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

▶ Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0052

	3/100 00/1000	10, 2014	, and ending	DEC 31, 201	Open to Public Inspection
	dar year 2014 or tax year beginning JUL foundation	10, 2014	, and ending	A Employer identification	
wanne or	Touridation			A Employer Identificatio	in number
DOK	KEN FAMILY FOUNDATION			46-474416	0
	nd street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	<del></del>
301	STEAMBOAT DRIVE		101	402-968-8	284
City or to	own, state or province, country, and ZIP or foreign pe	ostal code		C if exemption application is	pending, check here
_DAK	OTA DUNES, SD 57049				
G Check	all that apply: X Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organization	ns, check here
	Final return	Amended return		Foreign organizations no check here and attach is	neeting the 85% test,
	Address change	Name change	<del></del>	1	
	type of organization: X Section 501(c)(3) exection 4947(a)(1) nonexempt charitable trust	empt private foundation Other taxable private founda	tion	E If private foundation st under section 507(b)(	
	arket value of all assets at end of year   J   Accounting		Accrual	1	
	·	her (specify)	/Noordal	F If the foundation is in a under section 507(b)(	. [ 1
<b>▶</b> \$	284225 . (Part I, colu		pasis.)	211451 55511511 551 (5)(	THO HOUSE HOLD IN THE
Part I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc., received	300000.		N/A	
2	Check if the foundation is not required to attach Sch B			<del> </del>	<del></del>
3	Interest on savings and temporary cash investments	2.	2.		Statement 1
4	Dividends and interest from securities	1964.	1964.	<del> </del>	Statement 2
	Gross rents				
_	Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10	-108.	<del></del>	<del> </del>	
al s	Gross sales price for all	100.		<del> </del>	<del>                                     </del>
Revenue 7	Capital gain net income (from Part IV, line 2)		0.	,	
8	Net short-term capital gain				
9	Income modifications				
10a	Gross sales less returns and allowances				
	Less Cost of goods sold			<del></del>	<del> </del>
	Gross profit or (loss)		<del></del>		<del></del>
11	Other income  Total Robbinds 1 through 17 FAULE CEDI	//CF 301858.	1966.		
13		MCE 301030:	0.	<u>'</u>	0.
14	Compensation of princing and wanted to the compensation of the said of the compensation of the compensatio	-		<del></del>	<del></del>
15	Pension plans, employee benefits				
S 16a	Legal fees 1977 1977 2007				
E B	Accounting fees APR 27 2015				
ुक्त्र । व	Other professional fees			<del></del>	<del></del>
17 = 10	Interest RECEIVED		<del></del>	<del> </del>	
18	Depreciation and depletion 1443			<del> </del>	<del></del>
20	Occupancy		<del></del>		<del></del>
21	Travel, conferences, and meetings		<del></del>	-	<del></del>
22	Printing and publications				
<b>E</b> 23	Other expenses Stmt 3	1166.	0.		0.
CHIZA Of A Administrative Expense	Total operating and administrative				
- g	expenses. Add lines 13 through 23	1166.	0 .	·	0.
25	Contributions, gifts, grants paid	7500.		ļ	7500.
26	Total expenses and disbursements.	0666	^		7500
97	Add lines 24 and 25 Subtract line 26 from line 12:	8666.	0.		7500.
1	Excess of revenue over expenses and disbursements	293192.			
į,	D Net investment income (if negative, enter -0-)	2,7,1,7,1,0	1966	<del> </del>	<del></del>
	Adjusted net income (if negative, enter -0-)		1200	N/A	<del></del>
423501 11-24-14	LHA For Paperwork Reduction Act Notice, see	instructions.			Form <b>990-PF</b> (2014)

For	<u>n 99</u>	0-PF (2014) DOKKEN FAMILY FOUNDATION			1/44160 Page 2
P	art 1	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
_			(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing		62825.	62825.
		Savings and temporary cash investments		230367.	221400.
		Accounts receivable ►			
		Less: allowance for doubtful accounts			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts			
	_	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			<del></del>
	7	Other notes and loans receivable			
i		Less: allowance for doubtful accounts ▶			
ets	_	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
•		Investments - U.S. and state government obligations			
	_	Investments - corporate stock			
		Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis	ļ		
		Less accumulated depreciation			
		Investments - mortgage loans	<del></del>		
	13	Investments - other	<del></del>		
	14	Land, buildings, and equipment: basis ►		[	
		Less accumulated depreciation			<del></del>
		Other assets (describe )	<del></del>		
	16	Total assets (to be completed by all filers - see the		202102	204225
_	<del></del>	instructions. Also, see page 1, item I)	0.	293192.	284225.
	ı	Accounts payable and accrued expenses	<del></del>		
	18	Grants payable			
Liabilities	19	Deferred revenue	<del></del>		
ij	l	Loans from officers, directors, trustees, and other disqualified persons			
Lia	21	Mortgages and other notes payable			
	22	Other liabilities (describe )			
	00	Tatal tiabilities (add lines 17 through 22)	0.	0.	
	23	Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here		<del></del>	
		and complete lines 24 through 26 and lines 30 and 31.			
es	24	Unrestricted			
anc.	25	Temporarily restricted	-		
Sagi	26	Permanently restricted	· · · · · · · · · · · · · · · · · · ·		
둳		Foundations that do not follow SFAS 117, check here			
Ē	}	and complete lines 27 through 31			
ğ	27	Capital stock, trust principal, or current funds	0.	0.	
Net Assets or Fund Balances	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
As	29	Retained earnings, accumulated income, endowment, or other funds	0.	293192.	
fet	30	Total net assets or fund balances	0.	293192.	
~			<u>_</u>		
	31_	Total liabilities and net assets/fund balances	0.	293192.	
TP	art				
_				<del></del>	
ı		I net assets or fund balances at beginning of year - Part II, column (a), line 3	5U		•
2		st agree with end-of-year figure reported on prior year's return)			0.
		r amount from Part I, line 27a r increases not included in line 2 (itemize)		2	293192.
		lines 1, 2, and 3			0.
		eases not included in line 2 (itemize)		4	293192.
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	lumn (h) line 30	5	202102
<u> </u>	1010	inclusions of fund balances at end of year (line 4 fillings line 3) - Part II, CO	iumin (D), iiile 30		293192.

423511

	and Losses for Tax on In		<del>-                                      </del>			,
	cribe the kind(s) of property sold (e.g. arehouse; or common stock, 200 shs		( <b>b)</b>	How acquired - Purchase ) - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a WELLS FARGO 46	a WELLS FARGO 46030800				07/30/14	10/27/14
b						
<u>c</u>						
<u>d</u>		<del></del>			<del> </del>	<del> </del>
_e	(f) Depreciation allowed	(g) Cost or other bas			(h) Gain or (los	<u></u>
(e) Gross sales price	(or allowable)	plus expense of sal	le		(e) plus (f) minus	(g)
a 21654.		21	762.			-108.
<u>b</u>						<del></del>
d d	<del> </del>	<u> </u>			<del></del>	<del></del>
_ <del></del>						<del></del>
	ing gain in column (h) and owned by	the foundation on 12/31/69		<del></del>	(I) Gains (Col. (h) gair	n minus
	(j) Adjusted basis	(k) Excess of col. (		1	col. (k), but not less that	n -0-) <b>or</b>
(i) F.M.V. as of 12/31/69	as of 12/31/69	over col. (j), if any			Losses (from col.	(n))
a						-108.
b						
<u>d</u>						
_e				ļ <del>.</del>		<del></del>
2 Capital gain net income or (net o	apital loss) { If gain, also enter of the loss of the	n Part I, line 7 - in Part I, line 7	}	2		-108.
3 Net short-term canital main or (le	oss) as defined in sections 1222(5) ar					
If gain, also enter in Part I, line 8	•	(5).	Ĵ			
If (loss), enter -0- in Part I, line 8	3	B.T		3	N/A	<u> </u>
L	Jnder Section 4940(e) for				ncome	
(For optional use by domestic priva	te foundations subject to the section	4940(a) tax on net investme	ent incom	ie.)		N/A
If section 4940(d)(2) applies, leave	this part blank.					
Was the foundation liable for the se	ction 4942 tax on the distributable am	ount of any year in the bac	a nariod?	1		Yes No
	alify under section 4940(e). Do not co		c periou:			103 100
	each column for each year; see the ii		ny entrie	S.		<del></del>
(a) Base period years	(b)		(c	)	Dietr	(d) bution ratio
Calendar year (or tax year beginr	ung in) Adjusted qualifying dis	tributions Net value o		irıtable-use assı	ets (col. (b) d	vided by col. (c))
2013						
2012						
2011						
2010						
2009					<del></del>	
2 Total of line 1, column (d)						
	5-year base period - divide the total	on line 2 by 5 or by the nur	mbor of v	0210	2	<del></del>
the foundation has been in exist		on line 2 by 5, or by the nur	ilbei oi y	5413	3	
mo roundation has been in exist	ones in loss than o years				3	
4 Enter the net value of noncharita	able-use assets for 2014 from Part X,	line 5			4	<del> </del>
5 Multiply line 4 by line 3					5	
6 Enter 1% of net investment inco	me (1% of Part I, line 27b)				6	
7 Add lines 5 and 6					7	
	- B . W. L					<del></del>
8 Enter qualifying distributions fro	·				8	
If line 8 is equal to or greater that See the Part VI instructions.	nn line 7, check the box in Part VI, line	1b, and complete that part	using a	1% tax rate.		

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	1990-PF (2014) DOKKEN FAMILY FOUNDATION  Int VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4940(c)		4744: see in			age 4
	Exempt operating foundations described in section 4940(d)(2), check here \( \bigcup \) and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	ĺ				
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1				39.
-	of Part I, line 27b			,. <u>.</u>		
C	All other domestic foundations 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-)	2				0.
3	Add lines 1 and 2	3				39.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				<u>0.</u> 39.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5				39.
6	Credits/Payments:	-				
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 6a					
b	Exempt foreign organizations - tax withheld at source 6b					
C	Tax paid with application for extension of time to file (Form 8868)	-				
d	Backup withholding erroneously withheld 6d					
7	Total credits and payments. Add lines 6a through 6d	7				0.
	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached	_8_				
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9				<u> 39.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		_		
_	Enter the amount of line 10 to be: Credited to 2015 estimated tax	_11				
Pa	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın			Yes	
	any political campaign?		1	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)		1	1b		<u>X</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	d or				
	distributed by the foundation in connection with the activities		i			
	Did the foundation file Form 1120-POL for this year?		}	<u>1c</u>		<u>X</u> _
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		ļ			
	(1) On the foundation. ► \$ O . (2) On foundation managers. ► \$ O .					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		ľ			
_	managers. ► \$0.			_	Ì	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		ŀ	2		<u>X</u> _
•	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, o	r	1	_		7.7
4.	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		<u>X</u>
	t Did the foundation have unrelated business gross income of \$1,000 or more during the year?  If "Yes," has it filed a tax return on Form 990-T for this year?	ът	/ 7	4a		<u>X</u>
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	14	/A	4D 5		<u>x</u>
3	If "Yes," attach the statement required by General Instruction T.			<u> </u>		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
Ü	By language in the governing instrument, or					
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state</li> </ul>	law				
	remain in the governing instrument?	10.44		6	x	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV			7	X	
	the second the second that the				- 21	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			ļ '		
	SD					
b	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation			8b	х	
9		ndar				
	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		_X_
10_		tmt	4	10	Х	

Total. Add lines 1 through 3

	art X Asi::		744100 Tage 0
	Minimum Investment Return (All domestic foundations must complete this part. Foreign to	oundations, see	e instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	_1a	231004.
b	Average of monthly cash balances	1b	67500.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	298504.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	) <b>.</b>	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	298504.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	4478.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	294026.
6	Minimum investment return. Enter 5% of line 5 Adjusted for Short Tax Period	6	7049.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundation foreign organizations check here   in and do not complete this part.)	s and certain	
1	Minimum investment return from Part X, line 6	1	7049.
2a	Tax on investment income for 2014 from Part VI, line 5	€.	
b	Income tax for 2014. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	39.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	7010.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	7010.
6	Deduction from distributable amount (see instructions)	_6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	7010.
Р	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	7500.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	<del> </del>
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	7500.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	7500.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	on qualifies for the	e section

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	-			7010.
2 Undistributed income, if any, as of the end of 2014		<del></del>		7010.
a Enter amount for 2013 only			0.	
b Total for prior years:				
b Total for prior yours.		0.		
3 Excess distributions carryover, if any, to 2014:				
<b>a</b> From 2009	ľ			
<b>b</b> From 2010		İ		
c From 2011	ĺ		İ	
d From 2012		Ì		
e From 2013				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2014 from				
Part XII, line 4: $\triangleright$ \$ 7500.			_	
a Applied to 2013, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior	Ĭ			
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount	400			7010.
e Remaining amount distributed out of corpus	490.			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	490.			
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		0.		
d Subtract line 6c from line 6b. Taxable				<del></del>
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line		<del></del>		<del></del>
4a from line 2a. Taxable amount - see instr.			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			Ì	
may be required - see instructions)	0.		<del></del>	
8 Excess distributions carryover from 2009				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2015.	400			
Subtract lines 7 and 8 from line 6a	490.			
10 Analysis of line 9:				l
a Excess from 2010				
b Excess from 2011				
c Excess from 2012 d Excess from 2013				
e Excess from 2014 490.		1		
<u>e Excess front 2014</u> 490.			<del></del> _	F 000 DE (0044)

	FAMILY FOUN				44160 Page 10
Part XIV Private Operating F	<del></del>		A, question 9)	N/A	
1 a If the foundation has received a ruling o foundation, and the ruling is effective fo			<b>•</b>		
b Check box to indicate whether the found	dation is a private operatii	ng foundation described in	section	4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for			<del></del>		
each year listed		Į i			
b 85% of line 2a	<del></del>	<del></del>		<del>                                     </del>	
				<del> </del>	
c Qualifying distributions from Part XII,					
line 4 for each year listed	<u> </u>	ļ		<del></del>	<del></del>
d Amounts included in line 2c not	<b>\</b>			1	
used directly for active conduct of					
exempt activities					<u></u>
e Qualifying distributions made directly		ļ			
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		}			1
<b>( ' '</b>				<del> </del>	<del> </del>
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test - enter		<del></del>	<del></del>	<del> </del>	<del></del>
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					1
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)	ļ	<del> </del>	<u> </u>		<del> </del>
(3) Largest amount of support from					
an exempt organization					ļ
(4) Gross investment income	L	<u> </u>			<del></del>
Part XV Supplementary Info			if the foundation	nad \$5,000 or m	ore in assets
at any time during	tne year-see inst	ructions.)			
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh			ributions received by the	foundation before the cle	ose of any tax
year (but only if they have contributed i	more than \$5,000). (See :	section 507(d)(2).)			
None					
<b>b</b> List any managers of the foundation wh	ho own 10% or more of t	ne stock of a corporation	or an equally large porti	on of the ownership of a j	partnership or
other entity) of which the foundation ha	as a 10% or greater intere	est.			
None					
2 Information Regarding Contribut	tion. Grant. Gift. Loan	. Scholarship, etc., Pi	ograms		
Check here 🕨 🗓 if the foundation				not accept unsolicited ren	uests for funds. If
the foundation makes gifts, grants, etc.	(see instructions) to indi	viduals or organizations u	nder other conditions, c	omplete items 2a, b, c, an	d d.
a The name, address, and telephone num					
	inder of a man address of	and person to whom appr	oations should be addic	330 <b>u</b> ,	
<b>b</b> The form in which applications should	he submitted and inform	ation and materials that a	aculd includes		
b The form in which applications should	שני שנייוו של מווע ווויטווווי	ation and materials they si	iouia iliciade.		
A Annual Designation of the Allinean		<del></del>	<del></del>	<del></del>	
c Any submission deadlines:					
	<del> </del>			<del></del>	
d Any restrictions or limitations on award	is, such as by geographic	cal areas, charitable fields,	kınds of institutions, or	other factors:	
423601 11-24-14					Form <b>990-PF</b> (2014)

3 Grants and Contributions Paid During the			<del></del>	
Recipient	If recipient is an individual.		T	
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	Or outstant and contributed		<del> </del>	<del>-,</del>
<b>3</b>				
ARTHRITIS FOUNDATION			CONTROL AND CURE	
35 E. WACKER DR. #2260 CHICAGO. IL 60601			ARTHRITIS	5000.
WESTSIDE BAPTIST CHURCH			MAINTENANCE OF CHURCH	
15050 WEST DODGE ROAD OMAHA, NE 68154				1000.
OMAIN, NE VOISA				
CALVARY CHAPEL			MAINTENANCE OF CHURCH	
4428 S. 180TH STREET OMAHA, NE 68135				1500
OMANA, NE 00133		<del></del>		1300,
<del></del>			-	
		:		
Total			<b>▶</b> 3a	7500
b Approved for future payment				
	i			
Maria a				
None				
		<u> </u>		
Total			<b>▶</b> 3b	0,
·				

Part XVI-A	A I	-:41		Producing	A ativitian
Part XVI-A	Anaiv	SIS OT I	ncome-	Producina	ACTIVITIES
1 41 ( / / / / /	,	J			

nter gross amounts unless otherwise indicated.	Unrelated b	usiness income		y section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	Exclu- sion	(d) Amount	Related or exempt function income
Program service revenue:	code		code	Amount	Tunction moonic
a	_				
b	-	<del></del>			
<u> </u>	1 1		<del></del>		
d	- <del>  -  </del> -				
e	_				
	— <del> </del>		<del>-   -   -</del>		
g Fees and contracts from government agencies		<del></del> -			·
Membership dues and assessments			<del>-   -  </del> -	<del></del>	
Interest on savings and temporary cash			14	2.	
investments	-		14	1964.	
Dividends and interest from securities				1904.	<del></del>
Net rental income or (loss) from real estate:			<del>-  </del> -		
a Debt-financed property		<del> </del>	<del>-   -  </del>		
b Not debt-financed property Net rental income or (loss) from personal		<del></del>			
property					
7 Other investment income			-		<del></del>
B Gain or (loss) from sales of assets other					
than inventory			18	-108.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a					
b	1 1				
С	1 1				
d					
e					
2 Subtotal. Add columns (b), (d), and (e)			0.	1858.	
3 Total. Add line 12, columns (b), (d), and (e)				13	185
See worksheet in line 13 instructions to verify calculations	s.)				
Part XVI-B Relationship of Activitie	s to the Accon	nplishment of	Exempt P	urposes	
ine No Explain below how each activity for which				i importantly to the accomp	olishment of
the foundation's exempt purposes (other t	nan by providing tund	s for such purposes	) <u>.                                    </u>		

<b>▼</b> _	the foundation's exempt purposes (other than by providing funds for such purposes).
23821	
23621 1-24-14	Form <b>990-PF</b> (20-

Form 990			N FAMILY			<del></del>		<u>744160</u>		ge <b>13</b>
Part >	(VII	Information Re Exempt Organ		sfers To	and Transactions a	and Relations	hips With None	charitable	•	
1 Did	the ord	<del></del>		of the follows	ng with any other organizati	on described in sect	ion 501(c) of		Yes	No
	-	·			27, relating to political orgai		, ,			
<b>a</b> Trai	nsfers f	rom the reporting found	ation to a noncharita	ıble exempt o	rganization of;				) i	l
(1)	Cash							1a(1)		X
(2)	Other	assets						1a(2)		X
		sactions:								
		of assets to a noncharita						1b(1)		X
		ases of assets from a no		organization				1b(2)		X
• •		of facilities, equipment,						1b(3)		X
		oursement arrangements						1b(4)	ļ	X
		or loan guarantees mance of services or me	mherchin or fundrai	icina colicitat	ione			1b(5) 1b(6)		X
		facilities, equipment, ma						1c		X
	_				iedule. Column (b) should al	wavs show the fair i	narket value of the go		ets.	
		•		_	ved less than fair market val	•	_		,	
		) the value of the goods,								
(a) Line no	) (	(b) Amount involved	(c) Name o	f noncharitab	le exempt organization	(d) Description	n of transfers, transactions	and sharing ar	rangeme	ents
				N/A			· · · · · · · · · · · · · · · · · · ·			
					<del> </del>					
			 		<del></del>					
							-			
			<del> </del>		<del></del>					
					<del></del>	<del></del>				
			<del> </del>			<del></del>				
	_		<del>                                     </del>		<del></del>					
	_				<del></del>					
		<del></del>	<u> </u>	<del></del>						
		idation directly or indirec 501(c) of the Code (othe			e or more tax-exempt organ ction 527?	izations described		Yes	X	ои [
_b_lf"\	res," co	mplete the following sch				<del></del>				
		(a) Name of org	ganization	<del> </del>	(b) Type of organization		(c) Description of rela	tionship		
		N/A_			· <del> </del>	<u> </u>				
						<del> </del>				
			<del></del>	<del></del>	<del> </del>	<del> </del>	<del></del>			
		<del></del>			<del></del>	<del> </del>				
	Under	penalties of perjury, I declare	that I have examined th	is return, includ	ling accompanying schedules and	d statements, and to the	best of my knowledge			
Sign	and be	lief, it is true, correct, and cor	mplete Declaration of pi	reparer (other th	nan taxpayer) is based on all infor	mation of which prepare	er has any knowledge	May the IRS return with th	e prepar	rer
Here		Krusue W	LOCK_		14/22/15	PRESI	DENT	Shown below		No
	Sign	ature of officer or trustee	)		Date	Title				
		Print/Type preparer's na	ame	Preparer's	signature	Date	Check X If F	PTIN		
ь	ı			2	0	1	self- employed			
Paid		Larry Coun		can	lounderne	04/11/15		P00966	725	·
Prepa		Firm's name 🕨 LAR	RY COUNTE	RYMAN	CPA U		Firm's EIN			

Phone no. 605-232-9747

Firm's address ► 320 DAKOTA DUNES BLVD #303

DAKOTA DUNES, SD 57049

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

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

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

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

OMB No 1545-0047

Name of the organization

Employer identification number

D	OOKKEN_FAMILY_FOUNDATION	46-4744160				
Organization type(check	one)					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)( ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
• •	n is covered by the <b>General Rule</b> or a <b>Special Rule.</b> (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Spec	cial Rule. See instructions.				
X For an organizati	non filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions to ny one contributor. Complete Parts I and II. See instructions for determining a contri					
Special Rules						
sections 509(a)(1 any one contribu	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, Ine 1. Complete Parts I and II.					
year, total contri	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.					
year, contribution is checked, ente purpose Do not	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 <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.					
but it must answer "No" o	n that is not covered by the General Rule and/or the Special Rules does not file Scheon Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or object the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).					

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

Name of organization

Employer identification number

## DOKKEN FAMILY FOUNDATION

46-4744160

Part I	Contributors (see instructions). Use duplicate copies of Part I	if additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LOUISE E. PERSINGER  4420 HAMILTON BLVD  SIOUX CITY, IA 51104	\$300000.	Person X Payroll  Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u></u>		<b>\$</b>	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
423452 11-0		\$	Person Payroll Noncash Complete Part II for noncash contributions )

Name of organization

Employer identification number

## DOKKEN FAMILY FOUNDATION

46-4744160

art II N	Noncash Property (see instructions). Use duplicate copies of Property	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-			·
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-   -		     \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1			
23453 11-05-14		\$	990, 990-EZ, or 990-PF)

Name of orga	anization		Employer identification number		
DOKKEN	FAMILY FOUNDATION		46-4744160		
Part III	Exclusively religious, charitable, etc.,	contributions to organizations described in secti	on 501(c)(7), (8), or (10) that total more than \$1,000 for		
	completing Part III, enter the total of exclusively re	ete columns (a) through (e) and the following line igious, charitable, etc., contributions of \$1,000 or less for t			
(a) No	Use duplicate copies of Part III if addi	tional space is needed			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	CHARITABLE GIVING	GENERAL FUNDING OF	CASH AND INVESTMENTS		
1		CHARITABLE			
		PURPOSES			
-		(e) Transfer of gift	<del></del>		
-	Transferee's name, addres	s, and ZIP + 4	elationship of transferor to transferee		
(a) No					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
Ì					
		(e) Transfer of gift			
	Turnefoundle	- and 71D . 4	talationalis of terrafores to terrafore		
-	Transferee's name, addres	s, and ZIP + 4	Relationship of transferor to transferee		
İ					
(a) No.					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
1					
1		(e) Transfer of gift			
	Transferee's name, addres	s, and ZIP + 4	Relationship of transferor to transferee		
[					
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
Part I	(2) 1 2 2 2 2 3 2 2	(e, coo e, giit	(a) Description of new girt is new		
-		In Transfer of the	<u> </u>		
	(e) Transfer of gift				
	Transferee's name, addres	s, and ZIP + 4	Relationship of transferor to transferee		

Form 990-PF Intere	st on Savir	ngs and Temp	orary	Cash In	vestments	Stateme	nt 1
Source		(a) Rever Per Bo	nue	Net In	(b) vestment come	(c) Adjus Net In	ted
WELLS FARGO			2.		2.		
Total to Part I, li	ne 3		2.		2.		·
Form 990-PF	Dividends	and Intere	est fro	om Secur	ities	Stateme	nt 2
Source	Gross Amount	Capital Gains Dividends		(a) evenue r Books	(b) Net Inves ment Inco	st- Adj	c) usted Income
WELLS FARGO WELLS FARGO	1888			1888. 76.		38. 76.	
To Part I, line 4	1964	. (		1964.	196	54.	
Form 990-PF		Other Ex	kpense	s		Stateme	nt 3
Description		(a) Expenses Per Books	Net I	b) nvest- Income	(c) Adjusted Net Incom	d Char	d) itable poses
INVESTMENT FEES	_	1166.	-	0.			0.
To Form 990-PF, Pg	1, ln 23	1166.		0.			0.

Form 990-PF	List of Substantial Contributors Part VII-A, Line 10	Statement	4
Name of Contributor	Address		
LOUISE E. PERSINGER	4420 HAMILTON BLVD		