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Form **990-PF**

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 separate instructions is at www.lrs.gov/form990pf.

pen to Public Inspection

Depar	tment	of the Treasury				ocial security numbers or				2010
Intern	al Reve	enue Service			out Forr	n 990-PF and its separate			s.gov/torm990pt.	Open to Public Inspection
For calendar year 2015 or tax year beginning , and endin				noing	A F					
Nan	ne of	foundation							A Employer identification	number
TT	ਰਹਾ	ארכ כנוא הדתא	DT 12 12 /	ATTATT:	אחד	ON			42-6430625	
		RIG CHARITA d street (or P O box number					. 	Room/suite	B Telephone number	·
) KEHL CT	ii iidii is iiot c	ion voi ou		200,000,			(563)556-0	1434
		wn, state or province, co	ountry and 7	ID or fo	reian n	nstal code		<u> </u>	C if exemption application is p	
-			2003	.11 01 10	n cigii p	ostar code			o il exemption application is p	perioding, check flere
		all that apply:	Initial retu	rn		Initial return of a f	ormer public o	harity	D 1. Foreign organizations	s, check here
•	110011	ш. спас арргу. — <u>С</u>	Final retur			Amended return				
		X	Address c	hange		Name change			Foreign organizations me check here and attach co	eeting the 85% test, proputation
H C	heck	type of organization:			c)(3) ex	empt private foundation			E If private foundation sta	tus was terminated
	_	ction 4947(a)(1) nonexe			$\overline{}$	Other taxable private found	ation		under section 507(b)(1)	
I Fa		rket value of all assets at				ng method: X Cash	Acci	ual	F If the foundation is in a	60-month termination
(fr	om F	Part II, col. (c), line 16)				her (specify)			under section 507(b)(1)	
	\$					mn (d) must be on cash	basis)		-	
Pa	<u>rt I</u>	Analysis of Revenue a (The total of amounts in conecessarily equal the amounts)	i nd Expense lumns (b), (c), a ints in column	\$ ind (d) ma (a))	ay not	(a) Revenue and expenses per books		ivestment ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, gra	nts, etc., rec	eived		37,376.				
			bon is not required		Sch B					
	3	Interest on savings and tem cash investments	porary			2.		2.		STATEMENT 1
	4	Dividends and interest f	rom securitie	es					RECEIVE	
	5a	Gross rents								78
	Ь	Net rental income or (loss)					<u> </u>		⊅) \$\ MΔY 6 ZΩπ	
ā	6a	6a Net gain or (loss) from sale of assets not on line 10 B Gross sales price for all assets on line 6a						10	B) MAY TO 504	\ \dot{\dot{\dot{\dot{\dot{\dot{\dot{
ē	b						ļ		CONTAIN	
Revenue	7	Capital gain net income (from		?)				0 \	OGDEN, U	9 ()
	8	Net short-term capital g Income modifications	am							
	10a	Gross sales less returns and allowances								
	Ι.	Less Cost of goods sold								
	!	Gross profit or (loss)								
	11	Other income				226,206.		6,206.	0.	STATEMENT 2
	12	Total. Add lines 1 throu	ugh 11			_263,584.	22	6,208.	0.	
	13	Compensation of officers, d		es, etc		0.		0.	0.	0
	14	Other employee salaries					 			
(<u>P</u>	15	Pension plans, employe		m.//m	2	120.	ļ	120.	0.	
	16a	Legal fees		TMT TMT	3 4	4,900.		4,900		0
ക <mark>ട്ട</mark>	0	Accounting fees Other professional fees		TMT		30,000		0,000		0
∞ δ	17	Interest	Б	1111	J	221,195.	22	1,195.	0.	0
Operating and Administrative Expenses	18	Taxes					1			
ist <u>≅</u>	19	Depreciation and deplet	tion							
) Ę	20	Occupancy								
8 8	21	Travel, conferences, an	d meetings							
and	22	Printing and publication							ļ	
b	23	Other expenses	S	TMT	6	2,526.		2,526.	0.	0.
rati	24	Total operating and ad				050 541		0 544		
ea C		expenses. Add lines 13	-			258,741.	25	8,741	0.	<u>0.</u>
J	25	Contributions, gifts, gra				51,725.				51,725
	26	Total expenses and dis	spursements	5.		310,466	25	8,741	. o.	51,725
	27	Add lines 24 and 25 Subtract line 26 from li	ne 12.			310,400	4.5	, O , / ' ± 1 .	· · · · · · · · · · · · · · · · · · ·	JI,145
		Excess of revenue over exp		olireemor	nte	-46,882	.]			
)	Net investment income						0 .		
		Adjusted net income (0.	

LHA For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2015) HERRIG CHARITABLE FOUNDATION 42						Page 2
D	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year		of year	
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Marke	
	1	Cash - non-interest-bearing	5,466.	338	•	338.
		Savings and temporary cash investments				
	3	Accounts receivable ►				
		Less: allowance for doubtful accounts ▶		<u> </u>		
	4	Pledges receivable ►				
		Less: allowance for doubtful accounts ▶				
		Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons				
	7	Other notes and loans receivable				
		Less: allowance for doubtful accounts				
şţs	8	Inventories for sale or use			 	
Assets	9	Prepaid expenses and deferred charges			_	
⋖	10a	Investments - U.S. and state government obligations				
	b	Investments - corporate stock			<u> </u>	
		Investments - corporate bonds			ļ	
	11	Investments - land, buildings, and equipment basis				
		Less accumulated depreciation				
	12	Investments - mortgage loans				
	13	Investments - other				
	14	Land, buildings, and equipment basis				
		Less accumulated depreciation	4 400 054	4 070 074	-	
		Other assets (describe STATEMENT 8)	1,432,054.	1,259,376	•	0.
	16	Total assets (to be completed by all filers - see the	4 405 500	4 050 544		
		instructions. Also, see page 1, item I)	1,437,520.	1,259,714	•	338.
	17	Accounts payable and accrued expenses			-	
	18	Grants payable			_	
es	19	Deferred revenue	1 006 540	1 006 084	4	
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	1,826,549.	1,806,974		
jab	21	Mortgages and other notes payable	4,534,517.	4,516,828	<u>•</u>	
_	22	Other liabilities (describe			-	
			6 361 066	<i>c</i> 222 002		
	23	Total liabilities (add lines 17 through 22)	6,361,066.	6,323,802	릭	
		Foundations that follow SFAS 117, check here				
Ş	l	and complete lines 24 through 26 and lines 30 and 31.				
nce	24	Unrestricted			\dashv	
<u>a</u>	25	Temporarily restricted			-	
Q B	26	Permanently restricted Foundations that do not follow SFAS 117, check here			-	
Ë		,				
<u>p</u>	0.7	and complete lines 27 through 31.	-4,923,546.	-5,064,088		
Net Assets or Fund Balances	27	Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0	- 1	
SS (28		0.	0	4	
et A	29	Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances	-4,923,546.	-5,064,088	4	
ž	30	Total net assets of fund balances	-4,723,340.	-3,004,000	4	
	24	Total lightilising and not constallight halanges	1,437,520.	1,259,714		
=		Total liabilities and net assets/fund balances		1,233,114	•	
F	<u>art</u>	III Analysis of Changes in Net Assets or Fund Ba	lances			
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line 3	0	· - · · · ·	Ī	
•		st agree with end-of-year figure reported on prior year's return)		1	-4,923	,546.
2	•	r amount from Part I, line 27a	2		,882.	
		r increases not included in line 2 (itemize)	TEMENT 7		,974.	
		lines 1, 2, and 3		4		
		eases not included in line 2 (itemize) LIFE INSURANCE	PREMIUMS PAID			,634.
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, coli		6		
						PF (2015)

523511 11-24-15

(a) List and des	cribe the k	osses for Tax on In ind(s) of property sold (e.g. or common stock, 200 shs	, real estate,		(b) Hov P - P D - C	w acquired Purchase Donation	(c) Date (mo., c	acquired day, yr.)	(d) Date sold (mo., day, yr.)
<u> 1a</u>									
b NO	NE				<u> </u>			_	·
<u>c</u>					 				
					-				
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis expense of sale				Gain or (loss) s (f) minus (
<u>a</u>									
<u>b</u>						-			
<u>c</u>							_		 ·
e e					-				
Complete only for assets show	ıng gain in	column (h) and owned by t	he foundation	on 12/31/69			(I) Gains ((Col. (h) gain	minus
(i) F.M.V. as of 12/31/69	T .	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (1) col. (1), if any			òl. (k), but	not less than (from col. (n -0-) or
a									
<u>b</u>									
<u>c</u>							<u> </u>		
_d									
<u>e</u>	·	C If agus, also anter	un Dort I lino	7	\neg				<u></u>
2 Capital gain net income or (net o	·	. (,		7	<u> </u>	2			-
3 Net short-term capital gain or (leaf gain, also enter in Part I, line & If (loss), enter -0- in Part I, line	3, column (d (6):		}	3			
Part V Qualification	Under S	Section 4940(e) for	Reduced	Tax on Net	Inves	stment In	come		
If section 4940(d)(2) applies, leave Was the foundation liable for the se If "Yes," the foundation does not qu Enter the appropriate amount in	ction 4942 alify under	tax on the distributable am section 4940(e). Do not co	mplete this pa	ırt.					Yes X No
(a) Base period years Calendar year (or tax year begini	ning in)	(b) Adjusted qualifying dist	tributions	Net value of no	(c) oncharita	ble-use asset	s	Distrib (col. (b) div	(d) ution ratio ided by col. (c))
2014		3	0,956.		-2,6	587,15			.000000
2013	_		<u>5,675.</u>			2 47,07			.000000
2012			3,819.			381,13		-	.000000
2011			3,251. 8,123.			387,80 543,19			.000000
2010		1.4	0,143.		-4,	<u>343,13</u>	·		.000000
2 Total of line 1, column (d)3 Average distribution ratio for the	e 5-vear ha	ise period - divide the total o	on line 2 by 5	or by the number	r of years		2		.000000
the foundation has been in exist			,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	or by the names.	or your	•	3		.000000
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5				4		3,067,620.			
5 Multiply line 4 by line 3							5		0.
6 Enter 1% of net investment inco	me (1% o	f Part I, line 27b)					6		0.
7 Add lines 5 and 6							7		0.
8 Enter qualifying distributions from Part XII, line 4					8_		51,725.		
If line 8 is equal to or greater the See the Part VI instructions.	an line 7, c	neck the box in Part VI, line	10, and comp	olete that part usir	ng a 1% t	tax rate.			

	990-PF (2015) HERRIG CHARITABLE FOUNDATION 42 ort VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	-643062 - see instr	5 ructic	Page 4
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%			0.
	of Part I, line 27b			
	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-)	 		<u>0.</u>
-	Add lines 1 and 2			0.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	 		<u>c.</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	 		<u> 0 </u>
-	Credits/Payments:			
	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 68.	İ		
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld 6d			
	Total credits and payments. Add lines 6a through 6d			<u>68.</u>
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			<u>68.</u>
	Enter the amount of line 10 to be: Credited to 2016 estimated tax ► 68 . Refunded ► 11 rt VII-A Statements Regarding Activities			<u>0.</u>
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Vac	No
ıa	any political campaign?	10		_
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	1a 1b	+	X
	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.			
	Did the foundation file Form 1120-POL for this year?	10		x
	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.			
۵	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?	2		x
	If "Yes," attach a detailed description of the activities.			
	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		х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	X	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	X	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or		1	
	• 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_	┷	X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7_	X	<u> </u>
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)		1	
	IA (5 con 25 th the contract of the contract o			
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	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			77
40	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	+	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	M. PF	
		Form 99	O-LL	(2015)

	Tre vii A Otatements negarating Activities (continued)			
		i	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	١		
40	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		_X_
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	10		7.7
12	If "Yes," attach statement (see instructions) Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	12	Х	<u> </u>
13	Website address ► N/A	13		<u> </u>
14	The books are in care of ► LARRY HERRIG Telephone no. ► (563)!	556-	043	4
17	Located at ► 1540 KEHL CT, DUBUQUE, IA ZIP+4 ►52		<u> </u>	-
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			$\overline{\Box}$
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	}		
	foreign country	<u> </u>		
P	art 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.	<u></u>	Yes	<u>No</u>
18	a During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No			
	a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X 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)?			
	(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.)			
	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)? N/A	1b		
	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 2015?	1c		<u>X</u> _
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?		Ì	
	If "Yes," list the years - ,,,,,,,,,			
	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.) N/A	2b		
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
_	<u> </u>			
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year? Yes X No		ľ	
	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, 1069; (2) the lance of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	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 2015) N/A	3ь		
A	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	-+	<u>x</u>
	b Did the foundation invest during the year any amount in a mariler that would jeopardize its charitable purposes. Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	74		
	had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		X
_		rm 99 0	-PF	
			٧.	-,

orm 990-PF (2015) HERRIG CHARITABLE FOUNDA			42-64306	525	Page 6		
Part VII-B Statements Regarding Activities for Which I 5a During the year did the foundation pay or incur any amount to:	-orm 4/20 May be r	Requirea (contin	ued)				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section(2) Influence the outcome of any specific public election (see section 4955); or any voter registration drive?	r to carry on, directly or indire	ectly,	es X No				
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y6	es X No				
(4) Provide a grant to an organization other than a charitable, etc., organizatio 4945(d)(4)(A)? (see instructions)	ii described iii section	Ye	es X 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 X No							
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		in Regulations	37./3	.			
section 53.4945 or in a current notice regarding disaster assistance (see instru Organizations relying on a current notice regarding disaster assistance check h			N/A	5b			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		ined					
expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.494:	N	I/A □ Y€	es 🔲 No				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	• •						
a personal benefit contract?		Ye	s X No				
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p If "Yes" to 6b, file Form 8870.	ersonal benefit contract?			6b	<u> </u>		
7a At any time during the tax year, was the foundation a party to a prohibited tax s		L Ye	s X No				
<u>b If "Yes," did the foundation receive any proceeds or have any net income attribu</u> Part VIII Information About Officers, Directors, Trust		nogoro Highly	N/A	7b			
Paid Employees, and Contractors	ees, Foundation Ma	magers, mgm	,				
List all officers, directors, trustees, foundation managers and their	compensation.						
(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	acco	Expense unt, other wances		
LARRY HERRIG	TRUSTEE]					
L540 KEHL CT	2 00				•		
OUBUQUE, IA 52003	2.00	0.	_0.	-	0.		
				<u> </u>			
				1			
Compensation of five highest-paid employees (other than those inc	luded on line 1). 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	accou	Expense unt, other wances		
NONE							
			_,	ļ			
				 -			
				†			
Total number of other employees paid over \$50,000			<u> </u>	000 =	0		
			Form	990-P	PF (2015)		

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NC	ONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Fotal number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in number of organizations and other beneficiaries served, conferences convened, research papers produced		Expenses
ı N/A		
2		
1		
Doubly Dio		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines	1 and 2	A
N/A	i aliu z.	Amount
N/A		
All other program-related investments. See instructions.		
Total. Add lines 1 through 3	•	0.
Total most modern		Form 990-PF (2015)

<u>. </u>	Minimum Investment Return (All domestic foundations must complete this part. Foreign for	indations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	<u>643,333</u> .
b	Average of monthly cash balances	1b	2,791.
C	Fair market value of all other assets	1c	756,369.
d	Total (add lines 1a, b, and c)	1d	1,402,493.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0	4	
2	Acquisition indebtedness applicable to line 1 assets	2	4,516,828.
3	Subtract line 2 from line 1d	3	-3,114,335.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	-46,715.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	-3,067,620.
<u> 6</u>	Minimum investment return. Enter 5% of line 5	6	-153,381.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	-153,381.
2a	Tax on investment income for 2015 from Part VI, line 5		
Ь	Income tax for 2015. (This does not include the tax from Part VI.)]	
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	0.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	0.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	0.
P	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	51,725.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	·
b	Cash distribution test (attach the required schedule)	3b	<u> </u>
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	51,725.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		,
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	51,725.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies fo	r the section

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				0.
2 Undistributed income, if any, as of the end of 2015			•	
a Enter amount for 2014 only			0.	
b Total for prior years:		0	1	
3 Excess distributions carryover, if any, to 2015:		0.		
1 I				
a From 2010 148,123.				
b From 2011 403,585. c From 2012 445,417.				
c From 2012 445,417. d From 2013 85,675.				
e From 2014 30,956.				
f Total of lines 3a through e	1,113,756.			
4 Qualifying distributions for 2015 from	1,113,130.			
Part XII, line 4: \$ 51,725.				
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				0.
e Remaining amount distributed out of corpus	51,725.		-	<u> </u>
5 Excess distributions carryover applied to 2015	0.			0.
(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:	4 455 404			
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,165,481.			
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		0.		
assessed		U•		
d Subtract line 6c from line 6b. Taxable		0.		
amount - see instructions		0.	·	
e Undistributed income for 2014. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract			0.	
lines 4d and 5 from line 1. This amount must				
be distributed in 2016				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	148,123.			
9 Excess distributions carryover to 2016.				
Subtract lines 7 and 8 from line 6a	1,017,358.			
10 Analysis of line 9:				
a Excess from 2011 403,585.				
b Excess from 2012 445,417.				
c Excess from 2013 85,675.				
d Excess from 2014 30,956.				
e Excess from 2015 51,725.				
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Form **990-PF** (2015

	CHARITABLE			42-64	30625 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part VII-	A, question 9)	N/A	
1 a If the foundation has received a ruling of	or determination letter that	t it is a private operating			
foundation, and the ruling is effective fo			▶		_
b Check box to indicate whether the found		ng foundation described ii		4942(j)(3) or49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	4110044	Prior 3 years	(4) 0040	
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
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		1			
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the	<u> </u>			-	
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)		ļ		. 	
(3) Largest amount of support from					
an exempt organization					· · · · · · · · · · · · · · · · · · ·
(4) Gross investment income	······································	de Abie need enly	if the foundation	- had 65 000 ar	
Part XV Supplementary Info			if the foundatio	n nad \$5,000 or m	ore in assets
		i dollorio.j		-	
 Information Regarding Foundation List any managers of the foundation will 		than 20/, of the total cont	ributions received by th	na faundation hafara the alo	an of any toy
year (but only if they have contributed			noutions received by ti	ie iounidation before the cio	se of ally tax
NONE	, , , ,		,		
b List any managers of the foundation w	no own 10% or more of the	ne stock of a corporation (or an equally large por	tion of the ownership of a p	artnership or
other entity) of which the foundation ha			(or an expense) range per		artificing of
NONE					
2 Information Regarding Contribute	tion. Grant. Gift. Loan	, Scholarship, etc., Pr	ograms:		
	only makes contributions	to preselected charitable	organizations and does	s not accept unsolicited requ	
a The name, address, and telephone nun					, u.
a The hame, address, and telephone hun	inei oi e-man address or	the person to whom apph	cations should be audi	e55eu.	
SEE STATEMENT 9					
b The form in which applications should	be submitted and informa	ation and materials they sh	nould include:		
c Any submission deadlines:	-			J. 100	
d Any restrictions or limitations on award	ds, such as by geographic	cal areas, charitable fields,	kınds of institutions, o	r other factors:	AUGI
523801 11-24-15					Form 990-PF (2015)

Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or Foundation show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year ALZHEIMER'S ASSOCIATION PC CHARITABLE 255 N. MICHIGAN AVE., FL 17 CHICAGO IL 60601-7633 1,000. AMERICAN SOCIETY FOR THE PREVENTION PC CHARITABLE OF CRUELTY TO ANIMALS (ASPCA) 424 E 92ND ST NEW YORK, NY 10128 25. AMERICAN YOUTH SOCCER ORGANIZATION PCCHARITABLE 19750 S. VERMONT AVE., SUITE 200 TORRANCE CA 90502 100. BETHANY HOME PC CHARITABLE 1005 LINCOLN AVE DUBUQUE IA 52001 500. BOYS & GIRLS CLUB OF GREATER DUBUQUE PC CHARITABLE 1299 LOCUST ST DUBUOUE IA 52001 18,962. SEE CONTINUATION SHEET(S) ▶ 3a Total 51 725 **b** Approved for future payment NONE

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Total

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▶ 3b

Part XVI-A **Analysis of Income-Producing Activities**

	Unrelated b	uainaga inagama			
Enter gross amounts unless otherwise indicated.	(a) Business	usiness income (b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		code	7WHOUNT	Tariotici indone
b	_				
c					_ _ _
d					
е					
	-		 		·
f			- 		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	2.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:		1.2.12			
a Debt-financed property					
b Not debt-financed property					

6 Net rental income or (loss) from personal					
property					
7 Other investment income			14	226,206.	······································
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:			i i		
	-				
	-				
c					· · · · · · · · · · · · · · · · · · ·
d	_				
e					
12 Subtotal. Add columns (b), (d), and (e)).	226,208.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	226,208.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Accom	inlichment of	Evamnt Di	moses	
rait AVI-B Relationship of Activities	to the Accom	ibusimient or	Exemptifu	ii þoses	
Line No. Explain below how each activity for which in	come is reported in c	olumn (e) of Part XV	I-A contributed	importantly to the accomp	lishment of
the foundation's exempt purposes (other tha				portaining to this accomp	
and foundation of oxionipripal passes (outs) and	in by providing land.		•		
		-			

Page 13 Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of Yes No 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) X (2) Other assets 1a(2) **b** Other transactions: X (1) Sales of assets to a noncharitable exempt organization 1b(1) X (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets X 1b(3) (4) Reimbursement arrangements X 1b(4) X (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations X 1b(6) Sharing of facilities, equipment, mailing lists, other assets, or paid employees 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. (c) Name of noncharitable exempt organization (b) Amount involved (a) Line no (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A May the IRS discuss this return with the preparer shown below (see instr)? ectaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Sign Here TRUSTEE X Yes Signature of officer or trustee Title Date Print/Type preparer's name Preparer's signature Date Check | PTIN self- employed KARLA A HAGERTY. Paid 05/10/16 KARLA A HAGERTY, P00436540 **Preparer** Firm's name ► HONKAMP KRUEGER & CO., P.C. Firm's EIN ► 42-0946155 **Use Only** Firm's address ► P O BOX 699

DUBUOUE, IA 52004-0699

Phone no. (563)556-0123

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

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

2015

Name of the organization

Employer identification number

	HERRIG CHARITABLE FOUNDATION	42-6430625					
Organization type (che	ck one):						
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
Note. Only a section 50 General Rule	ion is covered by the General Rule or a Special Rule. 01(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Specia						
•	cation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions total any one contributor. Complete Parts I and II. See instructions for determining a contribution.						
Special Rules							
sections 509(a	cation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% suppa)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 1 abutor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the arr 0-EZ, line 1. Complete Parts I and II	6a, or 16b, and that received from					
year, total con	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
year, contribu is checked, er purpose Do n	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						
but it must answer "No	ion that is not covered by the General Rule and/or the Special Rules does not file Schedu o" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on it meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	•					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Employer identification number

HERRIG CHARITABLE FOUNDATION

42-6430625

Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	onal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CHARLES AND LINDA GIESE 940 PRINCE PHILLIP DRIVE DUBUQUE, IA 52003	- \$\$.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	MARJORIE HERRIG 3388 KENNEDY CIRCLE DUBUQUE, IA 52002	\$\$ <u>26,376.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- _	Person Payroll Onncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		_ _ \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		_ _ \$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

HERRIG CHARITABLE FOUNDATION

42-6430625

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

Name of orga	anization			Employer identification number				
HERRIC	CHARITABLE FOUNDATION	ī		42-6430625				
Part III	Exclusively religious, charitable, etc., con	tributions to organizations described	d in section 501(c)(7), (8), o	r (10) that total more than \$1,000 for				
	the year from any one contributor. Complete completing Part III, enter the total of exclusively religion	us, charitable, etc., contributions of \$1,000 c	DWING TIME ENTRY. For organization or less for the year (Enterthis info onc	ns e) ► \$				
(a) No.	Use duplicate copies of Part III if addition	nal space is needed.						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	(d) Description of how gift is held				
		 						
		(e) Transfer of gi	ft					
	Transference name address a	and 71D + 4	Dolotionahin of two					
-	Transferee's name, address, a	IIId ZIP + 4	Relationship of transferor to transferee					
		-						
(a) No. from	(h) Diverges of with	(a) Upp of sift	(d) Door					
Part I	(b) Purpose of gift	(c) Use of gift	(a) Desc	cription of how gift is held				
_		(a) To a set						
		(e) Transfer of gi	π					
<u></u>	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee					
								
			1.7					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
Parti								
	(e) Transfer of gift							
	_							
-	Transferee's name, address, a	and ZIP + 4	Relationship of tra	nsferor to transferee				
		i						
(a) No.								
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held				
	(e) Transfer of gift							
	Transferee's name, address, a	and ZIP +_4	Relationship of tra	nsferor to transferee				
Γ								
			Oak adula i	P /Farm 000 000 F7 ar 000 DE) /004				

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient CAMP ALBRECHT ACRES PC CHARITABLE 14837 SHERRILL ROAD SHERRILL IA 52073 500. CATHOLIC CHARITIES PC CHARITABLE 1229 MT LORETTA AVE DUBUQUE, IA 52003 100. COMMUNITY FOUNDATION OF GREATER PC CHARITABLE DUBUQUE 700 LOCUST ST DUBUQUE IA 52001 3,400. COVENANT HOUSE PC CHARITABLE 461 EIGHTH AVE NEW YORK, NY 10001 75. PC DIVINE WORD COLLEGE CHARITABLE 102 JACOBY WALKWAY EPWORTH IA 52045 25. DOCTORS WITHOUT BORDERS PC CHARITABLE 333 7TH AVENUE NEW YORK NY 10001-5004 50. DUBUQUE ARTS COUNCIL PC CHARITABLE 2728 ASBURY RD SUITE 220 DUBUQUE, IA 52001 25, DUBUQUE RESCUE MISSION PC CHARITABLE 398 MAIN ST DUBUQUE, IA 52001 25. PC FINLEY HEALTH FOUNDATION CHARITABLE 350 N GRANDVIEW AVE DUBUQUE, IA 52001 5,200. FOOD FOR THE POOR PC CHARITABLE 6401 LYONS ROAD <u>75.</u> COCONUT CREEK, FL 33073 Total from continuation sheets 31 138.

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation show any relationship to Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient PC CHARITABLE GIGI'S PLAYHOUSE 2350 WEST HIGGINS RD 100. HOFFMAN ESTATES, IL 60169 HILLCREST FAMILY SERVICES PC CHARITABLE 2005 ASBURY ROAD 200. DUBUQUE IA 52001 PC CHARITABLE HILLS AND DALES CHILD DEVELOPMENT CENTER 1101 DAVIS ST DUBUQUE, IA 52001 25. PC HOLY FAMILY SCHOOL CHARITABLE 2005 KANE STREET DUBUQUE IA 52001 153. PC CHARITABLE HOLY ROSARY MISSION 10131 HOLY ROSARY RD, PO BOX 37 PHILADELPHIA, MS 39350 100, PC CHARITABLE HOSPICE OF DUBUQUE 1670 JOHN F KENNEDY ROAD 375. DUBUQUE, IA 52002 INTERNATIONAL DOCUMENTARY ASSOCIATION PC CHARITABLE 3470 WILSHIRE BLVD., SUITE 980 LOS ANGELES CA 90010 100. PC CHARITABLE LUTHER MANOR 3132 HILLCREST RD 3,000. DUBUQUE, IA 52001 CHARITABLE MARY'S INN PO BOX 3338 DUBUQUE, IA 52004 25. NATIVITY CHURCH PC CHARITABLE 1225 ALTA VISTA ST DUBUQUE, IA 52001 1,100. Total from continuation sheets

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or **Amount** status of contribution Name and address (home or business) recipient PC CHARITABLE NEW AVENUES FOR YOUTH 314 SW 9TH AVE PORTLAND, OR 97205 1,750. PC OPENING DOORS CHARITABLE 1561 JACKSON ST DUBUQUE IA 52001 25. PC RIVER BEND FOOD CHARITABLE 4010 KIMMEL DR DAVENPORT, IA 52802 50. SHALOM RETREAT CENTER PC CHARITABLE 1001 DAVIS STREET DUBUQUE, IA 52001 25. PC ST COLUMBKILLE'S CHURCH CHARITABLE 1220 RUSH ST DUBUQUE, IA 52001 1,060, THE SALVATION ARMY PC CHARITABLE 1099 IOWA STREET DUBUQUE, IA 52001 50. UNIVERSITY OF IOWA FOUNDATION PC CHARITABLE P O BOX 4550 IOWA CITY IA 52244-4550 13,500. PC CHARITABLE WOUNDED WARRIOR PROJECT 4899 BELFORT ROAD, SUITE 300 JACKSONVILLE, FL 32256 25. Total from continuation sheets

FORM 990-PF INTEREST ON SAVI	NGS A	ND TE	MPORARY	CASH :	INVESTMENTS	STATEMENT	1
SOURCE	(A) REVENUE PER BOOKS		ENUE		(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME	
AMERICAN TRUST & SAVINGS BANK			2.		2.		2.
TOTAL TO PART I, LINE 3	_		2.		2.		2.
FORM 990-PF	0	THER :	INCOME			STATEMENT	2
DESCRIPTION			(A) REVENT PER BOO		(B) NET INVEST- MENT INCOME	(C) ADJUSTE NET INCO	
ANNUITY PAYMENTS			220	5,206.	226,206	•	0.
TOTAL TO FORM 990-PF, PART I,	LINE	11 <u> </u>	220	5,206.	226,206.		0.
FORM 990-PF		LEGA	L FEES			STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	NET II	3) NVEST- INCOME	(C) ADJUSTED NET INCOME	(D) CHARITA PURPOS	
LEGAL FEES		120	•	120	. ().	0.
TO FM 990-PF, PG 1, LN 16A =		120		120	. ().	0.
FORM 990-PF	AC	COUNT	ING FEES	5		STATEMENT	4
DESCRIPTION	EXPE	A) NSES BOOKS	NET II	3) NVEST- INCOME	(C) ADJUSTED NET INCOME	(D) CHARITA PURPOSI	
ACCOUNTING FEES		4,900	•	4,900	• 0).	0.
TO FORM 990-PF, PG 1, LN 16B	_	4,900	•	4,900	• 0).	0.

FORM 990-PF C	THER PROFES	SIONAL FEES		STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM			
TRUSTEE FEES	30,000.	30,000.	(0.	0.	
TO FORM 990-PF, PG 1, LN 16C	30,000.	30,000.		0.	0.	
FORM 990-PF	OTHER E	XPENSES		STATEMENT	6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME				
BANK FEES MISCELLANEOUS EXPENSE	25. 2,501.			0.	0.	
TO FORM 990-PF, PG 1, LN 23	2,526.	2,526.		0.	0.	
FORM 990-PF OTHER INCREASES	IN NET ASS	ETS OR FUND E	ALANCES	STATEMENT	7	
DESCRIPTION				AMOUNT		
CHANGE IN CASH SURRENDER VALU	JE OF LIFE I	NSURANCE POLI	CIES	107,9	74.	
TOTAL TO FORM 990-PF, PART II	II, LINE 3		- -	107,9	74.	
FORM 990-PF	OTHER	ASSETS		STATEMENT	8	
DESCRIPTION			OF YEAR	FAIR MARKE	T	
LIFE INSURANCE POLICIES ANNUITIES		648,395. 783,659.	756,369. 503,007.		0.	
TO FORM 990-PF, PART II, LINE	15 1,	432,054.	1,259,376.		0.	

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

LARRY HERRIG 1540 KEHL CT DUBUQUE, IA 52003

TELEPHONE NUMBER

(563)583-6538

FORM AND CONTENT OF APPLICATIONS

THIS APPLICATION SHOULD INCLUDE ALL NECESSARY INFORMATION CONCERNING THE REASON FOR REQUESTING THE GRANT, LOAN, ETC, INCLUDING WHERE YOU CAN BE REACHED.

ANY SUBMISSION DEADLINES

N/A

RESTRICTIONS AND LIMITATIONS ON AWARDS

GRANTS WILL BE MADE TO ORGANIZATIONS THAT ARE EXEMPT UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND ARE NOT PRIVATE FOUNDATIONS AS DEFINED IN IRC SECTION 509(A).