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

2015

OMB No 1545-0052

Department of the Treasury Internal Revenue, Service

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Open to Public Inspection

For cal	endar year 2015, or tax year beginning	, 2015.	, and ending	<u> </u>
CARO	L CLARKSON EKLUND FOUNDATION			A Employer identification number 46-1450957
PION	EER BANK & TRUST, TRUSTEE BOX 729			B Telephone number (see instructions) (605) 892-3494
	E FOURCHE, SD 57717			C If exemption application is pending, check here
<u> </u>	all all that and	Instal values of a face		in exemption application is pending, check here
G Che	eck all that apply Initial return	Initial return of a form Amended return	ner public charity	D 1 Foreign organizations, check here
	Address change	Name change		2 Foreign organizations meeting the 85% test, check
H Che		(c)(3) exempt private f	oundation	here and attach computation
ſ	Section 4947(a)(1) nonexempt charitable t			E If private foundation status was terminated
		ounting method X C	ash Accrual	under section 507(b)(1)(A), check here
•		Other (specify)		F If the foundation is in a 60-month termination
► \$	938, 621. (Part I,	column (d) must be or		under section 507(b)(1)(B), check here ►
Farti	Expenses (The total of amounts in	(a) Revenue and expenses per books	(b) Net investmer income	t (c) Adjusted net (d) Disbursements for charitable
	columns (b), (c), and (d) may not neces-	expenses per books	ıncome	purposes
	sarily equal the amounts in column (a) (see instructions) )			(cash basis only)
	Contributions, gifts, grants, etc, received (attach schedule)	505,350.		
	2 Ck ►if the foundation is not required to attach Sch B	<u> </u>		
	3 Interest on savings and temporary cash investments	1,046.	1,04	6.
	4 Dividends and interest from securities	10,439.	10,43	9.
	5 a Gross rents b Net rental income			DEOEWED 1
D	or (loss)  6 a Net gain or (loss) from sale of assets not on line 10	18,873.		HEGEIVED -
R E V	b Gross sales price for all assets on line 6a 584, 472.	10,073.		2 S
V E	7 Capital gain net income (from Part IV, line 2)		18,87	3.   Y SEP & V 2016   X
E N U	8 Net short-term capital gain			m K
Ē	9 Income modifications 10 a Gross sales less			
	returns and allowances		1	Marie 14
	b Less Cost of goods sold			
	C Gross profit or (loss) (attach schedule).			
	11 Other income (attach schedule)			i
	12 Total Add lines 1 through 11	535,708.	30,35	8. 0.
	13 Compensation of officers, directors, trustees, etc	9,568.	8,61	
	14 Other employee salaries and wages			
	15 Pension plans, employee benefits 16a Legal fees (attach schedule) SEE ST 1	10.050	14 50	
Â	16a Legal fees (attach schedule) SEE ST 1 b Accounting fees (attach sch) SEE ST 2	12,870. 1,725.	11,58 1,55	
M	C Other prof fees (attach sch)	1,725.	1,55	172.
O I	17 Interest			
O P S T R	18 Taxes (attach schedule X see instrs) SEE STM 3	921.	32	0.
R R A A T T	19 Depreciation (attach schedule) and depletion			
1 1	20 Occupancy			<del>                                     </del>
G E	21 Travel, conferences, and meetings			
A E N X D P	22 Printing and publications. 23 Other expenses (attach schedule)			
Ė	Curior expenses (attach scriedule)			
N S	24 Total operating and administrative			<del>                                     </del>
E S	expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid PART XV	25,084.	22,06	57. 2,416. 25,000.
	25 Contributions, gifts, grants paid PART XV  26 Total expenses and disbursements	25,000.		25,000.
_	Add lines 24 and 25	50,084.	22,06	0. <u>27,416.</u>
	27 Subtract line 26 from line 12			
	a Excess of revenue over expenses and disbursements .	485,624.		
	<b>b</b> Net investment income (if negative, enter -0-)		8,29	01.
	C Adjusted net income (if negative, enter -0-)			0.



Par	П	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End	of year
			(See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash — non-interest	,	24,675.	<u>-</u> .	
	2	Savings and tempora	ary cash investments		252,265	. 252, 265.
	3	Accounts receivable	<b></b>	·		
		Less allowance for o	doubtful accounts		***	
	4	Pledges receivable	<b>-</b>			
	_	Less allowance for o	doubtful accounts -		· · · · · · · · · · · · · · · · · · ·	
	5	Grants receivable				
	6	disqualified persons (attac	ers, directors, trustees, and other ch schedule) (see instructions)			
	7	Other notes and loans rece	eivable (attach sch)			
S		Less allowance for o	doubtful accounts •			
Ş	8	Inventories for sale of			<u>.</u> .	
A S S E T	9	Prepaid expenses ar	-			
S	10:	a Investments – US obligations (attach s	·			
		<b>b</b> Investments — corporate :	` '	348,403.	509,338	. 509,338.
	١ ،	c Investments — corporate I	bonds (attach schedule) STATEMENT 5	120,537.	177,018	. 177,018.
	11	Investments – land, equipment basis	buildings, and			
		Less, accumulated deprect (attach schedule)	ation •			
	12	Investments - morto	gage loans.			
	13	Investments - other	(attach schedule)			
	14	Land, buildings, and	equipment basis►			
		Less accumulated deprect (attach schedule)	ation			
	ı	Other assets (described to be of see the instructions	be be completed by all filers — Also, see page 1, item l)	493,615.	020 621	020 621
_	17	Accounts payable an		493,013.	938,621	. 938,621.
Ī	18	Grants payable	is assided expenses		<del></del>	┥ !
A B	19	Deferred revenue	ľ			<b>⊣</b> ;
- [	20		ors, trustees, & other disqualified persons			-
ī	21	Mortgages and other notes	payable (attach schedule)			-
Ţ	22	Other liabilities (desc	cribe► )			
É S	99	Total liabilities (odd	Junea 17 Harry and 22)			
	23	Total liabilities (add	low SFAS 117, check here	0.	0	-
		and complete lines 2	24 through 26 and lines 30 and 31.			
NF	24	Unrestricted		493,615.	938,621	<u>.</u>
EUTN	25	Temporarily restricte			<del></del>	4
A D	26	Permanently restricte				4
A B S A L T		and complete lines 2	not follow SFAS 117, check here P 77 through 31.			
ΤÄ	27		rincipal, or current funds			
SNC	28	• • •	or land, bldg, and equipment fund		·	:
O E	29	-	ılated ıncome, endowment, or other funds		·· -·· · · · · · · · · · · · · · · · ·	
RS	30		und balances (see instructions)	493,615.	938,621	<u>.]</u>
	31	(see instructions)	net assets/fund balances	493,615.	938,621	
Par	IIII	· · · · · · · · · · · · · · · · · · ·	ges in Net Assets or Fund Balance	es	750,021	·L
			alances at beginning of year - Part II, colu		ree with	T
•	end-	of-year figure reported	d on prior year's return)	mm (a), mie so (must ag	1	493,615.
2	Ente	r amount from Part I,	line 27a		2	485,624.
3	Other	increases not included in lir	ne 2 (itemize)		3	
4	Add	lines 1, 2, and 3			4	979,239.
		ases not included in line 2 (	, <u>2== 2================================</u>		5	40,618.
6	Tota	I net assets or fund ba	plances at end of year (line 4 minus line 5)	- Part II, column (b), li	ne 30 <b>6</b>	938,621.

	nd Losses for Tax on Investment cribe the kind(s) of property sold (e.g.,		(b) How acqui	red (C) Date acquired	(d) Date sold
2-story brick warehouse, or common stock, 200 shares MLC Company)				e (mo, day, yr)	(mo , day, yr )
	IONEER BANK & TRUST		P	VARIOUS	VARIOUS
	IONEER BANK & TRUST		P	VARIOUS	VARIOUS
	PIONEER BANK & TRUST	· · · · · · · · · · · · · · · · · · ·	P	7/22/08	5/28/15
d CAPITAL GAIN DIV	<u>IDENDS</u>				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal		(h) Gain or (e) plus (f) n	
a 5,07		· · · · · · · · · · · · · · · · · · ·	5,344.	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-268.
b 63,10			1,905.		8,203.
c 505,48			5,350.		138.
d			7,330.		
е					
	showing gain in column (h) and owned l	by the foundation on 12/31/	69	(I) Gains (Col	(h)
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		gain minus col (k), t than -0-) or Losses (f	out not less
а					-268.
b					8,203.
С					138.
d					10,800.
<u>e</u>				1	
2 Capital gain net income or	(net capital loss) If gain, also	enter in Part I, line 7 ter -0- in Part I, line 7		2	10 073
3 Net short-term capital gair	or (loss) as defined in sections 1222(5				18,873.
If gain, also enter in Part I in Part I, line 8	, line 8, column (c) (see instructions). I	f (loss), enter -0-		3	0.
Part ♥ Qualification Ur	ider Section 4940(e) for Reduce	ed Tax on Net Investm	ent Incon	ne	
If section 4940(d)(2) applies, lea	ate foundations subject to the section 4940 ave this part blank e section 4942 tax on the distributable a qualify under section 4940(e) Do not o	amount of any year in the b		Yes	X No
	it in each column for each year, see the in	structions 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 ass	sets (d	(d) Distribution of (b) divided by	
2014	25,000.	492	2,715.		0.050739
2013	26,500.	405	5,510.		0.065350
2012	15,850.	240	),271.		0.065967
2011					
2010					
2 Total of line 1, column (d)				2	0.182056
3 Average distribution ratio	for the 5-year base period – divide the	total on line 2 by 5, or by th	ne 🗀		0.102000
	ation has been in existence if less than			3	0.060685
4 Enter the net value of non	charitable-use assets for 2015 from Par	rt X, line 5	_	4	755,185.
5 Multiply line 4 by line 3				5	45,828.
6 Enter 1% of net investmen	nt income (1% of Part I, line 27b)			6	83.
7 Add lines 5 and 6				7	45,911.
8 Enter qualifying distributio	ns from Part XII, line 4			8	27,416.
If line 8 is equal to or greate Part VI instructions	r than line 7, check the box in Part VI, line	e 1b, and complete that part u	sing a 1% ta	x rate See the	

		-145095			Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se	e instruct	ions)		
1	a Exempt operating foundations described in section 4940(d)(2), check here				
	Date of ruling or determination letter (attach copy of letter if necessary – see instrs)	1 1			
	<b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V,	1			166.
	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)	h			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable				
_	foundations only Others enter -0-).	2			0.
3		3			<u> 166.</u>
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			<u> 166.</u>
6					
	a 2015 estimated tax pmts and 2014 overpayment credited to 2015	<b>⊣</b> ∣			
	b Exempt foreign organizations – tax withheld at source	4			
	c Tax paid with application for extension of time to file (Form 8868)	4			
	d Backup withholding erroneously withheld  6d	4			
_	Total credits and payments Add lines 6a through 6d	7			<u>      0 .                             </u>
8	,, , , , , , , , , , , , , , , , , , ,	8			
9		9			<u> 166.</u>
10	1	10			
	Enter the amount of line 10 to be Credited to 2016 estimated tax	<b>1</b> 1			
	rt VII-A Statements Regarding Activities			т	Т
1	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
	participate or intervene in any political campaign?		1:	1	X
	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?		۱		<b> </b>
			11	<del> </del>	X
	If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities				
	c Did the foundation file Form 1120-POL for this year?		10	:	Х
	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 ► \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on		<u>). </u>		
	foundation managers •\$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	1	Х
	If 'Yes,' attach a detailed description of the activities		<u> </u>	+-	<del>  ^</del>
2	· · · · · · · · · · · · · · · · · · ·				
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		X
	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4:		X
	b If 'Yes,' has it filed a tax return on Form 990-T for this year?		41		I/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	1	X
	If 'Yes,' attach the statement required by General Instruction T			t-	†
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	1	Х
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	Х	
8	a Enter the states to which the foundation reports or with which it is registered (see instructions)				
	SD				
	<b>b</b> If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				ļ
	(or designate) of each state as required by General Instruction G? If 'No,' attach explanation		81	э <u>Х</u>	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) of	or 4942(j)(	5)	<b>_</b>	ļ
	for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' comple	ete Part Xi	'V <u>9</u>	X	<u> </u>
10					
D A 4	and addresses		10	10.55	X 2015)
BA			Form 99	JU-PF (7	ZU15)

Par	t 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		Х
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		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
14	Website address  ► N/A  The books are in care of ► PIONEER BANK & TRUST  Telephone no ► (605)	-892		
	Located at ► P.O. BOX 729 BELLE FOURCHE SD ZIP + 4 ► 57717-07			- <del>-</del> -
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> — Check here	N/A	•	
16	and enter the amount of tax-exempt interest received or accrued during the year  At any time during calculations 2015, did the foundation have an interest as a second as a second according to the se		Yes	N/A No
10	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?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country.			
Par	t VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
_	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No			,
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			1
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?  Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days )  Yes X 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)?	1 b		/A
	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?	1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section $4942(j)(3)$ or $4942(j)(5)$ )			,
а	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? Yes X No			!
	If 'Yes,' list the years ► 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).	2 b	N	·
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			
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			,
b	of '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? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015)	3 b	 N	/A
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a		Х
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?	4 b	-	X

POINT 390-PF (2015) CAROL CLARASON EA			46-14	5095 / Page <b>6</b>		
Part VII B Statements Regarding Activit		1 4720 May Be Reg	uired (continued)			
<b>5 a</b> During the year did the foundation pay or incu (1) Carry on propaganda, or otherwise attempt	•	on (section 4945(a))?	☐ Yes X	No No		
.(2) Influence the outcome of any specific pub	J		l les V			
on, directly or indirectly, any voter registra	ation drive?		Yes X			
(3) Provide a grant to an individual for travel,	-		Yes X	No		
(4) Provide a grant to an organization other the in section 4945(d)(4)(A)? (see instructions	5)		Yes X	No No		
(5) Provide for any purpose other than religio educational purposes, or for the prevention	n of cruelty to children	or animals?		No		
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regard	qualify under the excep ding disaster assistance	tions e	5b N/A		
Organizations relying on a current notice rega	rding disaster assistand	ce check here	▶ [			
c If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If 'Yes,' attach the statement required by Regulations section 53 4945-5(d)						
6 a Did the foundation, during the year, receive a		• •	s			
on a personal benefit contract? <b>b</b> Did the foundation, during the year, pay prem	iums, directly or indirec	tly, on a personal bene		No 6b X		
If 'Yes' to 6b, file Form 8870	-					
7a At any time during the tax year, was the found				No Section 1		
<b>b</b> If 'Yes,' did the foundation receive any procee				N/A 7b		
Information About Officers, Danie and Contractors	irectors, Trustees,	Foundation Manag	gers, Highly Paid I	Employees,		
		<del></del>				
1 List all officers, directors, trustees, foundation				T		
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances		
CAROL CLARKSON EKLUND	DIRECTOR	0.	0.	0.		
1113 EAST STATE AVENUE	1.00					
PHOENIX, AZ 85008						
MARY CLARKSON BUCHHOLZ	DIRECTOR	0.	0.	0.		
_16249 MDU_LOOP	1.00					
BELLE FOURCHE, SD 57717						
_SHANA_CAPRAROS	DIRECTOR	0.	0.	0.		
_516_W_BETHANY_HOME_RD	1.00					
PHOENIX, AZ 85008						
PIONEER BANK & TRUST P.O BOX 729 BELLE FOURCHE, SD 57717-0729	TRUSTEE 20.00	9,568.	0.	0.		
2 Compensation of five highest-paid employees (of	har than those included	on line 1 cae instruction	ns) If none, enter 'NONE	<u></u>		
(a) Name and address of each employee	<b>(b)</b> Title, and average	(c) Compensation	(d)Contributions to	(e) Expense account,		
paid more than \$50,000	hours per week devoted to position	(c) compensation	employee benefit plans and deferred compensation	other allowances		
NONE			·			
	_					
Total number of other employees paid over \$50,000	<u> </u>					
Total Hamber of other employees paid over \$50,000	1		_	1 0		

1		
Form 990-PF (2015) CAROL CLARKSON EKLUND FOUNDATION  Part VIII Information About Officers, Directors, Trustees, Foun	46-145	
and Contractors (continued)	dation Managers, Highly Paid E	mpioyees,
3 Five highest-paid independent contractors for professional services (see in	structions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		(d) companies
	· ·	
		<del></del>
7-1-1		
Total 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 statistics	al information such as the number of	<b>5</b>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistics organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 <u>N/A</u>		
		1
2		
	·	1
	· <b></b>	1
3		
		1
4		1
Part IX-B Summary of Program-Related Investments (see instru	ctions)	
Describe the two largest program-related investments made by the foundation during the	e tax year on lines 1 and 2	Amount
1		
N/A		
2	·	
		1
All other program-related investments. See instructions		

TEEA0307L 10/13/15

Form **990-PF** (2015)

Total. Add lines 1 through 3

BAA

Page 8

Par	see instructions.)	reign	roundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes		554 505
	Average monthly fair market value of securities	1 a	554,507.
	Average of monthly cash balances	1 b	212,178.
	Fair market value of all other assets (see instructions)	1 c	766 605
	Total (add lines 1a, b, and c)	1 d	766,685.
е	Reduction claimed for blockage or other factors reported on lines 1a and 1c		
•	(attach detailed explanation)  1e 0.		•
_	Acquisition indebtedness applicable to line 1 assets Subtract line 2 from line 1d	3	0.
3	Subtract line 2 from line 1d	3	766,685.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	_11,500.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	755,185.
6	Minimum investment return. Enter 5% of line 5	6	_ 37,759.
Par	<b>TXI</b> Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operation and certain foreign organizations check here ►	ting fo	oundations
1	Minimum investment return from Part X, line 6 N/A	1 [	
2 a	Tax on investment income for 2015 from Part VI, line 5		
b	Income tax for 2015 (This does not include the tax from Part VI ) 2b		
С	Add lines 2a and 2b	2 c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	
Par	t XII Qualifying Distributions (see instructions)		
	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	27,416.
b	Program-related investments — total from Part IX-B	1 b	
_	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3 a	Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required)	3 a	
b	Cash distribution test (attach the required schedule)	3 ь	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	27,416.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	27,416.
	<b>Note.</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the four qualifies for the section 4940(e) reduction of tax in those years	ndation	
BAA		_	Form <b>990-PF</b> (2015)

Part XIII Undistributed Income (see inst	ructions)	N/A		
	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2014	<b>(c)</b> 2014	<b>(d)</b> 2015
Distributable amount for 2015 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2015.				
a Enter amount for 2014 only				
<b>b</b> Total for prior years 20 , 20 , 20				
3 Excess distributions carryover, if any, to 2015				
<b>a</b> From 2010				
<b>b</b> From 2011				
<b>c</b> From 2012				
<b>d</b> From 2013	1			
<b>e</b> From 2014	]	]		1
f Total of lines 3a through e				
4 Qualifying distributions for 2015 from Part				
XII, line 4 🕨 💲				1
a Applied to 2014, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required — see instructions)				
c Treated as distributions out of corpus (Election required — see instructions)				
<b>d</b> Applied to 2015 distributable amount				
e Remaining amount distributed out of corpus	· · · · · · · ·			
5 Excess distributions carryover applied to 2015	· · · · ·			·
(If an amount appears in column (d), the same amount must be shown in column (a))		1	-	
• •				
6 Enter the net total of each column as				İ
indicated below:				,
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				:
<b>d</b> Subtract line 6c from line 6b Taxable amount — see instructions				
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount — see instructions			***	
f Undistributed income for 2015 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2016				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions)				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				<del> </del>
a Excess from 2011		1		
<b>b</b> Excess from 2012	1			
c Excess from 2013	1			1
d Excess from 2014	1			
e Excess from 2015	1			
BAA	· · · · · · · · · · · · · · · · · · ·	<del>**</del>		Form <b>990-PF</b> (2015)

Part XIV   Private Operating Foundat	•				
1 a If the foundation has received a ruling or dete is effective for 2015, enter the date of the	rmination letter that it ruling	is a private operatir	ng toundation, and th		11/30/12
<b>b</b> Check box to indicate whether the foundat	ion is a private oper	ating foundation de	escribed in section	X 4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		
investment return from Part X for	(a) 2015	<b>(b)</b> 2014	(c) 2013	<b>(d)</b> 2012	(e) Total
each year listed	0.	·			0.
<b>b</b> 85% of line 2a					0.
C Qualifying distributions from Part XII, line 4 for each year listed     d Amounts included in line 2c not used directly	27,416.	25,000.	26,500.	15,850.	94,766.
for active conduct of exempt activities					0.
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c</li> </ul>	27,416.	25,000.	26,500.	15,850.	94,766.
3 Complete 3a, b, or c for the alternative test relied upon				·	
a 'Assets' alternative test — enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed	25,173.	16,424.	13,517.	700.	55,814.
c 'Support' alternative test - enter		,	,		55,551
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV   Supplementary Information	(Complete this I	part only if the	foundation had	\$5,000 or more	in
assets at any time during th	<del></del>	tructions.)			
1 Information Regarding Foundation Manag		00/ -{15- 1-1-1			H
a List any managers of the foundation who have close of any tax year (but only if they have	e contributed more the contributed more the	an 2% of the total co han \$5,000) (See :	ntributions received t section 507(d)(2))	by the foundation bef	ore the
NONE					
<b>b</b> List any managers of the foundation who own	10% or more of the s	tock of a corporation	o (or an equally large	nortion of the owner	ship of
a partnership or other entity) of which the NONE	foundation has a 10	% or greater intere	est	portion of the owner	Ship Oi
2 Information Borowitz Contribution Con-	4 O'4 1 C-1-1				<del></del>
2 Information Regarding Contribution, Gran Check here ►  X  if the foundation only ma				loos not assent unco	ligited
requests for funds If the foundation make complete items 2a, b, c, and d.	s gifts, grants, etc (s	see instructions) to	individuals or orga	nizations under oth	er conditions,
a The name, address, and telephone number or	e-mail address of the	e person to whom ap	plications should be	addressed	
<b>b</b> The form in which applications should be s	submitted and inforn	nation and material	ls they should inclu	de	
c Any submission deadlines:				<del>.</del>	
•					
d Any restrictions or limitations on awards, s	such as by geograph	iical areas, charitah	ole fields, kinds of ii	nstitutions or other	factors
,	25 by goograpi	a. Jas, chantat			

Part XV Supplementary Information (continued)

Page 11

3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation status of recipient Recipient show any relationship to any Purpose of grant or contribution **Amount** foundation manager or Name and address (home or business) substantial contributor a Paid during the year CHILDRENS HOME SOCIETY NONE N/A GENERAL FUND 10,000. 1330 JOLLY LANE RAPID CITY SD 57703 NONE 10,000. ST MARYS FOOD BANK ALLIANCE N/A GENERAL FUND 2831 N 31ST AVENUE PHOENIX AZ 85009 FIRST PEOPLES FUND NONE N/A GENERAL FUND 5,000. PO BOX 2977 RAPID CITY SD 57709 ► 3a 25,000. b Approved for future payment Total 3 b

### | Part XVI-A | Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated	business income	Excluded by	section 512, 513, or 514	(e)
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	<b>(d)</b> Amount	Related or exempt function income (See instructions)
a					
b					
c	1				
d					
e	1	·	1 1		
f					
g Fees and contracts from government agencies			<u> </u>		
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	1,046.	
4 Dividends and interest from securities			14	10,439.	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
<b>b</b> Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					18,873.
<b>9</b> Net income or (loss) from special events.					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a			<u> </u>		
b					
С			<u> </u>		
d	<b>_</b>				
e					
12 Subtotal Add columns (b), (d), and (e)	LL			11,485.	18,873.
<b>13 Total.</b> Add line 12, columns (b), (d), and (e)				13 _	30,358.
(See worksheet in line 13 instructions to verify calculation	ons )			==	

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

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

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

	,						<del></del>			
. de	d the organization direct scribed in section 501(c ating to political organiz	:) of the Code (otl	ngage in any of her than sectior	the following win 501(c)(3) orga	th any otl nizations)	her organizatio or in section s	n 527,		Yes	No
<b>a</b> Tra	ansfers from the reporting	ng foundation to	a noncharitable	exempt organiz	ation of					,
(1)	Cash							1 a (1)		×
(2)	Other assets							1 a (2)		X
<b>b</b> Otl	her transactions									
(1)	Sales of assets to a ne	oncharitable exer	mpt organizatioi	n				1 b (1)		X
٠,٠	Purchases of assets fr		. •					1 b (2)		X
٠,	Rental of facilities, equ							1 b (3)		X
<b>\-</b> /	Reimbursement arrand		2000.0					1 b (4)		X
` '	Loans or loan guarant	-						1 b (5)		X
٠,	Performance of service		n or fundraising	solicitations				1 b (6)		X
` '	aring of facilities, equip				299			1 c		X
	annig or identition, equip		10, 01.10, 455510	, or para employ	000			10		
<b>d</b> If the	the answer to any of the egoods, other assets, or s y transaction or sharing	above is 'Yes,' of services given by the arrangement.	complete the following found to the complete	llowing schedule addition of the value of th	Column	( <b>b)</b> should alw ceived less than other assets	rays show the fa	ır market val e ın ıved	ue of	
(a) Line			f noncharitable exem				sfers, transactions, a		agement	is .
N/A	(2)	(9)			(5)	- Country and a	oror o, transactions, c	ina onaring arrar	- igonioni	
					<del>                                     </del>					
	· · ·					-				
	<del> </del>							<del>.</del>		
					<b></b>					
					<u> </u>					
	<del></del>	-			<del>                                     </del>					
	··	+			<del>                                     </del>	<del>.</del>		<del></del>		
		<del>-  </del>						<del></del>		
					<b></b>					
		<del></del>			<del> </del>					
	<del></del>	<del>                                     </del>								
		<del></del>		<del>_</del>						
					l					
de	the foundation directly or scribed in section 501(c Yes,' complete the follo	c) of the Code (oth	with, or related the than section	to, one or more to n 501(c)(3)) or in	ax-exempt section	organizations 527?		Yes	X	No
	(a) Name of organiza	<del> </del>	<b>(b)</b> Type	e of organization		(c	) Description of	relationship		
N/A			(-y 5):	<u> </u>			,			
	· · · · · · · · · · · · · · · · · · ·			<del></del>						
	····									
	Under penalties of perjury, I dec	clare that I have examin	ned this return, includ	ding accompanying si	thedules and	statements, and to	the best of my knowle	edge and belief, i	t is true.	
- 1	correct, and complete Declarati	ion of preparer (other-th	han taxpayer) is base	ed on all information	of which prep	parer has any know	ledge			
Sign Here	$\mathcal{A}$	145	$\overline{}$	. 0/./.				May the I	RS disc	uss ne
nere	4 Marie	the you	<u></u>	9/14/6	T	RUSTEE		preparer (see ipsti	shown b	pelow
	Signature of officer of trustee			Date /	Titi	le		, X	Yes	No
	Print/Type preparer's i	name C	Preparer's	signature		Date	Check V	f PTIN		
Paid	H GLENN HEI	NDERSON	TTO MA	Denderra	MCPA	9/6/16	self-employed	P00052	2142	
Prepar			EDWARDS WI	LISON EVET		P	Firm's EIN ► 75-	-2782894	~	
Use O		16660 DALL					7.5		<del></del>	
JJC 01	····		75248	., 001111 2.			Phone no 97	2-250-99	59	
BAA		ZIIIIIIO, IN	, 52 30				J17	Eorm 99		2015)

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

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

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

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

OMB No 1545 0047

2015

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of the organization CAROL CLARKSON	EKLUND FOUNDATION	Employer identification number
PIONEER BANK &	TRUST, TRUSTEE	46-1450957
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> tr	eated as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treate	d as a private foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the Go	eneral Rule or a Special Rule.	
Note. Only a section 501(c)(7), (8), or (10)	organization can check boxes for both the General Ri	ule and a Special Rule See instructions
General Rule		
For an organization filing Form 990, 99 property) from any one contributor Co	90-EZ, or 990-PF that received, during the year, contril implete Parts I and II. See instructions for determining	butions totaling \$5,000 or more (in money or a contributor's total contributions
Special Rules		
under sections 509(a)(1) and 170(b)(1)(A received from any one contributor, dur	on 501(c)(3) filing Form 990 or 990-EZ that met the 33 )(vi), that checked Schedule A (Form 990 or 990-EZ), Part ring the year, total contributions of the greater of (1) \$! m 990-EZ, line 1 Complete Parts I and II	II. line 13, 16a, or 16b, and that
For an organization described in section during the year, total contributions of a purposes, or for the prevention of crue	on 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that more than \$1,000 <i>exclusively</i> for religious, charitable, s elty to children or animals. Complete Parts I, II, and III	t received from any one contributor, scientific, literary, or educational
during the year, contributions exclusive \$1,000. If this box is checked, enter he charitable, etc., purpose. Do not comp	on 501(c)(7), (8), or (10) filing Form 990 or 990-EZ tha ely for religious, charitable, etc., purposes, but no such ere the total contributions that were received during the elete any of the parts unless the <b>General Rule</b> applies of aritable, etc., contributions totaling \$5,000 or more during	n contributions totaled more than e year for an <i>exclusively</i> religious, to this organization because
990-PF), but it <b>must</b> answer 'No' on Part I	ed by the General Rule and/or the Special Rules does V, line 2, of its Form 990, or check the box on line H o et the filing requirements of Schedule B (Form 990, 99	of its Form 990-EZ or on its Form 990-PF.

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

۱ Schedule	B (Form 990, 990-EZ, or 990-PF) (2015)	Page	1 of 1 of <b>Part</b>		
Name of org	anization	Employer identification number 46–1450957			
	CLARKSON EKLUND FOUNDATION  Contributors (see instructions) Use duplicate copies of Part I if additional space		450957		
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
	CAROL A EKLUND TRUST  1113 EAST STATE AVENUE  PHOENIX, AZ 85008	\$505,350.	Person Payroll Oncash Oncash Oncash Oncash Oncash Oncash Oncash Oncash Contributions )		
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Complete Part II for noncash contributions )		
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Complete Part II for noncash contributions )		
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroli Complete Part II for noncash contributions )		
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		-  -  s	Person		

(Complete Part II for noncash contributions )

Page

1 to

1 of Part II

Name of organization

CAROL CLARKON EKLLIND FOLINDATION

Employer Identification number 46-1450957

CAROL	CLARKSON	EKLUND	FOUNDATION

	(c) FMV (or estimate) (see instructions)	(d) Date received
900 SHS WELLS FARGO & CO.		
(b)	\$\$ <u>505,350.</u>	5/20/15 (d) Date received
Description of noncash property given	FMV (or estimate) (see instructions)	Date received
	  \$ 	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	   \$	
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	  \$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
L		
	(b)  Description of noncash property given	Description of noncash property given  (c) FMV (or estimate) (see instructions)   Description of noncash property given  (b) Description of noncash property given  (c) FMV (or estimate) (see instructions)   FMV (or estimate) (see instructions)   S  Description of noncash property given  (c) FMV (or estimate) (see instructions)  FMV (or estimate) (see instructions)

1 to

of Part III

Name of organization
CAROL CLARKSON EKLUND FOUNDATION

Employer identification number 46-1450957

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.)

se duplicate copies of Part III if additional s				
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
/ <u>A</u>				
Transferee's name, address	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee		
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		· <b></b>		
	(e)			
Transferee's name, address	Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee		
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
Transferee's name, address	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee		
		· · · · · · · · · · · · · · · · · · ·		
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
Transferee's name, address	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee		
	Purpose of gift  /A  Transferee's name, address  Purpose of gift  Transferee's name, address  Purpose of gift  Transferee's name, address  Purpose of gift	Purpose of gift  Purpose of gift  Transferee's name, address, and ZIP + 4  Purpose of gift  Transferee's name, address, and ZIP + 4  Transfer of gift  Transferee's name, address, and ZIP + 4  Transfer of gift  Transferee's name, address, and ZIP + 4  Purpose of gift  Transferee's name, address, and ZIP + 4  Transfer of gift  Use of gift  Transferee's name, address, and ZIP + 4  Use of gift  Transferee's name, address, and ZIP + 4		

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_			_

## **FEDERAL STATEMENTS**

PAGE 1

CAROL CLARKSON EKLUND FOUNDATION PIONEER BANK & TRUST, TRUSTEE

46-1450957

STATEMENT 1 FORM 990-PF,	PART I,	LINE	16A
LEGAL FEES			

		(A)	(B) NET	(C)	(D)
		EXPENSES PER BOOKS	INVESTMENT INCOME	ADJUSTED NET INCOME	CHARITABLEPURPOSES
LEGAL FEES	ጥ∩ጥእ፣	\$ 12,870.	\$ 11,583.		\$ 1,287. \$ 1,287.
	TOTAL	<u>\$ 12,870.</u>	\$ 11,583.	<u>\$</u> <u>0.</u>	\$ 1,287.

#### STATEMENT 2 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES

			(A)		(B) NET	(C)		(D)
		EXE	PENSES	IN	IVESTMENT	ADJUSTED	С	HARITABLE
		PER	BOOKS_		INCOME	<u>NET INCOME</u>		PURPOSES
ACCOUNTING FEES		\$	1,725.	\$	1,553.		\$	172.
	TOTAL	\$	1,725.	\$	1,553.	<u>\$</u> 0.	\$	172.

#### STATEMENT 3 FORM 990-PF, PART I, LINE 18 TAXES

		(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EXCISE TAXES FOREIGN TAXES	TOTAL	\$ 601. 320. \$ 921.	\$ 320. \$ 320.	\$ 0.	\$ 0.

#### STATEMENT 4 FORM 990-PF, PART II, LINE 10B INVESTMENTS - CORPORATE STOCKS

CORPORATE STOCKS	VALUATION <u>METHOD</u>	BOOK VALUE	FAIR MARKET VALUE
337.405 FEDERATED MDT MID CAP GRWTH STR 2721.866 FEDERATED CLOVER VALUE FD 886.162 FEDERATED CLOVER SMALL VALUE FD 5409.16 FEDERATED KAUFMANN LARGE CAP 4221.466 FEDERATED ABSOLUTE RETURN 1516.023 FEDERATED INTERCONTINENTAL 9781.025 FEDERATED STRATEGIC VALUE 566.323 FEDERATED KAUFMANN SMALL CAP 942.844 FEDERATED INTL SMALL MID CO 1565.919 FEDERATED INTL LEADERS FD 489.000 DOW JONES US REAL ESTATE	MKT VAL	\$ 11,411. 56,778. 20,196. 101,854. 43,270. 70,844. 55,165. 13,450. 32,849. 48,324. 36,714.	
10872.314 OPPENHEIMER COMMODITY STRAT	MKT VAL TOTAL	18,483. \$ 509,338.	18,483.

2015

## **FEDERAL STATEMENTS**

PAGE 2

CAROL CLARKSON EKLUND FOUNDATION PIONEER BANK & TRUST, TRUSTEE

46-1450957

STATEMENT 5 FORM 990-PF, PART II, LINE 10C INVESTMENTS - CORPORATE BONDS

CORPORATE BONDS	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
2131.015 FEDERATED REAL RETURN BOND 2939.753 FEDERATED INTERNATIONAL BOND 10645.149 FEDERATED TOTAL RETURN BOND 1770.749 FEDERATED EMERGING MKT DEBT	MKT VAL \$ MKT VAL MKT VAL MKT VAL TOTAL	21,331. 28,398. 113,371. 13,918. 177,018.	\$ 21,331. 28,398. 113,371. 13,918. \$ 177,018.

STATEMENT 6 FORM 990-PF, PART III, LINE 5 OTHER DECREASES

UNREALIZED LOSSES

TOTAL \$ 40,618. \$ 40,618.

STATEMENT 7 FORM 990-PF, PART VI, PENALTY AND INTEREST BALANCE DUE

TAX DUE LATE PAYMENT PENALTY LATE INTEREST

\$ 166. 3. 2. TOTAL \$ 171.