, IA 50401 WINNEBAGO HISTORIAL SOCIETY PO BOX 27 FOREST CITY, IA 504360027 FOREST CITY, IA 504360027	ST SE		501C3		1,800
WALNUT COURT ROCKWELL, IA 50469 CITY OF SWALEDALE 3 WALNUT COURT ROCKWELL, IA 50469 YOUTH SPORTS FOUNDATION 2923 CEDAR ST SUITE 3 MUSCATINE, IA 52761 CERRO GORDO FREE HEALTH CARE CLINIC 1443 EAST STREET MASON CITY, IA 50401 NIAD CENTER FOR HUMAN DEV P O BOX 656 MASON CITY, IA 50402 NORTH 10WA COMMUNITY ACTION P O BOX 1627 MASON CITY, IA 50401 HABITAT FOR HUMANITY 1411 SOUTH TAFT AVENUE MASON CITY, IA 50401 WINNEBAGO HISTORIAL SOCIETY P O BOX 27 FOREST CITY, IA 504360027 WINNEBAGO HISTORIAL SOCIETY P O BOX 27 FOREST CITY, IA 504360027	78 S GEORGIA AVE		501C3	MATERIALSEDUCATIONAL	1,000
COURT ROCKWELL, IA 50469 YOUTH SPORTS FOUNDATION 2923 CEDAR ST SUITE 3 INSCHOLARSHIPSMASON CITY AREA CERRO GORDO FREE HEALTH CARE CLINIC 1443 EAST STREET MASON CITY, IA 50401 NIAD CENTER FOR HUMAN DEV PO BOX 656 MASON CITY, IA 50402 NORTH IOWA COMMUNITY ACTION PO BOX 1627 MASON CITY, IA 50401 HABITAT FOR HUMANITY 1411 SOUTH TAFT AVENUE MASON CITY, IA 50401 WINNEBAGO HISTORIAL SOCIETY PO BOX 27 FOREST CITY, IA 504360027 DOLL THE SOUTH TAFT AVENUE MASON CITY, IA 504360027 WINNEBAGO HISTORIAL SOCIETY PO BOX 27 FOREST CITY, IA 504360027	WALNUT COURT		501C3	EQUIPMENTPURCHASE OF	2,200
2923 CEDAR ST SUITE 3 MUSCATINE, IA 52761 CERRO GORDO FREE HEALTH CARE CLINIC 1443 EAST STREET MASON CITY, IA 50401 NIAD CENTER FOR HUMAN DEV P O BOX 656 MASON CITY, IA 50402 NORTH IOWA COMMUNITY ACTION P O BOX 1627 MASON CITY, IA 50401 HABITAT FOR HUMANITY 1411 SOUTH TAFT AVENUE MASON CITY, IA 50401 WINNEBAGO HISTORIAL SOCIETY P O BOX 27 FOREST CITY, IA 504360027 INSCHOLARSHIPSMASON MEDICATION FORPRESCRIPTIONPATIENTS MEDICATION FORPRESCRIPTIONPATIENTS VOLUNTEERENHANCEPROGRAM PROGRAMSOUTREACH SO1C3 TRUCKPURCHASE BOX IMPROVE BARNLABOR TOFACILITIES	COURT		501C3	1	4,000
CARE CLINIC 1443 EAST STREET MASON CITY, IA 50401 NIAD CENTER FOR HUMAN DEV P O BOX 656 MASON CITY, IA 50402 NORTH IOWA COMMUNITY ACTION P O BOX 1627 MASON CITY, IA 50401 HABITAT FOR HUMANITY 1411 SOUTH TAFT AVENUE MASON CITY, IA 50401 WINNEBAGO HISTORIAL SOCIETY P O BOX 27 FOREST CITY, IA 504360027	2923 CEDAR ST SUITE 3		501C3	INSCHOLARSHIPSMASON	2,000
POBOX 656 MASON CITY, IA 50402 NORTH IOWA COMMUNITY ACTION POBOX 1627 MASON CITY, IA 50401 HABITAT FOR HUMANITY 1411 SOUTH TAFT AVENUE MASON CITY, IA 50401 WINNEBAGO HISTORIAL SOCIETY POBOX 27 FOREST CITY, IA 504360027 PROGRAMSOUTREACH 501C3 TRUCKPURCHASE BOX TRUCKPURCHASE BOX TOFACILITIES	CARE CLINIC 1443 EAST STREET		501C3	1	5,000
ACTION POBOX 1627 MASON CITY, IA 50401 HABITAT FOR HUMANITY 1411 SOUTH TAFT AVENUE MASON CITY, IA 50401 WINNEBAGO HISTORIAL SOCIETY POBOX 27 FOREST CITY, IA 504360027 TRUCKPURCHASE BOX IMPROVE BARNLABOR TOFACILITIES	P O BOX 656		501C3	VOLUNTEERENHANCEPROGRAM	5,000
SOUTH TAFT AVENUE MASON CITY, IA 50401 WINNEBAGO HISTORIAL SOCIETY PO BOX 27 FOREST CITY, IA 504360027 SOCIETY PO BOX 27 TOFACILITIES	ACTION POBOX 1627		501C3	PROGRAMSOUTREACH	3,000
SOCIETY PO BOX 27 FOREST CITY, IA 504360027	SOUTH TAFT AVENUE		501C3	TRUCKPURCHASE BOX	3,000
CITY OF MASON CITY NORTH 501C3 TEAM ART	SOCIETY PO BOX 27		501C3		4,000
IOWA DIVERSITY TEAM MASON CITY, IA 50401 CONTESTDIVERSITY APP			501C3	TEAM ART CONTESTDIVERSITY APP	500
IOWA LEGAL AID 600 1ST STREET NW SUITE 103 MASON CITY, IA 50401 501C3 EQUIPMENTDICTATION	STREET NW SUITE 103		501C3	EQUIPMENTDICTATION	2,800
RIVER CITY SOCIETY FOR HISTORIC PRESERVATION 431 1ST STREET SE MASON CITY, IA 50401 SOLC3 REPLACEMENTLIGHTING	HISTORIC PRESERVATION 431 1ST STREET SE		501C3	REPLACEMENTLIGHTING	2,000
CITY OF MASON CITY 225 2ND STREET SE MASON CITY, IA 50401 501C3 MUSEUM WALLMACNIDER ARTREFINISHING	STREET SE		501C3		2,300

Recipient	If recipient is an individual,	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	recipient		
a Paid during the year				
CITY OF KLEMME 118 N 4TH ST KLEMME,IA 50449		501C3	CENTENNIAL125THCELEBRATION	1,000
UNITED WAY OF NORTH IOWA 600 FIRST STREET NW MASON CITY,IA 50401		501C3	TRANSPORTATIONSECOND SHIFTSERVICE	20,000
CONSUMER CREDIT COUNSELING 404 SOUTH MONROE AVE MASON CITY,IA 50401		501C3	CHAIRS ANDPURCHASE FOLDINGSHREDDER	800
LUTHERAN SERVICES IN IOWA INC 3116 UNIVERSITY AVE DES MOINES,IA 50311		501C3	PROGRAMVISITATION	3,500
MASON CITY PUBLIC LIBRARY FDN 225 2ND ST SE MASON CITY,IA 50401		501C3	SHELVINGPURCHASE	2,500
COMPREHENSIVE SYSTEMS INC 1453 4TH ST SW MASON CITY,IA 50401		501C3	EASY STANDPURCHASE OFGLIDER STANDER	4,000
NEWMAN CATHOLIC SCHOOLS 2445 19TH ST SW MASON CITY,IA 50401		501C3	SOFTWAREEDUCATION	6,500
CITY OF RUDD 402 CHICKASAW ST RUDD,IA 50471		501C3	MOUNT LAWNZERO TURNMOWER	3,000
NORTH IOWA FAIR ASSOCIATION 3700 4TH STREET SW MASON CITY,IA 50401		501C3	DOOR REPLACEMENTOLSON BUILDING	4,000
APPLE DAYCARE INC 119 NORTH 7TH STREET SHEFFIELD,IA 50475		501C3	WALKING PATHPROVIDE SAFE	1,000
CITY OF ROCKWELL 213 JEFFERSON STREET ROCKWELL,IA 50469		501C3	FIRE TRUCKEQUIPING PUMPER	2,500
MASON CITY COMMUNITY SD P O BOX 533 MASON CITY, IA 50401		501C3	KIOSK FORTOUCH SCREENHALL OF FAME	1,000
CITY OF MASON CITY 365 SUMAC ROAD MASON CITY,IA 50401		501C3	LANDSCAPING ANDFRIENDS OF THE 457TERRACING	2,500
CITY OF NORA SPRINGS 45 NORTH HAWKEYE AVENUE NORA SPRINGS,IA 50458		501C3	CENTERAQUATIC	10,000
FLOYD COUNTY FAIR SOCIETY P O BOX 301 CHARLES CITY,IA 506160301		501C3	CHAIRS ANDREPLACEMENT OFTABLES	3,000
Total				271,800

Recipient	If recipient is an individual,	Foundation	Purpose of grant or	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
GARNER COMMUNITY CENTER INC 485 STATE STREET GARNER,IA 50438		501C3	STAGEPORTABLEPROJECT	2,500
NORTH CENTRAL IOWA AREA AGENCY ON AGING 808 3RD AVENUE SOUTH APT 4 CLEAR LAKE,IA 50428		501C3	REFRIGERATORPURCHASE 2- DOOR	2,000
MASON CITY CHAMBER OF COMMERCE FDN 9 NORTH FEDERAL AVENUE MASON CITY,IA 50401		501C3	EGLOFFFURNISHINGHOUSE	5,000
CITY OF MASON CITY 833 1ST STREET N W MASON CITY,IA 50401		501C3	PLAYROUNDPARKERS WOODSPROJECT	5,000
MASON CITY FOUNDATION 308 SOUTH PENNSYLVANIA MASON CITY,IA 50401		501C3	PROGRAM ANDCOMMUNITYOPERATIONS	2,000
CITY OF FERTILE (PUBLIC LIBRARY) P O BOX 198 FERTILE,IA 504340198		501C3	FURNITURESHELVING AND	2,500
HAWKEYE HARVEST FOOD BANK CORPORATION 22 N GEORGIA AVE SUITE 14 MASON CITY,IA 50401		501C3	FOR FACILITY CAPITAL CAMPAIGNACQUISITION	5,000
UNA VOCIS 115 10TH STREET N W MASON CITY,IA 50401		501C3	FOOT CARGOPURCHASE 10TRAILER	2,000
CITY OF MESERVEY (PUBLIC LIBRARY) 719 1ST STREET MESERVEY,IA 50457		501C3	FLOOR COVERINGREPLACEMENT OF	3,000
MASON CITY FAMILY YMCA 1840 SOUTH MONROE AVENUE MASON CITY,IA 50401		501C3	LIGHTINGENERGY EFFICIENTTRANSITION	2,000
LINN GROVE RECREATION CENTER INC 632 SOUTHVIEW DRIVE ROCKWELL,IA 50469		501C3	AQUATICUPGRADECENTER	2,000
NORTH IOWA TRANSITION CENTER INC POBOX 1503 MASON CITY, IA 504021503		501C3	IT UPGRADE	4,400
CAMP TANGLEFOOT INC 301 WILLOWBROOK DRIVE MASON CITY,IA 50401		501C3	OF CRAFT HOUSERENOVATION	6,000
STEBENS CHILDREN'S THEATRE 616 NORTH DELAWARE AVENUE MASON CITY,IA 50401		501C3	PROJECTRENOVATION	2,000
CITY OF STACYVILLE (FIRE DEPARTMENT) 405 SOUTH WATR STREET STACYVILLE,IA 50476		501C3	RENOVATIONPARK	3,000
Total			▶ 3a	271,800

efile GRAPHIC print - DO NOT PROCESS As Filed Data -	DLN: 93491104003015
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TY 2014 Investments Corporate Bonds Schedule

Name: FARRER ENDOWMENT FOUNDATION

LIV. 42 1214099		
Name of Bond	End of Year Book Value	End of Year Fair Market Value
VAN KAMPEN INCOME TRUSTS 43,47,49,67,73,74,75	359,971	375,810
270 UTS NUVEEN INSURED CORP TR #5	21,075	25,275
75 CLAYMORE SER GUG CORP SER 1	35,884	27,298
50 CLAYMORE SER GUG CORP SER 15	46,530	45,948
50 CLAYMORE SER GUG CORP SER 17	47,727	46,895
45 CLAYNORE SER GUG CORP SER 21	43,032	41,180
62 CLAYMORE SER GUG CORP SER 24	62,352	59,186
12500 FIRST TRUST EQUITY INC 27	132,774	202,875
4400 FIRST TRUST EQUITY INC 28	44,013	65,340
10028 FIRST TRUST EQUITY INC 30	88,751	113,818
5014 FIRST TRUST EQUITY INC 31	44,328	61,121
4400 FIRST TRUST EQUITY INC 34	41,721	50,952
70 GUGG SHRT DUR HI YLD 8	6,692	3,881
50 ADVISORS ASSET MGMT 42	39,706	38,949
201 ADVISORS ASSET MGMT 46	177,593	170,806
60 ADVISORS ASSET MGMT 59	54,619	52,549
40 ADVISORS ASSET MGMT 62	38,514	36,066
200 1ST TR PORT SER 3	194,247	190,610
100 FIRST TRUST HI YIELD SHT #2	48,706	44,839
100 INVESCO INV GRD TR SER 16	99,750	95,522

Name of Bond	End of Year Book Value	End of Year Fair Market Value
56 1ST TR PORT SER 7	53,464	48,047
2500 1ST TR STRENGTH SER 19	25,353	29,150
20 GUGG SHRT DUR HI YLD SER 29	18,736	16,553
50 ADVISORS ASSET MGMT 73	49,401	45,841
25 ADVISORS ASSET MGMT 77	25,019	23,053
25 ADVISORS ASSET MGMT 88	28,170	25,115
15 ADVISORS ASSET MGMT 89	16,984	15,665
50 ADVISORS ASSET MGMT 91	53,978	52,565
25 INVESCO INV GRADE SER 38	27,249	26,743
25 ADVISORS ASSET MGMT 82	27,807	24,871

TY 2014 Investments Corporate Stock Schedule

Name: FARRER ENDOWMENT FOUNDATION

Name of Stock	End of Year Book Value	End of Year Fair Market Value
1435 SH CHEVRON TEXACO CORPORATION	79,648	160,978
600 SH ING GRP NV PFD 7.375%	15,000	15,444
1000 SH GOLDMAN SACHS PFD 6.5%	25,000	26,730
400 SH ING GRP NV PFD 7.2%	10,472	10,300
1000 SH PUBLIC STORAGE PFD 6.35%	25,842	26,000
865 SH EXXON MOBIL CORPORATION	53,896	79,969
DAVIS NY VENTURE FUND	289,038	301,278
DEUTSCHE INCOME TR	155,347	122,465
EURO PACIFIC GROWTH FD	27,708	25,279
FRANKLIN UTILITY FUND	239,062	395,010
GROWTH FUND OF AMERICA	248,043	296,973
INCOME FUND OF AMERICA	322,228	403,531
INVESTMENT CO OF AMERICA	434,191	527,748
TEMPLETON GLOBAL GOVT FD	285,744	295,573
TEMPLETON GLOB TOTAL FD A	175,000	174,444
WASHINGTON MUTUAL FD	158,011	213,008
FRANKLIN GROWTH FUND	112,047	187,012
FRANKLIN INCOME FUND	55,856	61,464
FRANKLIN MUTUAL FUND	78,207	110,554
FRANKLIN SMALL CAP FUND	40,606	48,816
1000 HOSPITALITY 7.125% PFD	26,460	26,130
1000 PS BUS PARKS 5.75% PFD	21,219	23,778

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TY 2014 Investments Government Obligations Schedule

Name: FARRER ENDOWMENT FOUNDATION

EIN: 42-1214699

US Government Securities - End of

Year Book Value: 130,525

US Government Securities - End of

Year Fair Market Value: 111,987

State & Local Government Securities - End of Year Book

Value:

State & Local Government Securities - End of Year Fair Market Value:

TY 2014 Legal Fees Schedule

Name: FARRER ENDOWMENT FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
HEINY LAW FIRM PLC TAX PREPARATION & ACCOUNTING	16,129			16,129

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TY 2014 Other Expenses Schedule

Name: FARRER ENDOWMENT FOUNDATION

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX	5,456			



TY 2014 Other Increases Schedule

Name: FARRER ENDOWMENT FOUNDATION

Description	Amount
CAPITAL GAINS	162,181



TY 2014 Other Liabilities Schedule

Name: FARRER ENDOWMENT FOUNDATION

Description	Beginning of Year - Book Value	End of Year - Book Value
FEDERAL TAX ESTIMATE	-4,400	-5,600



TY 2014 Other Liabilities Schedule

Name: FARRER ENDOWMENT FOUNDATION

Description	Beginning of Year - Book Value	End of Year - Book Value
FEDERAL TAX ESTIMATE	-4,400	-5,600