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Form **990-PF**

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

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

▶ **Do not enter social security numbers on this form as it may be made public.**
▶ **Information about Form 990-PF and its instructions is at *www.irs.gov/form990pf*.**

OMB No 1545-0052

2014

Open to Public Inspection

For calendar year 2014, or tax year beginning 01-01-2014 , and ending 12-31-2014

Name of foundation
BEITZ FOUNDATION
CO FIRST NATIONAL BANK OF MUSCATINE

A Employer identification number
56-6657852

Number and street (or P O box number if mail is not delivered to street address)
300 E 2ND STREET

Room/suite

B Telephone number (see instructions)
(563) 262-4215

City or town, state or province, country, and ZIP or foreign postal code
MUSCATINE, IA 52761

C If exemption application is pending, check here ▶ ☐

G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

D 1. Foreign organizations, check here ▶ ☐

2. Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐

H Check type of organization ☑ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ ☐

I Fair market value of all assets at end of year *(from Part II, col. (c), line 16)* ▶$ 97,070

J Accounting method ☑ Cash ☐ Accrual ☐ Other (specify) _____
(Part I, column (d) must be on cash basis.)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ ☐

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))*	**(a)** Revenue and expenses per books	**(b)** Net investment income	**(c)** Adjusted net income	**(d)** Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)				
	2 Check ▶ ☑ if the foundation is **not** required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	2,134	2,134		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	2,535			
	b Gross sales price for all assets on line 6a 5,624				
	7 Capital gain net income (from Part IV, line 2)		2,535		
	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)				
	12 **Total.** Add lines 1 through 11	4,669	4,669		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	818	409		409
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	716	358		358
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	13	13		
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)				
	24 **Total operating and administrative expenses.** Add lines 13 through 23	1,547	780		767
	25 Contributions, gifts, grants paid	5,500			5,500
	26 **Total expenses and disbursements.** Add lines 24 and 25	7,047	780		6,267
	27 Subtract line 26 from line 12				
	a **Excess of revenue over expenses and disbursements**	-2,378			
	b **Net investment income** (if negative, enter -0-)		3,889		
	c **Adjusted net income** (if negative, enter -0-)				

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			
	2 Savings and temporary cash investments	3,366	2,387	2,387
	3 Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	17,224	15,826	22,244
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	64,560	64,560	72,439
	14 Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	15 Other assets (describe ▶ _____)			
	16 **Total assets** (to be completed by all filers—see the instructions Also, see page 1, item I)	85,150	82,773	97,070
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)			
	23 **Total liabilities** (add lines 17 through 22)		0	
Net Assets or Fund Balances	**Foundations that follow SFAS 117, check here ▶ ☑ and complete lines 24 through 26 and lines 30 and 31.**			
	24 Unrestricted	85,150	82,773	
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ ☐ and complete lines 27 through 31.			
	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)	85,150	82,773	
	31 **Total liabilities and net assets/fund balances** (see instructions)	85,150	82,773	

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	85,150
2	Enter amount from Part I, line 27a	2	-2,378
3	Other increases not included in line 2 (itemize) ▶ _____	3	1
4	Add lines 1, 2, and 3	4	82,773
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	82,773

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 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a				

	(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				
b				
c				
d				
e				

	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a				
b				
c				
d				
e				

2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 / If (loss), enter -0- in Part I, line 7 }	2	2,535
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)		
	If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

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

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(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 (col (b) divided by col (c))
2013	7,211	94,197	0 07655
2012	5,419	92,495	0 05859
2011	7,480	94,058	0 07953
2010	6,990	97,166	0 07194
2009	7,971	94,523	0 08433

2	**Total** of line 1, column (d).	2	0 37093
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 07419
4	Enter the net value of noncharitable-use assets for 2014 from Part X, line 5.	4	96,004
5	Multiply line 4 by line 3.	5	7,122
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	39
7	Add lines 5 and 6.	7	7,161
8	Enter qualifying distributions from Part XII, line 4.	8	6,267

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 page 18 of the instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter _____ **(attach copy of letter if necessary–see instructions)**		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1% of Part I, line 27b	1	78
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2	
3	Add lines 1 and 2	3	78
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	
5	**Tax based on investment income.** Subtract line 4 from line 3 If zero or less, enter -0-	5	78
6	Credits/Payments		
a	2014 estimated tax payments and 2013 overpayment credited to 2014 — 6a		
b	Exempt foreign organizations—tax withheld at source — 6b		
c	Tax paid with application for extension of time to file (Form 8868) — 6c		
d	Backup withholding erroneously withheld — 6d		
7	Total credits and payments Add lines 6a through 6d	7	
8	Enter any **penalty** 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	78
10	**Overpayment.** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid** ▶	10	
11	Enter the amount of line 10 to be **Credited to 2015 estimated tax** ▶ **Refunded** ▶	11	

Part VII-A Statements Regarding Activities

			Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a		No
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)?	1b		No
	*If the answer is "Yes" to **1a** or **1b,** attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.*			
c	Did the foundation file **Form 1120-POL** for this year?	1c		No
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? *If "Yes," attach a detailed description of the activities.*	2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? *If "Yes," attach a conformed copy of the changes*	3		No
4a	Did the foundation have unrelated business gross income of $1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	4b		No
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If "Yes," attach the statement required by General Instruction T.*	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes	
7	Did the foundation have at least $5,000 in assets at any time during the year? *If "Yes," complete Part II, col. (c), and Part XV.*	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ IA			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? *If "No," attach explanation .*	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? *If "Yes," complete Part XIV*	9		No
10	Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses.*	10		No

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		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	

Website address ▶ N/A

14 The books are in care of ▶ FIRST NATIONAL BANK Telephone no ▶ (563) 262-4221

Located at ▶ 300 E 2ND STREET MUSCATINE IA ZIP+4 ▶ 52761

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of **Form 1041** —Check here . . . . . ▶ ☐

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		No

See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ▶

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
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☑ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☑ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☑ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☑ 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)? ☐ Yes ☑ 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). ☐ Yes ☑ 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)?	1b		No
	Organizations relying on a current notice regarding disaster assistance check here. ▶ ☐			
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?	1c		No
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? ☐ Yes ☑ 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)	2b		No
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____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☑ 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? *(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014.)*	3b		No
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		No

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

5a	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)?	**5b**		**No**
	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? ☐ Yes ☑ No			
	If "Yes," attach the statement required by Regulations section 53.4945–5(d).			
6a	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?	**6b**		**No**
	If "Yes" to 6b, file Form 8870.			
7a	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?	**7b**		**No**

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
FIRST NATIONAL BANK 300 E 2ND ST MUSCATINE,IA 52761	Trustee 0 50	818		

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 ▶

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. ▶

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 DISTRIBUTED SCHOLARSHIPS TO 8 RECIPIENTS	5,500
2	
3	
4	

Part IX-B **Summary of Program-Related Investments** (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments See instructions **3**	
Total. Add lines 1 through 3 ▶	

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		1a	94,248
b	Average of monthly cash balances		1b	3,218
c	Fair market value of all other assets (see instructions)		1c	0
d	**Total** (add lines 1a, b, and c)		1d	97,466
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e 0		
2	Acquisition indebtedness applicable to line 1 assets		2	
3	Subtract line 2 from line 1d		3	97,466
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)		4	1,462
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3 Enter here and on Part V, line 4		5	96,004
6	**Minimum investment return.** Enter 5% of line 5		6	4,800

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	4,800
2a	Tax on investment income for 2014 from Part VI, line 5	2a 78		
b	Income tax for 2014 (This does not include the tax from Part VI)	2b		
c	Add lines 2a and 2b		2c	78
3	Distributable amount before adjustments Subtract line 2c from line 1		3	4,722
4	Recoveries of amounts treated as qualifying distributions		4	
5	Add lines 3 and 4		5	4,722
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	4,722

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		1a	6,267
b	Program-related investments—total from Part IX-B		1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the			
a	Suitability test (prior IRS approval required)		3a	
b	Cash distribution test (attach the required schedule)		3b	
4	**Qualifying distributions.** Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4		4	6,267
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	
6	**Adjusted qualifying distributions.** Subtract line 5 from line 4		6	6,267

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				4,722
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only.				
b Total for prior years 20___, 20___, 20___				
3 Excess distributions carryover, if any, to 2014				
a From 2009.				
b From 2010. 324				
c From 2011. 2,817				
d From 2012. 828				
e From 2013. 2,527				
f **Total** of lines 3a through e.	6,496			
4 Qualifying distributions for 2014 from Part XII, line 4 ▶ $ 6,267				
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).	0			
d Applied to 2014 distributable amount.				4,722
e Remaining amount distributed out of corpus	1,545			
5 Excess distributions carryover applied to 2014				
(If an amount appears in column (d), the same amount must be shown in column (a).)				
6 **Enter the net total of each column as indicated below:**				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	8,041			
b Prior years' undistributed income Subtract line 4b from line 2b.				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b Taxable amount —see instructions.				
e Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount—see instructions.				
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). . .				
9 **Excess distributions carryover to 2015.** Subtract lines 7 and 8 from line 6a.	8,041			
10 Analysis of line 9				
a Excess from 2010. . . . 324				
b Excess from 2011. . . . 2,817				
c Excess from 2012. . . . 828				
d Excess from 2013. . . . 2,527				
e Excess from 2014. . . . 1,545				

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

1a 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 organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2014	(b) 2013	(c) 2012	(d) 2011	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon **a** "Assets" alternative test—enter **(1)** Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .					
c "Support" alternative test—enter **(1)** 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 organization 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))

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

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

FIRST NATIONAL BANK
300 EAST SECOND STREET
MUSCATINE,IA 52761
(563) 262-4221

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

SEE ATTACHED BEITZ FOUNDATION EDUCATION SCHOLARSHIP APPLICATION

c Any submission deadlines

NONE

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

MUST BE GRADUATES OF MUSCATINE HIGH SCHOOL WHO WISH TO PURSUE HIGHER EDUCATION IN THE AREA OF VOCATIONAL AGRICULTURAL EDUCATION OR HAND ON FARM OPERATIONS THE SCHOLARSHIPS ARE TO BE BASED ON THE NEED OF THE RECIPIENT AS WELL AS CHARACTER, INTELLIGENCE AND SCHOLASTIC RECORD

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* See Additional Data Table				
Total . . . . . ▶ **3a**				5,500
b *Approved for future payment*				
Total . . . . . ▶ **3b**				

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	2,134	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	2,535	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)				4,669	
13 **Total.** Add line 12, columns (b), (d), and (e)					13 4,669

(See worksheet in line 13 instructions to verify calculations)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)

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

		Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		
a	Transfers from the reporting foundation to a noncharitable exempt organization of		
	(1) Cash	1a(1)		No
	(2) Other assets	1a(2)		No
b	Other transactions		
	(1) Sales of assets to a noncharitable exempt organization	1b(1)		No
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)		No
	(3) Rental of facilities, equipment, or other assets	1b(3)		No
	(4) Reimbursement arrangements	1b(4)		No
	(5) Loans or loan guarantees	1b(5)		No
	(6) Performance of services or membership or fundraising solicitations	1b(6)		No
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		No

d If the answer to any of the above is "Yes," complete the following schedule Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☑ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

****** | 2015-05-14 | ******

Signature of officer or trustee | Date | Title

May the IRS discuss this return with the preparer shown below (see instr)? ☑ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ▶ ☐	PTIN
VICKI A BECKEY CPA				P00226738

Firm's name ▶ TD&T CPAs and Advisors PC | Firm's EIN ▶

Firm's address ▶ 500 Cedar St Muscatine, IA 52761 | Phone no (563) 264-2727

Form 990PF Part XV Line 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*				
KINSEY EDMONDS 901 EAST 11TH STREET MUSCATINE,IA 52761	NONE		SCHOLARSHIP TO IOWA STATE UNIVERSITY	500
NICHOLAS ESCALANTE 1990 GENEVA HILLS ROAD MUSCATINE,IA 52761	NONE		SCHOLARSHIP TO MUSCATINE COMMUNITY COLLEGE	500
ANNA BROOKS 1791 ZIEGLER AVENUE BLUE GRASS,IA 52726	NONE		SCHOLARSHIP TO IOWA STATE UNIVERSITY	750
ERIN LAGONE 2197 NORTH HILL ROAD MUSCATINE,IA 52761	NONE		SCHOLARSHIP TO IOWA STATE UNIVERSITY	750
JOSEPH ERNST 2741 170TH STREET MUSCATINE,IA 52761	NONE		SCHOLARSHIP TO MUSCATINE COMMUNITY COLLEGE	750
MALLORY MADSEN 2605 DAWSON STREET MUSCATINE,IA 52761	NONE		SCHOLARSHIP TO IOWA STATE UNIVERSITY	750
DACODA RICKETTS 607 W 8TH STREET MUSCATINE,IA 52761	NONE		SCHOLARSHIP TO MUSCATINE COMMUNITY COLLEGE	750
GRACE SEABA 3313 SPINNING WHEEL COURT MUSCATINE,IA 52761	NONE		SCHOLARSHIP TO DES MOINES AREA COMMUNITY COLLEGE	750
Total . . . . . ▶ **3a**				5,500

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491134011305

TY 2014 Accounting Fees Schedule

Name: BEITZ FOUNDATION
CO FIRST NATIONAL BANK OF MUSCATINE
EIN: 56-6657852
Software ID: 14000265
Software Version: 2014v5.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
	716	358	0	358

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TY 2014 Investments Corporate Stock Schedule

Name: BEITZ FOUNDATION
CO FIRST NATIONAL BANK OF MUSCATINE
EIN: 56-6657852
Software ID: 14000265
Software Version: 2014v5.0

Name of Stock	End of Year Book Value	End of Year Fair Market Value
VANGUARD TOTAL INTNL STCK IDX FD SIGNAL		
VANGUARD TTL STK MKT INDEX FUND SIGNAL		
VANGUARD 500 INDEX SIGNAL		
VANGUARD TOTAL INTL STK IDX ADM	3,054	2,652
VANGUARD 500 INDEX FUND ADM	12,772	19,592

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TY 2014 Investments - Other Schedule

Name: BEITZ FOUNDATION
CO FIRST NATIONAL BANK OF MUSCATINE
EIN: 56-6657852
Software ID: 14000265
Software Version: 2014v5.0

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
VANGUARD S-T BOND INDEX FD ADM	AT COST	27,000	28,471
VANGUARD S-T BOND INDEX SIGNAL	AT COST		
VANGUARD S-T FEDERAL FUND ADM SHS	AT COST	6,840	6,715
VANGUARD REIT INDEX FUND SIGNAL	AT COST		
VANGUARD EQUITY INCOME FUND ADM SHS	AT COST	18,423	21,511
VANGUARD WELLINTON FD ADMIRAL SHS	AT COST	7,500	9,417
VANGUARD REIT INDEX ADMIRAL	AT COST	4,797	6,325

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TY 2014 Other Increases Schedule

Name: BEITZ FOUNDATION
CO FIRST NATIONAL BANK OF MUSCATINE
EIN: 56-6657852
Software ID: 14000265
Software Version: 2014v5.0

Description	Amount
ROUNDING	1

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491134011305

TY 2014 Taxes Schedule

Name: BEITZ FOUNDATION
CO FIRST NATIONAL BANK OF MUSCATINE
EIN: 56-6657852
Software ID: 14000265
Software Version: 2014v5.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
2013 990-PF TAX	13	13		

BEITZ EDUCATIONAL TRUST SCHOLARSHIP

I. Purpose: The Beitz Foundation was established by Miles Beitz, a former Agricultural Sciences Teacher from Muscatine High School. The Scholarship was established to provide educational assistance to students from Muscatine High School who wish to pursue a career in vocational agriculture education, or some form of hands on farm operations.

II. Edibility: To be eligible students must have graduated from Muscatine Public High School and must be pursuing either undergraduate, graduate or professional education in the field of Agricultural Sciences. Preference will be given to students attending a college or university in the State of Iowa. The Scholarship Committee will also consider the character and scholastic achievement of applicants, as well as their financial need.

III. Checklist for completed application (return all materials to your High School Ag Department office by March 13, 2014.) All forms should be typed (except references) or completed using a word processor. **Incomplete or late applications will not be accepted.**

CHECK LIST

_____ Completed Application

_____ Official Copy of High School or College Transcript

_____ Completed Reference Forms Given to References

_____ Essay or Personal Statement

_____ A copy of your FAFSA Application or the first two pages of your parents most recent federal income tax return.

_____ Copy of College Admissions Letter

_____ School/Financial Aid Award Letter (if available)

BEITZ FOUNDATION EDUCATION
SCHOLARSHIP APPLICATION

The Beitz Foundation was established in the will of Miles Beitz. Although his will states that a preference should be given in the selection process to students planning to attend Muscatine Community College, other scholarships may be awarded to student attending other Iowa colleges or universities. These scholarships are based primarily on need and the absence of any other apparent form of financial assistance

FAMILY INFORMATION

Name _____ Birth Date _____

Social Security No._____ Cell Phone _____

Email _____

Address _____

_____

FATHER

Name _____

Occupation and Employer_____

Address _____

_____

MOTHER

Name _____

Occupation and Employer_____

Address _____

_____

Number of brothers/sisters in your family living at home and not attending college: _____

Number of brothers/sisters attending college: _____

Number of other family members living in your home: _____

HIGH SCHOOL INFORMATION

High School _____ Date of graduation _____

Cumulative GPA: _____ Rank in class: _____/_____
(grade 9 through first semester, grade 12)

Attendance:	Absences
Grade 9	_____
Grade 10	_____
Grade 11	_____
Grade 12	_____

Please explain if there are any unusual circumstances for excessive absenteeism:

TRANSCRIPT

Transcript – A high school transcript must be attached to this form in order to complete the application. If you are currently a college student, a college transcript must be attached in addition to your high school transcript.

TEST SCORES

ACT	E	M	R	ScR	Composite	Date
	_____	_____	_____	_____	_____	_____

COMPASS TEST	Reading	Writing	Algebra	Pre-Algebra
	_____	_____	_____	_____

EXTRA CURICULAR ACTIVITIES

Please list school and community activities that you participated in during high school. You may include any volunteer experiences as well as any honors received. Please include dates. You may write this in the space provided or attach a separate statement.

REFERENCES

List two references and have each reference complete the attached reference form.

	Name	Address	Occupation
1.			
2.			

ESSAY

Please submit a typed essay or personal statement.

When selecting recipients the selection committee will consider the character and scholastic achievement of applicants, as well as their financial need. You are encouraged to discuss your personal character and why you qualify as a "deserving" individual. You may also discuss any unusual family circumstances or financial barriers.

POST-SECONDARY INFORMATION

College Choice _____

Intended Major _____

Career Goals _____

EDUCATION PLAN STATEMENT

The Beitz Foundation was established to encourage and enable students to further their education in the field of Agricultural Sciences. Please write a short statement describing your education plans, career goals or any thing else you feel will help the selection committee understand how your education plans are within the field of Agricultural Sciences. You may write in the space provided or attach a separate statement.

FINANCIAL INFORMATION

1. What is you expected annual cost of education?

a.	Tuition	$_____
b.	Books	$_____
c.	Fees	$_____
d.	Room Board	$_____
	Total	$_____

2. Did you file a FAFSA (Free Application for Federal Student Aid)?

_____yes, please attach a copy of your FAFSA
_____no, please attach a copy of the first two pages of your parents most recent federal income tax return.

3. Have you applied for other scholarships? _____yes _____no

4. Have you received scholarship assistance? _____yes _____no

If yes, list scholarship(s) and amount(s): _____

_____

5. If you do not receive a scholarship, how do you plan to pay your college expenses?

$_____ savings $_____trust account $_____ work

$_____loans $_____parents $_____other

6. Are there any other circumstances or financial difficulties you believe the scholarship committee should be aware of when considering your financial need? _____yes _____no

If yes, please describe: _____

_____

_____

Certification

To the best of my knowledge, the information provided in this application is accurate.

_____ _____
Signature Date

The Beitz Foundation reserves the right to review, approve, disapprove, amend or modify any scholarships awarded from the Beitz Foundation

Beitz Foundation Education Scholarship
Scholarship Reference Form

Instructions Items #1, #2, #3 and #4 should be completed by the applicant. No friends or relative please. As a courtesy to the people that are providing a reference for you, please provide a stamped envelope.

1. Applicant's Name: _____

2. Applicant's Address: _____

3 College that applicant will be attending: _____

4. High School Attended: _____

5. How long and in what capacity have you known this individual? _____

_____

6. Please rate the applicant on the following characteristics:

	Excellent	Above Average	Average	Below Average	Poor	Unable to Make Determination
Dependability	_____	_____	_____	_____	_____	_____
Motivation	_____	_____	_____	_____	_____	_____
Character	_____	_____	_____	_____	_____	_____
Ability to get along with Others	_____	_____	_____	_____	_____	_____
Likelihood of Academic Success	_____	_____	_____	_____	_____	_____

7. Please explain why you feel this individual is (or is not) deserving of a scholarship. (Please continue on back if needed.)

_____

_____

_____

_____

_____

Signature _____ Date _____

Name Printed _____ Title/Position _____

Company/Institution _____

This information is confidential.
Return this form to the high school Ag. Department by March 13, 2014: do not return to the student

Beitz Foundation Education Scholarship

Scholarship Reference Form

Instructions. Items #1, #2, #3 and #4 should be completed by the applicant. No friends or relative please. As a courtesy to the people that are providing a reference for you, please provide a stamped envelope

1. Applicant's Name: _____
2. Applicant's Address: _____
3. College that applicant will be attending: _____
4. High School Attended: _____
5. How long and in what capacity have you known this individual? _____

_____

6. Please rate the applicant on the following characteristics:

	Excellent	Above Average	Average	Below Average	Poor	Unable to Make Determination
Dependability	_____	_____	_____	_____	_____	_____
Motivation	_____	_____	_____	_____	_____	_____
Character	_____	_____	_____	_____	_____	_____
Ability to get along with Others	_____	_____	_____	_____	_____	_____
Likelihood of Academic Success	_____	_____	_____	_____	_____	_____

7. Please explain why you feel this individual is deserving of a scholarship.
   (Please continue on back if needed.)

_____

_____

_____

_____

_____

Signature _____ Date _____

Name Printed _____ Title/Position _____

Company/Institution _____

This information is confidential.
Return this form to the high school Ag Department by March 13, 2014: do not return to the student