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

2014

Department of the Treasury
Internal Revenue Service

▶ **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.**

Open to Public Inspection

For calendar year 2014, or tax year beginning _____, **2014, and ending** _____

Name of foundation The Van Buren Foundation, Inc.		A Employer identification number 42-6062589
Number and street (or P O box number if mail is not delivered to street address) C/O Community First Bank		B Telephone number (see instructions) (319) 293-3794
City or town, state or province, country, and ZIP or foreign postal code Keosauqua IA 52565		C If exemption application is pending, check here. ▶ <input type="checkbox"/>
G Check all that apply:	<input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change	<input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change
H Check type of organization:		D 1 Foreign organizations, check here ▶ <input type="checkbox"/>
<input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust		<input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Other taxable private foundation
I Fair market value of all assets at end of year (from Part II, column (c), line 16) \$ 7,395,868.		E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ <input type="checkbox"/>
J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ <input type="checkbox"/>
(Part I, column (d) must be on cash basis)		

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))				
1 Contributions, gifts, grants, etc., received (attach schedule)	274,546.			
2 Ck ▶ <input type="checkbox"/> If the foundn is not required to attach Sch B				
3 Interest on savings and temporary cash investments	2,225.	2,225.	2,225.	
4 Dividends and interest from securities	129,901.	129,901.	129,901.	
5a Gross rents	5,916.	5,916.	5,916.	
b Net rental income or (loss)	-90,139.			
6a Net gain or (loss) from sale of assets not on line 10	288,017.			
b Gross sales price for all assets on line 6a	310,498.			
7 Capital gain net income (from Part IV, line 2)		288,017.		
8 Net short-term capital gain				
9 Income modifications				
10a Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)				
See Line 11 Stmt	965.		965.	
12 Total Add lines 1 through 11.	701,570.	426,059.	139,007.	
13 Compensation of officers, directors, trustees, etc				
14 Other employee salaries and wages				
15 Pension plans, employee benefits.				
16a Legal fees (attach schedule).				
b Accounting fees (attach sch). L-16b Stmt.	7,970.	3,985.	3,985.	3,985.
c Other prof fees (attach sch)				
17 Interest				
18 Taxes (attach schedule)(see Instrs) See Line 18 Stmt	4,262.			
19 Depreciation (attach sch) and depletion	44,273.			
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses (attach schedule)				
See Line 23 Stmt	52,286.	5,916.	5,916.	46,370.
24 Total operating and administrative expenses Add lines 13 through 23	108,791.	9,901.	9,901.	50,355.
25 Contributions, gifts, grants paid	243,536.			243,536.
26 Total expenses and disbursements. Add lines 24 and 25	352,327.	9,901.	9,901.	293,891.
27 Subtract line 26 from line 12:				
a Excess of revenue over expenses and disbursements	349,243.			
b Net investment income (if negative, enter -0-).		416,158.		
c Adjusted net income (if negative, enter -0-).			129,106.	

REVENUE
MAY 20 2015

ADMINISTRATIVE AND OPERATING EXPENSES

RECEIVED
MAY 20 2015
COMMUNITY FIRST BANK

916

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
ASSETS	1 Cash — non-interest-bearing	7,071.	43,500.	43,500.
	2 Savings and temporary cash investments	702,212.	955,183.	955,096.
	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 sch)			
	Less: allowance for doubtful accounts	147,613.	205,208.	205,208.
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	2,900.	4,783.	4,783.
	10a Investments — U.S. and state government obligations (attach schedule)			
	b Investments — corporate stock (attach schedule) L-10b Stmt	4,233,306.	4,272,697.	5,643,576.
	c Investments — corporate bonds (attach schedule)	0.		
	11 Investments — land, buildings, and equipment, basis			
Less accumulated depreciation (attach schedule)				
12 Investments — mortgage loans				
13 Investments — other (attach schedule)				
14 Land, buildings, and equipment: basis	1,297,284.			
Less accumulated depreciation (attach schedule) L-14 Stmt	760,793.	578,670.	536,491.	
15 Other assets (describe L-15 Stmt)	4,061.	7,214.	7,214.	
16 Total assets (to be completed by all filers — see the instructions. Also, see page 1, item I).	5,675,833.	6,025,076.	7,395,868.	
LIABILITIES	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, & other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe)			
	23 Total liabilities (add lines 17 through 22)			
NET ASSETS OR FUND BALANCES	Foundations that follow SFAS 117, check here X			
	24 Unrestricted	4,168,260.	4,093,409.	
	25 Temporarily restricted	738,079.	1,004,407.	
	26 Permanently restricted	769,494.	927,260.	
	Foundations that do not follow SFAS 117, check here			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg, and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
30 Total net assets or fund balances (see instructions)	5,675,833.	6,025,076.		
31 Total liabilities and net assets/fund balances (see instructions)	5,675,833.	6,025,076.		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	5,675,833.
2 Enter amount from Part I, line 27a	2	349,243.
3 Other increases not included in line 2 (itemize)	3	
4 Add lines 1, 2, and 3	4	6,025,076.
5 Decreases not included in line 2 (itemize)	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 30	6	6,025,076.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shares MLC Company)	(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a 1236.749 SHS AMCAP FUND CL A	P	Various	03/03/14
b 1732.502 SHS AMCAP FUND CL A	P	Various	05/27/14
c 871.08 SHS AMCAP FUND CL A	P	Various	06/18/14
d 1721.17 SHS AMCAP FUND CL A	P	Various	08/19/14
e See Columns (a) thru (d)			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 35,000.		22,548.	12,452.
b 50,000.		31,586.	18,414.
c 25,000.		15,881.	9,119.
d 50,000.		31,379.	18,621.
e See Columns (e) thru (h)		55,040.	229,411.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	
a			12,452.
b			18,414.
c			9,119.
d			18,621.
e See Columns (i) thru (l)			229,411.

2 Capital gain net income or (net capital loss).	<input type="checkbox"/> If gain, also enter in Part I, line 7 <input type="checkbox"/> If (loss), enter -0- in Part I, line 7	2	288,017.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):	<input type="checkbox"/> If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8	3	0.

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
If 'Yes,' the foundation does not qualify under section 4940(e). Do not complete this part

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (column (b) divided by column (c))
2013	324,341.	5,787,611.	0.056041
2012	300,543.	5,643,672.	0.053253
2011	397,198.	5,676,590.	0.069971
2010	240,438.	5,423,449.	0.044333
2009	272,953.	4,875,840.	0.055981

2 Total of line 1, column (d)	2	0.279579
3 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0.055916
4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5.	4	6,357,662.
5 Multiply line 4 by line 3	5	355,495.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	4,162.
7 Add lines 5 and 6	7	359,657.
8 Enter qualifying distributions from Part XII, line 4	8	295,985.

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

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1 a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter 'N/A' on line 1 Date of ruling or determination letter: _____ (attach copy of letter if necessary - see Instrs)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b		1	8,323.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	0.
3 Add lines 1 and 2.		3	8,323.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	8,323.
6 Credits/Payments:			
a 2014 estimated tax pmts and 2013 overpayment credited to 2014	6 a	4,000.	
b Exempt foreign organizations - tax withheld at source	6 b		
c Tax paid with application for extension of time to file (Form 8868)	6 c		
d Backup withholding erroneously withheld	6 d		
7 Total credits and payments. Add lines 6a through 6d	7	4,000.	
8 Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	0.	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	4,323.	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	0.	
11 Enter the amount of line 10 to be: Credited to 2015 estimated tax 0. Refunded	11		

Part VII-A Statements Regarding Activities

	Yes	No
1 a 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?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? <i>If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>		X
c Did the foundation file Form 1120-POL for this year?		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 \$ _____		
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? <i>If 'Yes,' attach a detailed description of the activities</i>		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If 'Yes,' attach a conformed copy of the changes</i>		X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
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? <i>If 'Yes,' attach the statement required by General Instruction T</i>		X
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?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If 'Yes,' complete Part II, column (c), and Part XV.</i>	X	
8 a Enter the states to which the foundation reports or with which it is registered (see instructions) IA - Iowa		
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If 'No,' attach explanation</i>	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? <i>If 'Yes,' complete Part XIV</i>		X
10 Did any persons become substantial contributors during the tax year? <i>If 'Yes,' attach a schedule listing their names and addresses</i>		X

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Form 990-PF (2014)

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
Website address ▶ N/A				
14	The books are in care of ▶ <u>GEORGE MANNING</u> Telephone no. ▶ <u>(319) 293-3794</u>			
Located at ▶ <u>COMMUNITY FIRST BANK</u> <u>KEOSAUQUA</u> <u>IA</u> ZIP + 4 ▶ <u>52565</u>				
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here ▶ <input type="checkbox"/>			
and enter the amount of tax-exempt interest received or accrued during the year ▶ 15				
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16		X
See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If 'Yes,' enter the name of the foreign country ▶				

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

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

		Yes	No
1 a During the year did the foundation (either directly or indirectly):			
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6)	Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/>	1 b	
Organizations relying on a current notice regarding disaster assistance check here ▶ <input type="checkbox"/>			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2014?	1 c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
If 'Yes,' list the years ▶ 20 __ , 20 __ , 20 __ , 20 __ .			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement - see instructions.)	2 b	
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 __ .		
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If 'Yes,' did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014.</i>)	3 b	
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4 b	X

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

5 a During the year did the foundation pay or incur any amount to:

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes No
- (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? Yes No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? Yes No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions) Yes No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes No

b If any answer is 'Yes' to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

Organizations relying on a current notice regarding disaster assistance check here

c If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

If 'Yes,' attach the statement required by Regulations section 53.4945-5(d).

6 a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

Yes No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If 'Yes' to 6b, file Form 8870.

7 a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

Yes No

b If 'Yes,' did the foundation receive any proceeds or have any net income attributable to the transaction?

5 b	X
6 b	X
7 b	

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(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 plans and deferred compensation	(e) Expense account, other allowances
JON FINNEY 17248 HIGHWAY 1 KEOSAUQUA IA 52565	CHAIRMAN 0.25	0.	0.	0.
MATTHEW MANNING 502 FRANKLIN ST KEOSAUQUA IA 52565	PRESIDENT 0.25	0.	0.	0.
SANDY MCLAIN 27390 V56 MILTON IA 52570	V PRESIDENT 0.25	0.	0.	0.
See Information about Officers, Directors, Trustees, Etc.		0.	0.	0.

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

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

Total number of other employees paid over \$50,000 None

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

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

(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 ▶		None

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc

	Expenses
1 EXPENSES ATTRIBUTABLE TO MAINTAINING THE ROBERTS MEMORIAL BUILDING - SEE SCHEDULE -----	96,055.
2 OTHER QUALIFYING GRANTS AND SCHOLARSHIPS - SEE SCHEDULE -----	243,536.
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 and 2.	Amount
1 ----- -----	
2 ----- -----	
All other program-related investments See instructions. 3 ----- -----	
Total. Add lines 1 through 3 ▶	

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes.		
a	Average monthly fair market value of securities	1 a	5,696,117.
b	Average of monthly cash balances	1 b	757,422.
c	Fair market value of all other assets (see instructions)	1 c	940.
d	Total (add lines 1a, b, and c)	1 d	6,454,479.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1 e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	6,454,479.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	96,817.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	6,357,662.
6	Minimum investment return. Enter 5% of line 5	6	317,883.

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

1	Minimum investment return from Part X, line 6	1	317,883.
2 a	Tax on investment income for 2014 from Part VI, line 5	2 a	8,323.
b	Income tax for 2014. (This does not include the tax from Part VI.)	2 b	
c	Add lines 2a and 2b	2 c	8,323.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	309,560.
4	Recoveries of amounts treated as qualifying distributions	4	500.
5	Add lines 3 and 4	5	310,060.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	310,060.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc – total from Part I, column (d), line 26	1 a	293,891.
b	Program-related investments – total from Part IX-B	1 b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	2,094.
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3 a	
b	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	295,985.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	295,985.

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				310,060.
2 Undistributed income, if any, as of the end of 2014:				
a Enter amount for 2013 only			0.	
b Total for prior years 20 __, 20 __, 20 __				
3 Excess distributions carryover, if any, to 2014				
a From 2009	34,173.			
b From 2010	0.			
c From 2011	115,625.			
d From 2012	21,075.			
e From 2013	41,342.			
f Total of lines 3a through e	212,215.			
4 Qualifying distributions for 2014 from Part XII, line 4: ▶ \$ 295,985.				
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				295,985.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2014 <i>(If an amount appears in column (d), the same amount must be shown in column (a).)</i>	14,075.			14,075.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	198,140.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable amount – see instructions		0.		
e Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount – see instructions			0.	
f Undistributed income for 2014. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required – see instructions)				
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)	20,098.			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	178,042.			
10 Analysis of line 9:				
a Excess from 2010	0.			
b Excess from 2011	115,625.			
c Excess from 2012	21,075.			
d Excess from 2013	41,342.			
e Excess from 2014	0.			

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

N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling.

b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

	Tax year	Prior 3 years			(e) Total
	(a) 2014	(b) 2013	(c) 2012	(d) 2011	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test -- enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test -- enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test -- enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year -- see instructions.)

1 Information Regarding Foundation Managers:

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

NONE

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

NONE

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

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

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

PER ATTACHED SCHEDULE

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

PER ATTACHED SCHEDULE

c Any submission deadlines:

PER ATTACHED SCHEDULE

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

PER ATTACHED SCHEDULE

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	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
a Paid during the year				
VILLAGES FOLK SCHOOL 809 1ST ST KEOSAUQUA IA 52565	NONE	PUBLIC	YOUTH ART PROGRAM AND BROCHURES	2,000.
STOCKPORT PUBLIC LIBRARY 113 BESWICK ST STOCKPORT IA 52651	NONE	PUBLIC	LIBRARY REMODELING	2,500.
AMERICAN LEGION POST #231 103 N. FRONT ST FARMINGTON IA 52626	NONE	PUBLIC	REPLACEMENT OF FLAGS AND POLES	2,500.
VAN BUREN COUNTY HOSPITAL 304 FRANKLIN ST KEOSAUQUA IA 52565	NONE	PUBLIC	DIGITAL MAMMOGRAPHY UNIT	70,000.
CITY OF KEOSAUQUA CITY HALL 804 1ST ST KEOSAUQUA, IA 52565	NONE	PUBLIC	VILLAGES OF VAN BUREN 2015 BUDGET	33,000.
VAN BUREN COUNTY HISTORICAL PRESERVATION SOCIETY 27174 RTE W-20 MT STERLING IA 52573	NONE	PUBLIC	FORGOTTEN TOWNS BROCHURES	2,000.
VAN BUREN COUNTY EXTENSION SERVICE 200 DODGE ST KEOSAUQUA, IA 52565	NONE	PUBLIC	4-H MILLER MEMORIAL FUNDS	982.
CITY OF KEOSAUQUA CITY HALL 804 1ST STREET KEOSAUQUA IA 52565	NONE	PUBLIC	DOWNTOWN SPEAKERS SOUND SYSTEM	6,170.
KEOSAUQUA PUBLIC LIBRARY 608 1ST ST KEOSAUQUA, IA 52565	NONE	PUBLIC	LAURA DAUGHRITY MEMORIAL-ANNUAL	189.
See Line 3a statement				124,195.
Total				243,536.
b Approved for future payment				
VILLAGES FOLK SCHOOL 809 1ST ST KEOSAUQUA IA 52565	NONE	PUBLIC	MARKETING	1,800.
CITY OF KEOSAUQUA CITY HALL 804 1ST ST KEOSAUQUA IA 52565	NONE	PUBLIC	WARNING SIREN	5,000.
See Line 3b statement				369,251.
Total				376,051.

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF
▶ Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

Name of the organization

The Van Buren Foundation, Inc.

Employer identification number

42-6062589

Organization type (check one):

Filers of:

Form 990 or 990-EZ

Section:

- 501(c)() (enter number) organization
 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
 527 political organization

Form 990-PF

- 501(c)(3) exempt private foundation
 4947(a)(1) nonexempt charitable trust treated as a private foundation
 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that is not covered by the General Rule and/or the Special Rules does 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).

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990EZ,

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

Name of organization

Employer identification number

The Van Buren Foundation, Inc.

42-6062589

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ROBERT VICKERMAN ----- 2106 19TH AVE ----- MONROE WI 53566 -----	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	STEVEN MORRISON ----- 106 OAKWOOD PL. ----- EMMETSBURG IA 50536 -----	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	ESTATE OF ALDEN LOWELL DOUD ----- 590 WEST FOREVERGREEN DOAD ----- NORTH LIBERTY IA 52317 -----	\$ 255,430.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
---	----- ----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
---	----- ----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
---	----- ----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Depreciation and Amortization (Including Information on Listed Property)

2014

Department of the Treasury Internal Revenue Service

Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

Attachment Sequence No. 179

Name(s) shown on return

The Van Buren Foundation, Inc.

Identifying number

42-6062589

Business or activity to which this form relates

Form 990-PF page 1

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I

Table with 13 rows for Section 179 election. Columns include description, cost, and elected cost. Row 13 shows a carryover of disallowed deduction to 2015.

Note: Do not use Part II or Part III below for listed property. Instead, use Part V

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)

Table with 3 rows for Special Depreciation Allowance and Other Depreciation. Rows 14, 15, and 16.

Part III MACRS Depreciation (Do not include listed property.)

Section A

Table with 2 rows for Section A. Row 17 shows MACRS deductions for assets placed in service before 2014. Row 18 is a checkbox for general asset accounts.

Section B - Assets Placed in Service During 2014 Tax Year Using the General Depreciation System

Table with 7 columns: Classification of property, Month and year placed in service, Basis for depreciation, Recovery period, Convention, Method, and Depreciation deduction. Rows 19a through 19g and 19h through 19i.

Section C - Assets Placed in Service During 2014 Tax Year Using the Alternative Depreciation System

Table with 6 columns: Class life, Month and year placed in service, Recovery period, Convention, Method, and Depreciation deduction. Rows 20a, 20b, and 20c.

Part IV Summary (See instructions.)

Table with 3 rows for Summary. Row 21: Listed property amount. Row 22: Total amount. Row 23: Portion of basis attributable to section 263A costs.

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A – Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24 a Do you have evidence to support the business/investment use claimed? <input type="checkbox"/> Yes <input type="checkbox"/> No					24b If 'Yes,' is the evidence written? <input type="checkbox"/> Yes <input type="checkbox"/> No				
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost	
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)								25	
26 Property used more than 50% in a qualified business use:									
27 Property used 50% or less in a qualified business use:									
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1								28	
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1								29	

Section B – Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other 'more than 5% owner,' or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

30 Total business/investment miles driven during the year (do not include commuting miles)	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C – Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.)		

Note: If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2014 tax year (see instructions):					
43 Amortization of costs that began before your 2014 tax year					43
44 Total. Add amounts in column (f). See the instructions for where to report					44

Name(s) Shown on Return

Employer ID Number

The Van Buren Foundation, Inc.

42-6062589

Grantee Information:

Grantee Name AMERICAN LEGION POST #231
Check Box, if Grantee is a Business
Grantee Address 103 N. FRONT ST
Grantee City FARMINGTON Grantee State IA Grantee Zip 52626
Foreign City Foreign Country

Grant Amount 2,500. Amount Expended 2,500.
Date of Grant NOVEMBER 11, 2014

Purpose of Grant:

TO REPLACE FLAGS AND POLES.

Any Diversion By Grantee?

NO

Dates of Reports by Grantee?

DECEMBER 2, 2014

Verification Date DECEMBER 2, 2014

Results of Verification:

FUNDS WERE PROPERLY EXPENDED FOR NEW FLAGS AND POLES

THE VAN BUREN FOUNDATION, INC

42-6062589

2014

FORM 990-PF

Part I, Line 19, and Part II, Line 14, Depreciation and Accumulated Depreciation

<u>Description</u>	<u>Cost</u>	<u>Life or Rate</u>	<u>Current Depreciation</u>	<u>Accumulated Depreciation 12/31/2014</u>
Land	\$ 1,000	N/A	\$ -	\$ -
Building and Improvements	1,217,951	3-39 yr SL	41,485	689,285
Furniture, Fixtures and Equip.	<u>78,333</u>	5-15 yr SL	<u>2,788</u>	<u>71,508</u>
	<u>\$ 1,297,284</u>		<u>\$ 44,273</u>	<u>\$ 760,793</u>

THE VAN BUREN FOUNDATION, INC.
42-6062589
2014

FORM 990-PF

	Beginning of year Book Value	End of year Book Value	End of year Fair Market Value
<u>Part II, Line 7</u>			
Medical and Nursing loans	\$ 147,613	\$ 205,208	\$ 205,208
Totals	<u>\$ 147,613</u>	<u>\$ 205,208</u>	<u>\$ 205,208</u>

Form 990-PF, Page 1, Part I, Line 11

Line 11 Stmt

Other income:	Rev/Exp Book	Net Inv Inc	Adj Net Inc
Membership Dues	465.		465.
SCHOLARSHIP REFUNDED	500.		500.
Total	965.		965.

Form 990-PF, Page 1, Part I, Line 18

Line 18 Stmt

Taxes	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
PRIOR YEARS INVESTMENT TAX	3,161.			
Foreign Tax Paid	1,101.			
Total	4,262.			

Form 990-PF, Page 1, Part I, Line 23

Line 23 Stmt

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
Insurance	4,055.			4,055.
Janitor	8,763.			8,763.
Repairs & Maintenance	20,126.			20,126.
Supplies	2,039.			2,039.
Utilities & Telephone	16,770.	5,916.	5,916.	10,854.
Advertising	504.			504.
Miscellaneous	29.			29.
Total	52,286.	5,916.	5,916.	46,370.

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income

Columns (a) thru (d)

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shares MLC Company)	(b) How acquired P – Purchase D – Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
11.297 SHS AMERICAN BALANCED FUND	P	Various	01/08/14
1387.347 SHS AMERICAN MUTUAL FUND CL A	P	Various	05/27/14
681.57 SHS AMERICAN MUTUAL FUND CL A	P	Various	06/18/14
3000 SHS GENERAL ELECTRIC CO	P	Various	10/02/14
LONG-TERM CAPITAL GAINS DISTRIBUTIONS	P	Various	12/31/14

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income

Columns (e) thru (h)

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
274.		220.	54.

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income
Columns (e) thru (h)

Continued

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
50,000.		34,698.	15,302.
25,000.		17,046.	7,954.
75,224.		3,076.	72,148.
133,953.		0.	133,953.
Total		<u>55,040.</u>	<u>229,411.</u>

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income
Columns (i) thru (l)

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	(l) Gains (column (h) gain minus column (k), but not less than -0-) or losses (from column (h))
			54.
			15,302.
			7,954.
			72,148.
			133,953.
Total			<u>229,411.</u>

Form 990-PF, Page 6, Part VIII, Line 1

Information about Officers, Directors, Trustees, Etc.

(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 plans and deferred compensation	(e) Expense account, other allowances
Person . . <input checked="" type="checkbox"/> Business . <input type="checkbox"/> GEORGE MANNING 21723 HWY 2 KEOSAUQUA IA 52565	TREASURER 0.50	0.	0.	0.
Person . . <input checked="" type="checkbox"/> Business . <input type="checkbox"/> JEANNE ERICKSON 23662 HWY 1 KEOSAUQUA IA 52565	DIRECTOR 0.25	0.	0.	0.
Person . . <input type="checkbox"/> Business . <input type="checkbox"/> CRYSTAL CRONK 19666 270TH ST SIGOURNEY IA 52591	SECRETARY 0.25	0.	0.	0.

Form 990-PF, Page 6, Part VIII, Line 1

Continued

Information about Officers, Directors, Trustees, Etc.

(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 plans and deferred compensation	(e) Expense account, other allowances
Person . . <input checked="" type="checkbox"/> Business . <input type="checkbox"/> ALLEN GUNN 31672 245TH BONAPARTE IA 52620	DIRECTOR 0.25	0.	0.	0.
Person . . <input checked="" type="checkbox"/> Business . <input type="checkbox"/> STEVE KISLING 811 LOUIS ST KEOSAUQUA IA 52565	DIRECTOR 0.25	0.	0.	0.
Person . . <input checked="" type="checkbox"/> Business . <input type="checkbox"/> MARY JO SMITH 801 ROAD ST FARMINGTON IA 52626	ASSISTANT SECRETARY 0.25	0.	0.	0.
Person . . <input checked="" type="checkbox"/> Business . <input type="checkbox"/> KEVIN HRANICKA 853 COUNTRY LANE RD KEOSAUQUA IA 52565	ASSISTANT TREASURER 0.25	0.	0.	0.
Person . . <input checked="" type="checkbox"/> Business . <input type="checkbox"/> PAT MILLER 18549 HWY 1 KEOSAUQUA IA 52565	DIRECTOR 0.25	0.	0.	0.
Person . . <input checked="" type="checkbox"/> Business . <input type="checkbox"/> FRED CHAPUIS 11787 RT W30 STOCKPORT IA 52651	VICE CHAIRMAN 0.25	0.	0.	0.
Person . . <input type="checkbox"/> Business . <input type="checkbox"/> BEN KOELLNER 12301 300TH ST MILTON IA 52570	DIRECTOR 0.25	0.	0.	0.
Person . . <input type="checkbox"/> Business . <input type="checkbox"/> LISA PLOWMAN 16063 GOLD AVE DOUDS IA 52551	DIRECTOR 0.25	0.	0.	0.
Person . . <input type="checkbox"/> Business . <input type="checkbox"/> RICHARD WORKMAN 18289 HWY 1 KEOSAUQUA IA 52565	DIRECTOR 0.25	0.	0.	0.

Total

0. 0. 0.

THE VAN BUREN FOUNDATION, INC.
42-6062589
2014

FORM 990-PF

Part IX-A, Supporting Data

1. Information Concerning the Foundation's Direct Charitable Activities:

The Roberts Memorial Building is maintained by the Van Buren Foundation for the use during the county fair and as a community building for use by area organizations for meetings, seminars, local theatre productions, etc. It is estimated that over 40 area organizations benefited from the operation of the building in 2014.

Summary of Expenses

Depreciation	\$ 44,273
Repairs and maintenance	20,126
Insurance	4,055
Utilities and telephone	16,770
Janitorial	8,763
Supplies	2,039
Miscellaneous	29
	<u>\$ 96,055</u>

THE VAN BUREN FOUNDATION, INC.
42-6062589
2014

FORM 990-PF

Part XV, Line 2, Information Regarding Grant and Loan Program

Educational Grants:

The scholarship committee mails applications for scholarships to all graduating seniors attending Van Buren Community High School and Harmony High School.

Any other requests for applications for educational grants or loans can be sent to George Manning, The Van Buren Foundation, Inc., Community First Bank, Keosauqua, Iowa 52565. Telephone (319) 293-3794 during regular business hours.

Educational loans are made by a grant committee to medical and healthcare students from Van Buren County.

The educational grants are memorials or awards given to students meeting certain requirements and are chosen by a scholarship committee made up of members of the Foundation and staff members of the Van Buren Community School and Harmony School.

**THE VAN BUREN FOUNDATION, INC.
42-6062589
2014**

FORM 990-PF

Part XV, Line 2, Information Regarding Grant and Loan Program

General Grants:

Requests for grants are to be sent to Jon Finney, The Van Buren Foundation, Inc., P.O. Box 475 , Keosauqua, Iowa 52565. Telephone (319) 293-3129 during regular business hours. Applicants should submit requests in written form detailing the purpose of the grant, cost of improvements to be made, and the time frame in which the funds will be used. The applicant must be eligible to receive tax exempt funds. No funds shall be awarded to any individual or organization wherein pecuniary profits may be obtained. The foundation grant must not be the sole or complete funds vested in any project. It is necessary that matching funds or some other resource such as material or labor be acquired by the person, persons, or organization requesting the grant.

The Board of Directors of The Van Buren Foundation meets at least twice each year to review grant applications. These written requests are then acted upon at a scheduled meeting pursuant to notice.

In awarding these grants, the Foundation gives preference to requests from organizations, which benefit Van Buren County, Iowa.

Form 990-PF, Page 11, Part XV, line 3a
Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foun- dation status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox
				Amount
a Paid during the year				
KEOSAUQUA FIRE DEPARTMENT 104 CASS ST KEOSAUQUA, IA 52565	NONE	PUBLIC	LAURA DAUGHRITY MEMORIAL -ANNUAL	Person or <input type="checkbox"/> Business <input type="checkbox"/> 189.
KEOSAUQUA HISTORICAL SOCIETY LOCAL KEOSAUQUA, IA 52565	NONE	PUBLIC	LAURA DAUGHRITY MEMORIAL -ANNUAL	Person or <input type="checkbox"/> Business <input type="checkbox"/> 189.
PURDOM CEMETARY LOCAL KEOSAUQUA IA 52565	NONE	PUBLIC	LAURA DAUGHRITY MEMORIAL-ANNUAL	Person or <input type="checkbox"/> Business <input type="checkbox"/> 1,516.
FELLOWS CEMETARY LOCAL KEOSAUQUA IA 52565	NONE	PUBLIC	LAURA DAUGHRITY MEMORIAL-ANNUAL	Person or <input type="checkbox"/> Business <input type="checkbox"/> 1,516.
CONGREGATIONAL UNITED CHURCH OF CHRIST 401 VAN BUREN ST KEOSAUQUA, IA 52565	NONE	PUBLIC	LAURA DAUGHRITY MEMORIAL-ANNUAL	Person or <input type="checkbox"/> Business <input type="checkbox"/> 3,031.
VAN BUREN COUNTY HOSPITAL 304 FRANKLIN ST KEOSAUQUA, IA 52565	NONE	PUBLIC	LAURA DAUGHRITY MEMORIAL-ANNUAL	Person or <input type="checkbox"/> Business <input type="checkbox"/> 1,768.
VAN BUREN GOOD SAMARITAN HOME 819 COUNTRY LANE RD KEOSAUQUA, IA 52565	NONE	PUBLIC	LAURA DAUGHRITY MEMORIAL-ANNUAL	Person or <input type="checkbox"/> Business <input type="checkbox"/> 1,768.
VAN BUREN PUBLIC HEALTH 905 BROAD ST KEOSAUQUA, IA 52565	NONE	PUBLIC	LAURA DAUGHRITY MEMORIAL -ANNUAL	Person or <input type="checkbox"/> Business <input type="checkbox"/> 1,768.
JANSEN HECKENBERG 220 HONEYMOON ST STOCKPORT IA 52651	NONE	N/A	EDUCATIONAL GRANT	Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/> 3,000.
SARAH WELLS 18001 CHESTNUT AVE DOUDS IA 52551	NONE	N/A	EDUCATIONAL GRANT	Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/> 2,500.
TANNER SMITH P.O. BOX 127 CANTRIL IA 52542	NONE	N/A	EDUCATIONAL GRANT	Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/> 1,000.
NICOLE COFFIN 1449 AGENCY RD SALEM IA 52649	NONE	N/A	EDUCATIONAL GRANT	Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/> 1,000.
CARSON SCHUCK 25870 HWY 2 KEOSAUQUA IA 52565	NONE	N/A	EDUCATIONAL GRANT	Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/> 3,000.
SETH DICKINSON 502 DIVISION ST KEOSAUQUA IA 52565	NONE	N/A	EDUCATIONAL GRANT	Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/> 2,500.
AARON CLEMONS 14313 HWY 1 BIRMINGHAM IA 52535	NONE	N/A	EDUCATIONAL GRANT	Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/> 1,000.

Form 990-PF, Page 11, Part XV, line 3a
Line 3a statement

Continued

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox	Amount
a Paid during the year					
MONICA CHAPUIS 22054 210TH ST KEOSAUQUA IA 52565	NONE	N/A	EDUCATIONAL GRANT	Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/>	500.
CASSIE JOHNSON 1405 5TH ST KEOSAUQUA IA 52565	NONE	N/A	EDUCATIONAL GRANT	Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/>	500.
TYLER GOLDEN 13967 PEDRICK ST DOUDS IA 52551	NONE	N/A	EDUCATIONAL GRANT	Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/>	500.
MITCH GARRELS 31368 215TH ST BLOOMFIELD IA 52537	NONE	N/A	EDUCATIONAL GRANT	Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/>	500.
HALEY BROWNING 301 PARK AVE FARMINGTON IA 52626	NONE	N/A	EDUCATIONAL GRANT	Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/>	500.
TARRAH SYFERT 607 FRANKLIN ST KEOSAUQUA IA 52565	NONE	N/A	EDUCATIONAL GRANT	Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/>	3,000.
KEOSAUQUA SENIOR CITIZENS CENTER 801 FRONT ST KEOSAUQUA, IA 52565	NONE	PUBLIC	LAURA DAUGHERITY MEMORIAL	Person or <input type="checkbox"/> Business <input type="checkbox"/>	189.
CANDY WENKE 26775 292TH ST MT STERLING IA 52573	NONE	N/A	MEDICAL EDUCATION LOAN PROGRAM DEBT FORGIVENESS	Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/>	3,928.
ASHLEA PETTY P O BOX 184 304 MAIN ST BONAPARTE IA 52620	NONE	N/A	MEDICAL EDUCATION LOAN PROGRAM MEDICAL EDUCATION	Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/>	7,554.
PITTSBURG CEMETARY LOCAL KEOSAUQUA IA 52565	NONE	PUBLIC	CEMETARY MAINTENANCE	Person or <input type="checkbox"/> Business <input type="checkbox"/>	274.
VAN BUREN CO EXTENSION SERVICE 200 DODGE ST KEOSAUQUA IA 52565	NONE	PUBLIC	4-H TRIP	Person or <input type="checkbox"/> Business <input type="checkbox"/>	2,550.
VAN BUREN COUNTY EXTENSION SERVICE 200 DODGE ST KEOSAUQUA IA 52565	NONE	PUBLIC	FAIR PREMIUMS	Person or <input type="checkbox"/> Business <input type="checkbox"/>	4,310.
VAN BUREN PARENTS AS TEACHERS 308 MULBERRY ST KEOSAUQUA IA 52565	NONE	PUBLIC	COMPUTERS	Person or <input type="checkbox"/> Business <input type="checkbox"/>	2,956.
KEOSAUQUA SENIOR CITIZENS CENTER 801 FRONT ST KEOSAUQUA IA 52565	NONE	PUBLIC	TABLES	Person or <input type="checkbox"/> Business <input type="checkbox"/>	1,000.
DOUDS COMMUNITY CLUB 14006 HWY 98 DOUDS IA 52551	NONE	PUBLIC	IMPROVEMENTS TO YATES MEMORIAL PARK	Person or <input type="checkbox"/> Business <input type="checkbox"/>	9,196.

Form 990-PF, Page 11, Part XV, line 3a
Line 3a statement

Continued

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foun- dation status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox
				Amount
a Paid during the year				
VAN BUREN COUNTY CONSERVATION BOARD 816 FRANKLIN ST KEOSAUQUA IA 52565	NONE	PUBLIC	MORRIS PARK BARN SIDING	Person or <input type="checkbox"/> Business <input type="checkbox"/> 12,000.
PATHFINDERS RC & D 304 S MAPLE FAIRFIELD IA 52556	NONE	PUBLIC	CITY OF FARMINGTON ELECTRICAL UPGRADES	Person or <input type="checkbox"/> Business <input type="checkbox"/> 2,900.
MILTON HERITAGE SOCIETY 210 N IOWA ST MILTON IA 52570	NONE	PUBLIC	REPAIRS TO HERITAGE CENTER	Person or <input type="checkbox"/> Business <input type="checkbox"/> 5,443.
KEOSAUQUA PUBLIC LIBRARY 608 1ST ST KEOSAUQUA IA 52565	NONE	PUBLIC	UPDATE CATALOG SYSTEM AND CHILDREN'S TABLETS	Person or <input type="checkbox"/> Business <input type="checkbox"/> 2,000.
VAN BUREN GOOD SAMARITAN SOCIETY 819 COUNTRY LANE ROAD KEOSAUQUA IA 52565	NONE	PUBLIC	BARIATRIC EQUIPMENT	Person or <input type="checkbox"/> Business <input type="checkbox"/> 5,500.
BENTONSPORT IMPROVEMENT ASSOCIATION 21953 SANFORD ST KEOSAUQUA IA 52565	NONE	PUBLIC	STONE HOUSE KITCHEN	Person or <input type="checkbox"/> Business <input type="checkbox"/> 4,200.
CITY OF BONAPARTE BALL ASSOCIATION 22335 WHITE AVE BONAPARTE IA 52620	NONE	PUBLIC	CONCESSION STAND REMODELING	Person or <input type="checkbox"/> Business <input type="checkbox"/> 5,000.
VAN BUREN COUNTY ASSESSOR'S BOARD 404 DODGE ST KEOSAUQUA IA 52565	NONE	PUBLIC	DIGITAL AG-LAND USE DEVELOPMENT ORTHOPHOTOGRAPHY	Person or <input type="checkbox"/> Business <input type="checkbox"/> 12,300.
DOUDS HISTORICAL PRESERVATION SOCIETY 17248 HWY 1 KEOSAUQUA IA 52565	NONE	PUBLIC	OAK GROVE SCHOOL REPAIRS	Person or <input type="checkbox"/> Business <input type="checkbox"/> 11,000.
SPENCER CEMETARY ASSOCIATION P O BOX 6 STOCKPORT IA 52651	NONE	PUBLIC	SIGN	Person or <input type="checkbox"/> Business <input type="checkbox"/> 650.

Total

124,195.

Form 990-PF, Page 10, Part XV, line 3b

Line 3b statement

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	Person or Business Checkbox	Amount
b Approved for future payment					
KEOSAUQUA ROTARY CLUB P.O. BOX 475 KEOSAUQUA IA 52565	NONE	PUBLIC	VAN BUREN SCHOOL BAND EQUIPMENT	Person or Business <input type="checkbox"/> 1,000.	
VAN BUREN COUNTY HOSPITAL 304 FRANKLIN ST KEOSAUQUA IA 52565	NONE	PUBLIC	HEALTHLY VILLAGES PROGRAM	Person or Business <input type="checkbox"/> 30,000.	
DOUDS HISTORICAL PRESERVATION SOCIETY 17248 HWY 1 KEOSAUQUA IA 52565	NONE	PUBLIC	MT. MORIAH CHURCH PARTIAL ROOF REPLACEMENT	Person or Business <input type="checkbox"/> 3,000.	
MILTON HERITAGE SOCIETY 210 N IOWA ST. MILTON IA 52570	NONE	PUBLIC	FOUNDATION REPAIRS TO HERITAGE CENTER	Person or Business <input type="checkbox"/> 2,557.	
VAN BUREN GOOD SAMARITAN SOCIETY 819 COUNTRY LANE RD. KEOSAUQUA IA 52565	NONE	PUBLIC	COMMON AREA FURNISHINGS	Person or Business <input type="checkbox"/> 5,000.	
VAN BUREN COUNTY ASSESSORS BOARD 404 DODGE ST KEOSAUQUA IA 52565	NONE	PUBLIC	AG LAND USE DEVELOPMENT DIGITAL ORTHOPHOTOGRAPHY	Person or Business <input type="checkbox"/> 3,340.	
HARMONY COMMUNITY SCHOOLS 33727 RT J40 FARMINGTON IA 52626	NONE	PUBLIC	LIVING SKILLS GRANT	Person or Business <input type="checkbox"/> 500.	
HARMONY COMMUNITY SCHOOLS 33727 RT J40 FARMINGTON IA 52626	NONE	PUBLIC	ELEMENTARY IPAD PROJECT	Person or Business <input type="checkbox"/> 5,000.	
VAN BUREN TRAILS ASSOCIATION P O BOX 327 KEOSAUQUA IA 52565	NONE	PUBLIC	RIVERFRONT STAGE	Person or Business <input type="checkbox"/> 25,000.	
CITY OF KEOSAUQUA CITY HALL 804 1ST ST KEOSAUQUA IA 52565	NONE	PUBLIC	CITY POOL PROJECT	Person or Business <input type="checkbox"/> 250,000.	
BONAPARTE PUBLIC LIBRARY 210 WASHINGTON ST BONAPARTE IA 52620	NONE	PUBLIC	AIR CONDITIONER REPLACEMENTS	Person or Business <input type="checkbox"/> 1,000.	
DOUDS HISTORICAL PRESERVATION ASSN 17248 HWY 1 KEOSAUQUA IA 52565	NONE	PUBLIC	MT MORIAH CHURCH SIDING	Person or Business <input type="checkbox"/> 6,200.	
VAN BUREN COMMUNITY SCHOOLS 503 HENRY ST KEOSAUQUA IA 52565	NONE	PUBLIC	PERCUSSION EQUIPMENT AND MUSIC	Person or Business <input type="checkbox"/> 2,500.	
MILTON FIRE DEPARTMENT MAIN ST MILTON IA 52570	NONE	PUBLIC	COMMUNICATIONS IMPROVEMENTS	Person or Business <input type="checkbox"/> 1,750.	
CITY OF FARMINGTON 203 ELM ST FARMINGTON IA 52626	NONE	PUBLIC	FOOD PANTRY BUILDING	Person or Business <input type="checkbox"/> 20,000.	

Form 990-PF, Page 10, Part XV, line 3b
Line 3b statement

Continued

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox
				Amount
b Approved for future payment				
CITY OF FARMINGTON 203 ELM ST FARMINGTON IA 52626	NONE	PUBLIC	INDIAN LAKE PARK STONE LODGE ROOF	Person or <input type="checkbox"/> Business <input type="checkbox"/> 4,000.
VAN BUREN COMMUNITY SCHOOLS 503 HENRY ST KEOSAUQUA IA 52565	NONE	PUBLIC	CAMP COURAGEOUS TRIP	Person or <input type="checkbox"/> Business <input type="checkbox"/> 3,000.
VAN BUREN COUNTY HISTORICAL SOCIETY 12005 BRIDGE ST SELMA IA 52588	NONE	PUBLIC	PEARSON HOUSE WINDOWS	Person or <input type="checkbox"/> Business <input type="checkbox"/> 4,000.
DOUDS COMMUNITY CLUB 14006 HWY 98 DOUDS IA 52551	NONE	PUBLIC	IMPROVEMENTS TO YATES MEMORIAL PARK	Person or <input type="checkbox"/> Business <input type="checkbox"/> 1,404.

Total

369,251.

Form 990-PF, Page 1, Part I
Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Graf & Company, CPAS	ACCOUNTING SERVICES	6,950.	3,475.	3,475.	3,475.
RIVERVIEW FINANCIAL	ACCOUNTING SERVICES	1,020.	510.	510.	510.
Total		<u>7,970.</u>	<u>3,985.</u>	<u>3,985.</u>	<u>3,985.</u>

Form 990-PF, Page 2, Part II, Line 10b
L-10b Stmt

Line 10b - Investments - Corporate Stock:	End of Year	
	Book Value	Fair Market Value
COCA COLA COMPANY	3,450.	168,880.
EXXON MOBIL CORP	11,758.	52,604.
US BANCORP	31,646.	135,075.
GENERAL ELECTRIC COMPANY	2,871.	70,756.
WELLS FARGO & CO	40,096.	99,224.
PFIZER, INC	36,414.	64,761.
ZOETIS	4,990.	12,134.

Form 990-PF, Page 2, Part II, Line 10b
L-10b Stmt

Continued

Line 10b - Investments - Corporate Stock:	End of Year	
	Book Value	Fair Market Value
VANGUARD WELLESLEY INCOME FUND	807,193.	1,027,528.
VANGUARD STAR FUND	443,816.	572,906.
SMALLCAP WORLD FUND CL A	105,378.	140,246.
NEW WORLD FUND CL A	203,975.	250,307.
CAPITAL INCOME BUILDER FUND	224,899.	246,333.
AMERICAN MUTUAL FUND CL A	290,962.	399,574.
FRANKLIN RISING DIVIDEND FUND	208,122.	283,982.
AMCAP FUND CL A	400,318.	525,522.
AMERICAN BALANCED FUND	9,849.	10,717.
INTERMEDIATE BOND FUND OF AMERICA	199,921.	196,004.
NEW PERSPECTIVE FUND	283,761.	322,701.
FRANKLIN GROWTH FUND	292,772.	432,586.
FRANKLIN TOTAL RETURN FUND	432,418.	413,179.
TEMPLETON GLOBAL BOND FUND	238,088.	218,557.
Total	<u>4,272,697.</u>	<u>5,643,576.</u>

Form 990-PF, Page 2, Part II, Line 14
L-14 Stmt

Line 14b - Description of Land, Buildings, and Equipment	(a) Cost/Other Basis	(b) Accumulated Depreciation	(c) Book Value
LAND	1,000.	0.	1,000.
BUILDING & IMPROVEMENTS	1,217,951.	689,285.	528,666.
FURNITURE, FIXTURES & EQUIPMENT	78,333.	71,508.	6,825.
Total	<u>1,297,284.</u>	<u>760,793.</u>	<u>536,491.</u>

Form 990-PF, Page 2, Part II, Line 15
Other Assets Stmt

Line 15 - Other Assets:	Beginning Year Book Value	End of Year	
		Book Value	Fair Market Value
DIVIDEND RECEIVABLE	4,061.	7,214.	7,214.
Total	<u>4,061.</u>	<u>7,214.</u>	<u>7,214.</u>