



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



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](http://www.irs.gov/form990pf).

OMB No 1545-0052





2015


Open to Public Inspection

For calendar year 2015, or tax year beginning 01-01-2015, and ending 12-31-2015

Name of foundation INTERSTATES FOUNDATION		<b>A Employer identification number</b>  42-1480887	
Number and street (or P O box number if mail is not delivered to street address) PO BOX 260		<b>B</b> Telephone number (see instructions)  (712) 722-1662	
City or town, state or province, country, and ZIP or foreign postal code SIOUX CENTER, IA 51250		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>	
<b>G</b> Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here <input type="checkbox"/>  <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
<b>H</b> Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 1,911,936		<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
<b>J</b> Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )</i>		Revenue and expenses per books <b>(a)</b>	Net investment income <b>(b)</b>	Adjusted net income <b>(c)</b>	Disbursements for charitable purposes <b>(d)</b> (cash basis only)
Revenue	<b>1</b> Contributions, gifts, grants, etc , received (attach schedule) . . . . .	228,944			
	<b>2</b> Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	<b>3</b> Interest on savings and temporary cash investments				
	<b>4</b> Dividends and interest from securities . . . . .	28,110	28,110		
	<b>5a</b> Gross rents . . . . .				
	<b>b</b> Net rental income or (loss) _____				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10	70,560			
	<b>b</b> Gross sales price for all assets on line 6a 70,560				
	<b>7</b> Capital gain net income (from Part IV, line 2) . . . .		70,560		
	<b>8</b> Net short-term capital gain . . . . .				
	<b>9</b> Income modifications . . . . .				
	<b>10a</b> Gross sales less returns and allowances				
Operating and Administrative Expenses	<b>b</b> Less Cost of goods sold . . . . .				
	<b>c</b> Gross profit or (loss) (attach schedule) . . . . .				
	<b>11</b> Other income (attach schedule) . . . . .	4,686	4,686	0	
	<b>12 Total.</b> Add lines 1 through 11 . . . . .	332,300	103,356	0	
	<b>13</b> Compensation of officers, directors, trustees, etc	0	0	0	0
	<b>14</b> Other employee salaries and wages . . . . .				
	<b>15</b> Pension plans, employee benefits . . . . .				
	<b>16a</b> Legal fees (attach schedule). . . . .	45	0	0	45
	<b>b</b> Accounting fees (attach schedule). . . . .	725	0	0	725
	<b>c</b> Other professional fees (attach schedule) . . . . .	8,645	8,645	0	0
	<b>17</b> Interest . . . . .				
	<b>18</b> Taxes (attach schedule) (see instructions) . . . .	2,663	0	0	0
	<b>19</b> Depreciation (attach schedule) and depletion . . .				
	<b>20</b> Occupancy . . . . .				
	<b>21</b> Travel, conferences, and meetings. . . . .				
	<b>22</b> Printing and publications . . . . .				
	<b>23</b> Other expenses (attach schedule). . . . .	10,000	0	0	10,000
	<b>24 Total operating and administrative expenses.</b>				
	Add lines 13 through 23 . . . . .	22,078	8,645	0	10,770
	<b>25</b> Contributions, gifts, grants paid . . . . .	108,710			108,710
	<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	130,788	8,645	0	119,480
	<b>27</b> Subtract line 26 from line 12				
	<b>a Excess of revenue over expenses and disbursements</b>	201,512			
	<b>b Net investment income</b> (if negative, enter -0-)		94,711		
	<b>c Adjusted net income</b> (if negative, enter -0-) . . . .			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 . . . . .	148,306	-36,894	-36,894
	2	Savings and temporary cash investments . . . . .	154,345		
	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)	26,109 	26,902	26,275
	b	Investments—corporate stock (attach schedule) . . . . .	865,047 	1,016,869	1,189,423
	c	Investments—corporate bonds (attach schedule) . . . . .	290,000 	283,882	264,401
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans. . . . .			
	13	Investments—other (attach schedule) . . . . .	46,261 	438,366	468,731
	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)	1,530,068	1,729,125	1,911,936	
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	0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted . . . . .			
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds . . . . .	0	0	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	1,530,068	1,729,125	
	30	Total net assets or fund balances(see instructions) . . . . .	1,530,068	1,729,125	
31	Total liabilities and net assets/fund balances(see instructions) . . . . .	1,530,068	1,729,125		

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	1,530,068
2	Enter amount from Part I, line 27a . . . . .	2	201,512
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3 . . . . .	4	1,731,580
5	Decreases not included in line 2 (itemize) ▶ _____ 	5	2,455
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	6	1,729,125

Part IV

Capital Gains and Losses for Tax on Investment Income

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )		How acquired P—Purchase (b) D—Donation	Date acquired (c) (mo , day, yr )	Date sold (d) (mo , day, yr )
1 a	PUBLICLY TRADED SECURITIES	P		
b	CAPITAL GAIN DISTRIBUTIONS	P		
c				
d				
e				

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
a 5,626			5,626
b 64,934			64,934
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) or (l) Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
a			5,626
b			64,934
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	70,560
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))
2014	96,320	1,665,179	0 057844
2013	82,391	1,399,782	0 058860
2012	79,855	1,173,009	0 068077
2011	77,043	1,056,581	0 072917
2010	61,539	956,945	0 064308

2	Total of line 1, column (d). . . . .	2	0 322006
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 064401
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5. . . . .	4	1,809,449
5	Multiply line 4 by line 3. . . . .	5	116,530
6	Enter 1% of net investment income (1% of Part I, line 27b). . . . .	6	947
7	Add lines 5 and 6. . . . .	7	117,477
8	Enter qualifying distributions from Part XII, line 4. . . . .	8	119,480

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 . . . . .

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

0

3

Add lines 1 and 2. . . . .

3

947

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

947

6

Credits/Payments

a

2015 estimated tax payments and 2014 overpayment credited to 2015

6a

2,324

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

2,324

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

10

**Overpayment.** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid**. . . . .

10

1,377

11

Enter the amount of line 10 to be **Credited to 2015 estimated tax** ☒ 960 **Refunded** ☒

11

417

Part VII-A

Statements Regarding Activities

1a

During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .

1a

No

b

Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . .  
*If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.*

1b

No

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 ☒ \$ 0 (2) On foundation managers ☒ \$ 0

e

Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ☒ \$ 0

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

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 2015 or the taxable year beginning in 2015 (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? Website address ▶N/A	13	Yes	
14	The books are in care of ▶CATHERINE BLOOM Telephone no ▶(712) 722-1662 Located at ▶PO BOX 260 SIOUX CENTER IA ZIP+4 ▶51250			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —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 2015, 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? 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 ▶	16	Yes	No

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? <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? ( <b>Exception.</b> 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 <b>any</b> 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"/> Organizations relying on a current notice regarding disaster assistance check here. . . . . ▶ <input type="checkbox"/>	1b		
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 2015? . . . . .	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 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? . . . . . <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 <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions ). . . . .	2b		
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> 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? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2015 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 2015.</i> ) . . . . .	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	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

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	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table				

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	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances
NONE				

Total

number of other employees paid over \$50,000.

0

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

## Part IX-A Summary of Direct Charitable Activities

**Part IX-B Summary of Program-Related Investments** (see instructions)Form **990-PF** (2015)



**Part X**

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
<b>a</b>	Average monthly fair market value of securities. . . . .	<b>1a</b>	1,823,123
<b>b</b>	Average of monthly cash balances. . . . .	<b>1b</b>	13,881
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c). . . . .	<b>1d</b>	1,837,004
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets. . . . .	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d. . . . .	<b>3</b>	1,837,004
<b>4</b>	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	27,555
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 Enter here and on Part V, line 4	<b>5</b>	1,809,449
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	<b>6</b>	90,472

**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.)

<b>1</b>	Minimum investment return from Part X, line 6. . . . .	<b>1</b>	90,472
<b>2a</b>	Tax on investment income for 2015 from Part VI, line 5. . . . .	<b>2a</b>	947
<b>b</b>	Income tax for 2015 (This does not include the tax from Part VI ). . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b. . . . .	<b>2c</b>	947
<b>3</b>	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	<b>3</b>	89,525
<b>4</b>	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b>	0
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	89,525
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	<b>7</b>	89,525

**Part XII**

**Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
<b>a</b>	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	<b>1a</b>	119,480
<b>b</b>	Program-related investments—total from Part IX-B. . . . .	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required). . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule). . . . .	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	119,480
<b>5</b>	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). . . . .	<b>5</b>	947
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	<b>6</b>	118,533

**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 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				89,525
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only. . . . .			0	
b Total for prior years 20__ , 20__ , 20__		0		
3 Excess distributions carryover, if any, to 2015				
a From 2010. . . . .	4,913			
b From 2011. . . . .	77,043			
c From 2012. . . . .	79,855			
d From 2013. . . . .	82,391			
e From 2014. . . . .	96,320			
f Total of lines 3a through e. . . . .	340,522			
4 Qualifying distributions for 2015 from Part XII, line 4 ▶ \$ 119,480				
a Applied to 2014, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
c Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
d Applied to 2015 distributable amount. . . . .				89,525
e Remaining amount distributed out of corpus	29,955			
5 Excess distributions carryover applied to 2015 (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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	370,477			
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 amount—see instructions . . . . .		0		
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
f Undistributed income for 2016 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). . . . .	0			
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions). . .	4,913			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a . . . . .	365,564			
10 Analysis of line 9				
a Excess from 2011. . . . .	77,043			
b Excess from 2012. . . . .	79,855			
c Excess from 2013. . . . .	82,391			
d Excess from 2014. . . . .	96,320			
e Excess from 2015. . . . .	29,955			

If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling.	
--	--

Part XV

Supplementary Information(continued)

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<div><div>a</div><div><div><div>Paid during the year</div><div>See Additional Data TableSee Additional Data Table</div></div></div></div>				
<div>Total . . . . .</div>			<div>3a</div>	108,710
<div><div>b</div><div>Approved for future payment</div></div>				
<div>Total . . . . .</div>			<div>3b</div>	0

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions )
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount		
<b>1</b> Program service revenue						
<b>a</b> _____						
<b>b</b> _____						
<b>c</b> _____						
<b>d</b> _____						
<b>e</b> _____						
<b>f</b> _____						
<b>g</b> Fees and contracts from government agencies						
<b>2</b> Membership dues and assessments. . . . .						
<b>3</b> Interest on savings and temporary cash investments . . . . .						
<b>4</b> Dividends and interest from securities. . . .			14	28,110		
<b>5</b> Net rental income or (loss) from real estate						
<b>a</b> Debt-financed property. . . . .						
<b>b</b> Not debt-financed property. . . . .						
<b>6</b> Net rental income or (loss) from personal property . . . . .						
<b>7</b> Other investment income. . . . .			14	4,686		
<b>8</b> Gain or (loss) from sales of assets other than inventory . . . . .			18	70,560		
<b>9</b> Net income or (loss) from special events						
<b>10</b> Gross profit or (loss) from sales of inventory . . . . .						
<b>11</b> Other revenue <b>a</b> _____						
<b>b</b> _____						
<b>c</b> _____						
<b>d</b> _____						
<b>e</b> _____						
<b>12</b> Subtotal Add columns (b), (d), and (e). . .		0		103,356		0
<b>13 Total.</b> Add line 12, columns (b), (d), and (e). . . . . (See worksheet in line 13 instructions to verify calculations )			<b>13</b>		103,356	

[illegible]

**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.

	Yes	No
1a(1)		No
1a(2)		No
1b(1)		No
1b(2)		No
1b(3)		No
1b(4)		No
1b(5)		No
1b(6)		No
1c		No

[illegible]

**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.

\* \* \* \* \*

2016-05-12

\* \* \* \* \*

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 LAURIE HANSON	Preparer's Signature	Date 2016-05-12	Check if self-employed <input checked="" type="checkbox"/>	PTIN P00851848
Firm's name <input checked="" type="checkbox"/> EIDE BAILLY LLP			Firm's EIN <input checked="" type="checkbox"/> 45-0250958	
Firm's address <input checked="" type="checkbox"/> 200 EAST 10TH ST PO BOX 5125 SIOUX FALLS, SD 571175125			Phone no (605) 339-1999	

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
LARRY DEN HERDER	CHAIRMAN OF THE BOARD 0 01	0	0	0
PO BOX 260 SIOUX CENTER,IA 51250				
SCOTT PETERSON	CEO/PRESIDENT 0 01	0	0	0
PO BOX 260 SIOUX CENTER,IA 51250				
CATHERINE BLOOM	CFO/TREASURER 0 50	0	0	0
PO BOX 260 SIOUX CENTER,IA 51250				
KRISTI SEGAR	SECRETARY 0 10	0	0	0
PO BOX 260 SIOUX CENTER,IA 51250				
NANCY FRANKEN	DIRECTOR 0 03	0	0	0
PO BOX 260 SIOUX CENTER,IA 51250				
DAVID KRAHLING	DIRECTOR 0 06	0	0	0
PO BOX 260 SIOUX CENTER,IA 51250				
RYAN VISSER	DIRECTOR 0 06	0	0	0
PO BOX 260 SIOUX CENTER,IA 51250				
ERIC OORDT	DIRECTOR 0 03	0	0	0
PO BOX 260 SIOUX CENTER,IA 51250				
DAREN DIELEMAN	DIRECTOR 0 25	0	0	0
PO BOX 260 SIOUX CENTER,IA 51250				

**Form 990PF Part XV Line 1a - 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).**

LARRY DEN HERDER
SCOTT PETERSON



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
SC HOSPITAL 1101 9TH ST SE SIOUX CENTER,IA 51250	NONE	PC	CAPITAL FUND	30,000
CAMP HIGH HOPES 5804 CORRECTIONVILLE ROAD SIOUX CITY,IA 51106	NONE	PC	GENERAL FUND	18,000
FC2 - EAST RIVER BIBLE CAMP 27095 MARIAH PL HARRISBURG,SD 57032	NONE	PC	GENERAL FUND	500
FC2 - BOY SCOUTS - ORANGE CITY TROOP 104 OAK ST PO BOX 81 HOSPERS,IA 51238	NONE	PC	GENERAL FUND	500
FC2 - ALTAS OF ORANGE CITY 322 CENTRAL AVE NW ORANGE CITY,IA 51041	NONE	PC	GENERAL FUND	500
FC2 - CYSTIC FIBROSIS 6931 ARLINGTON ROAD BETHESDA,MD 20814	NONE	PC	GENERAL FUND	500
SC FIRE DEPARTMENT 335 1ST AVE NW SIOUX CENTER,IA 51250	NONE	GOV	GENERAL FUND	500
SACK PACK PROGRAM PO BOX 27 SIOUX CENTER,IA 51250	NONE	PC	GENERAL FUND	500
THE BRIDGE 400 CENTRAL AVE ORANGE CITY,IA 51041	NONE	PC	GENERAL FUND	500
RV FIRE DEPARTMENT 1700 11TH ST ROCK VALLEY,IA 51247	NONE	GOV	GENERAL FUND	500
NORTHWESTERN COLLEGE 101 7TH ST SW ORANGE CITY,IA 51041	NONE	PC	GENERAL FUND	5,000
SC COMMUNITY FOUNDATION 335 1ST AVE NW SIOUX CENTER,IA 51250	NONE	PC	GENERAL FUND	7,500
SC HOSPITAL 3 1101 9TH ST SE SIOUX CENTER,IA 51250	NONE	PC	GENERAL FUND	5,000
AMERICAN CANCER SOCIETY 225 N MICHIGAN AVE STE 1200 CHICAGO,IL 60601	NONE	PC	GENERAL FUND	250
AMERICAN HEART ASSN 38 19TH STREET SW SIOUX CENTER,IA 51250	NONE	PC	GENERAL FUND	175
<b>Total . . . . .</b>				108,710

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BETHANY CHRISTIAN SERVICES 123 ALBANY AVE SE APT SUITE 2 ORANGE CITY,IA 51041	NONE	PC	GENERAL FUND	8,750
BRIDGE OF HOPE 43 2ND ST NE SIOUX CENTER,IA 51250	NONE	PC	GENERAL FUND	1,255
CENTER FOR FINANCIAL EDUCATION 334 N MAIN AVE SIOUX CENTER,IA 51250	NONE	PC	GENERAL FUND	1,000
DORDT COLLEGE 498 4TH AVE NE SIOUX CENTER,IA 51250	NONE	PC	GENERAL FUND	1,200
HOPE HAVEN 1800 19TH ST ROCK VALLEY,IA 51247	NONE	PC	GENERAL FUND	1,800
IOWA COLLEGE FOUNDATION 505 5TH AVENUE STE 1034 DES MOINES,IA 50309	NONE	PC	GENERAL FUND	1,500
LANDSMEER GOLF CLUB 902 7TH ST NE ORANGE CITY,IA 51041	NONE	PC	CHARITY GOLF OUTING	150
MULTIPLE SCLEROSIS SOCIETY 801 4TH AVE SE SIOUX CENTER,IA 51250	NONE	PC	GENERAL FUND	500
NCC FOUNDATION 603 WEST PARK STREET SHELDON,IA 51201	NONE	PC	GENERAL FUND	1,875
RONALD MCDONALD HOUSE 26345 NETWORK PLACE CHICAGO,IL 60673	NONE	PC	GENERAL FUND	250
SC FIRE DEPARTMENT 335 1ST AVE NW SIOUX CENTER,IA 51250	NONE	GOV	GENERAL FUND	5,000
SC KIWANIS 540 NORTH MAIN AVE SIOUX CENTER,IA 51250	NONE	PC	GENERAL FUND	500
SC LEADERCAST 303 N MAIN AVE SIOUX CENTER,IA 51250	NONE	PC	GENERAL FUND	1,000
SCOUTS (BOY) MID AMERICA COUNCIL 12401 W MAPLE ROAD OMAHA,NE 68164	NONE	PC	GENERAL FUND	600
SCOUTS (BOY) SIOUX CENTER 2844 440TH ST MAURICE,IA 51036	NONE	PC	GENERAL FUND	1,300
<b>Total . . . . .</b>			<b>3a</b>	108,710

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SIOUX CENTER HOSPITAL 1101 9TH ST SE SIOUX CENTER,IA 51250	NONE	PC	GENERAL FUND	900
SIOUX CENTER SCHOOL 550 9TH ST NE SIOUX CENTER,IA 51250	NONE	GOV	FIRST TECH CHALLENGE TEAM/SC ROBOTICS	500
SIOUX COUNTY TRAILS 3206TH ST NW SIOUX CENTER,IA 51250	NONE	PC	GENERAL FUND	1,000
STEPPING STONES PRESCHOOL 1124 7TH AVE NE SIOUX CENTER,IA 51250	NONE	PC	GENERAL FUND	1,255
TRANSPORT FOR CHRIST 4209 N JANS DRIVE SIOUX FALLS,SD 57107	NONE	PC	GENERAL FUND	200
VILLAGE NORTHWEST UNLIMITED 330 VILLAGE CIR SHELDON,IA 51201	NONE	PC	GENERAL FUND	250
SDSU SCHOLARSHIP FUND PO BOX 511 BROOKINGS,SD 57007	NONE	PC	SCHOLARSHIP FUND	1,000
UNIVERSITY OF NE - KEARNEY 905 W 25TH ST KEARNEY,NE 68849	NONE	PC	SCHOLARSHIP FUND	1,000
SD STATE SCHOOL OF MINES & TECHNOLOGY 501 E ST JOSEPH STREET RAPID CITY,SD 57701	NONE	PC	SCHOLARSHIP FUND	1,000
SOUTHEAST TECHNICAL INSTITUTE SCHOLARSHIP 2320 N CAREER AVE SIOUX FALLS,SD 57107	NONE	PC	SCHOLARSHIP FUND	2,000
KEATON DE JONG 1520 N MAIN SIOUX CENTER,IA 51250	EMPLOYER	I	EMPLOYEE CHILD SCHOLARSHIP	500
RYAN HAACK 1520 N MAIN SIOUX CENTER,IA 51250	EMPLOYER	I	EMPLOYEE CHILD SCHOLARSHIP	500
ERIC KEIZER 1520 N MAIN SIOUX CENTER,IA 51250	EMPLOYER	I	EMPLOYEE CHILD SCHOLARSHIP	500
ALANA NELSON 1520 N MAIN SIOUX CENTER,SD 51250	EMPLOYER	I	EMPLOYEE CHILD SCHOLARSHIP	500
LINDSEY TAYLOR 1520 N MAIN SIOUX CENTER,IA 51250	EMPLOYER	I	EMPLOYEE CHILD SCHOLARSHIP	500
<b>Total . . . . .</b>				108,710

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
KYLE VANDER PLAATS 1520 N MAIN SIOUX CENTER,IA 51250	EMPLOYER	I	EMPLOYEE CHILD SCHOLARSHIP	500
<b>Total . . . . .</b>				<b>3a</b> 108,710

TY 2015 Accounting Fees Schedule

**Name:** INTERSTATES FOUNDATION

**EIN:** 42-1480887

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	725	0	0	725

## TY 2015 Investments Corporate Bonds Schedule

**Name:** INTERSTATES FOUNDATION

**EIN:** 42-1480887

Name of Bond	End of Year Book Value	End of Year Fair Market Value
GOLDMAN SACHS GROUP MEDIUM TERM	10,000	10,290
AMERICAN CENTURY HIGH YIELD FUND #101	17,529	14,739
FEDERATED TOTAL RET BD FD IS #328	37,882	36,783
FIDELITY ADVISOR STRATEGIC INCOME I	27,343	25,036
FIDELITY ADVISOR REAL EST INC FD 2227	32,719	33,118
LOOMIS SAYLES INVESTMENT GRADE BOND FD	22,733	20,153
OPPENHEIMER INT'L BOND FUND Y SHARES	43,633	38,846
OPPENHEIMER SR FLOATING RATE Y	22,128	20,068
PIMCO LOW DURATION INST'L CLASS	32,575	30,463
T ROWE PRICE HIGH-YIELD	11,447	9,939
RIDGEWORTH SEIX US GOV'T SEC ULTRA SHORT	15,245	15,140
AMERICAN CENTURY HIGH YIELD FUND #101	1,783	1,496
OPPENHEIMER INT'L BOND FUND Y SHARES	1,098	924
PIMCO LOW DURATION INST'L CLASS	3,229	3,046
VANGUARD SHORT TERM INFL PROTECTED SEC	4,538	4,360

## TY 2015 Investments Corporate Stock Schedule

**Name:** INTERSTATES FOUNDATION

**EIN:** 42-1480887

Name of Stock	End of Year Book Value	End of Year Fair Market Value
AMG YACKTMAN SERVICE	52,352	53,131
AMCAP FUND F SHARES #402	48,900	61,587
FEDERATED MID CAP INDEX INST'L SHARES	183,711	183,275
FIDELITY LOW PRICED STOCK #316	82,496	98,797
GROWTH FUND OF AMERICA F SH FD 405	60,522	85,384
HARBOR CAPITAL APPRECIATION FUND #012	62,324	84,217
MFS VALUE I SHARES FUND #893	108,280	154,497
VANGUARD EQUITY INCOME ADM CLASS	74,803	83,830
VANGUARD SMALL CAP INDEX ADM SH	140,406	148,656
AMERICAN CAPITAL INC BUILDER F SH FD 412	23,971	23,766
AMERICAN CAP WORLD GR & INC F SH FD 433	38,124	42,136
AMERICAN NEW PERSPECTIVE F SH FD 407	73,552	95,718
OPPENHEIMER DEVELOPING MKTS Y SH FD 788	24,983	24,844
FIDELITY LOW PRICED STOCK #316	8,940	10,602
GROWTH FUND OF AMERICA F SH FD 405	5,297	6,274
HARBOR CAPITAL APPRECIATION FUND #012	5,424	6,780
MFS VALUE I SHARES FUND #893	5,769	7,375
VANGUARD SMALL CAP INDEX ADM SH	8,859	9,173
AMERICAN CAP WORLD GR & INC F SH FD 433	2,671	2,838
AMERICAN NEW PERSPECTIVE F SH FD 407	4,698	5,850
OPPENHEIMER DEVELOPING MKTS Y SH FD 788	787	693

# TY 2015 Investments Government Obligations Schedule

**Name:** INTERSTATES FOUNDATION

**EIN:** 42-1480887

**US Government Securities - End of  
Year Book Value:**

26,902

**US Government Securities - End of  
Year Fair Market Value:**

26,275

**State & Local Government  
Securities - End of Year Book  
Value:**

0

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

0



**TY 2015 Investments - Other Schedule****Name:** INTERSTATES FOUNDATION**EIN:** 42-1480887

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
AMERICAN BALANCED F SHARES FUND 411	AT COST	68,152	90,584
PEOPLES BANK 0.94% NONCALLABLE 30 MO.	AT COST	17,393	17,393
PEOPLES BANK PLATINUM MONEY MARKET	AT COST	303,217	303,217
DEVONSHIRE REIT INC	AT COST	38,986	44,684
AMERICAN BALANCED F SHARES FUND 411	AT COST	3,609	5,844
PEOPLES BANK PLATINUM MONEY MARKET	AT COST	7,009	7,009

TY 2015 Legal Fees Schedule

**Name:** INTERSTATES FOUNDATION

**EIN:** 42-1480887

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	45	0	0	45

TY 2015 Other Decreases Schedule

**Name:** INTERSTATES FOUNDATION

**EIN:** 42-1480887

Description	Amount
RETURN OF CAPITAL	2,455

TY 2015 Other Expenses Schedule

**Name:** INTERSTATES FOUNDATION

**EIN:** 42-1480887

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EDUCATION EXPENSE	10,000	0	0	10,000

TY 2015 Other Income Schedule

**Name:** INTERSTATES FOUNDATION

**EIN:** 42-1480887

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
MISCELLANEOUS INCOME	4,686	4,686	

TY 2015 Other Professional Fees Schedule

**Name:** INTERSTATES FOUNDATION

**EIN:** 42-1480887

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT MANAGEMENT FEES	8,645	8,645	0	0

**TY 2015 Taxes Schedule**

**Name:** INTERSTATES FOUNDATION

**EIN:** 42-1480887

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAXES	2,663	0	0	0

<b>Schedule B</b> (Form 990, 990-EZ, or 990-PF)  Department of the Treasury Internal Revenue Service	<b>Schedule of Contributors</b>  ▶ <b>Attach to Form 990, 990-EZ, or 990-PF.</b>  ▶ <b>Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <u>www.irs.gov/form990</u>.</b>	OMB No 1545-0047  <b>2015</b>

<b>Name of the organization</b> INTERSTATES FOUNDATION	<b>Employer identification number</b> 42-1480887
---	---

Organization type (check one)

<b>Filers of:</b>	<b>Section:</b>
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)( ) (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 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 other 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<sup>1</sup>/<sub>3</sub>% 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 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).



<b>Name of organization</b> INTERSTATES FOUNDATION	<b>Employer identification number</b> 42-1480887
---	---

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	HARBOR GROUP INC	\$ 103,554	Person <input checked="" type="checkbox"/>
	1520 N MAIN		Payroll <input type="checkbox"/>
	SIOUX CENTER, IA 51250		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	INTERSTATES CONSTRUCTION SERVICES INC	\$ 72,000	Person <input checked="" type="checkbox"/>
	1520 N MAIN		Payroll <input type="checkbox"/>
	SIOUX CENTER, IA 51250		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	INTERSTATES CONTROL SYSTEMS INC	\$ 33,000	Person <input checked="" type="checkbox"/>
	444 12TH ST NE		Payroll <input type="checkbox"/>
	SIOUX CENTER, IA 51250		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	INTERSTATES ENGINEERING INC	\$ 18,000	Person <input checked="" type="checkbox"/>
	538 12TH ST NE		Payroll <input type="checkbox"/>
	SIOUX CENTER, IA 51250		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )

<b>Name of organization</b> INTERSTATES FOUNDATION	<b>Employer identification number</b> 42-1480887
---	---

**Part II** **Noncash Property**  
(see instructions) Use duplicate copies of Part 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 Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

<b>Name of organization</b> INTERSTATES FOUNDATION	<b>Employer identification number</b> 42-1480887
---	---

**Part III** *Exclusively* religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed

(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	--		
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	--		
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	--		
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	--		