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Return of Private Foundation

2016
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SCANNEL

Form	9	90-PF					947(a)(1) Trust Treat			de public		∣ 201 9	5
		of the Treasury	1				ecurity numbers on PF and its separate				0pf	Open to Public Insp	ection
		dar year 2015 or						, and e					
Nan	ne of	foundation	•							A Employer	identification	number	
4	6 :	1 FUND			· 					46-4	160748		
Num	ber a	nd street (or PO box	x number if	mail is not de	livered to stre	et address)			Room/suite	B Telephone	number		
6	00	ARIZONA	AVE	3					L				
_ ,		own, state or prov	vince, coi 5001		IP or foreigi	n postal co	ode			C If exemption	application is pe	inding, check here	>
		all that apply:		Initial retu	rn	-	Initial return of a f	ormer public (charity	D 1. Foreign	organizations	, check here	-
				Final retur	n		Amended return	·	•		•		
			X	Address c	hange		Name change			2. Foreign o	rganizations mee re and attach cor	eting the 85% test, inputation	>
H C	heck	type of organizat) exempt p	rivate foundation		•	F If private for	oundation stat	us was terminated	
	Se	ction 4947(a)(1)	nonexem	pt charitabl	e trust	Other t	axable private founda	ation		j -		(A), check here	>
i Fa	ır ma	rket value of all a	assets at o	end of year	J Accou	inting metl	hod: X Cash	Accı	rual	F If the foun	dation is in a 6	60-month termination	n
(fr	om F	Part II, col (c), II				Other (sp				under sect	ion 507(b)(1)	(B), check here 🕨	-
_	\$		L,814	1,711.	(Part I, co	olumn (d)	must be on cash t	pasis)					
Pa	rt l	Analysis of Rev (The total of amounecessarily equal	ınts ın colur	mns (b), (c), ar	nd (d) may not		a) Revenue and penses per books		ome		sted net ome	(d) Disbursemen for charitable purpo (cash basis only	ses
	1	Contributions, g	ufts, gran	ts, etc , rece	eived	_	657,987.		,	122,00		′.	
	2			on is not required			,		· / (3 / 4			
	3	Interest on savings cash investments	and tempo	orary			265.		265.			STATEMENT	1
	4	Dividends and in	nterest fro	om securitie	s		11,760.	1	1,760.			STATEMENT	' 2
	5a	Gross rents											
	b	Net rental income o	or (loss)	_		- 3	3. 2	3,		11.53		ALICE	
n	6a	Net gain or (loss) fro				ļ	23,791.		· Ž 3,	%C 0 >	Kt	CEIVED	
Revenue	b	. Gross sales price for all				(XX) /						기 있	
eve	7	Capital gain net inc	ome (from	Part IV, line 2)			<u> </u>	2	<u>3,791.</u>		절 10	L 1 5 2016	- č
9	8	Net short-term of	capital gai	ın		/) * * *		`	* * * * * *	N/	AD -	2010	16
1	9	Income modifica Gross sales less ret		1		-	>	* % .	(\$\$\$: 2		700	DEN L	14
	10a	and allowances				- 5	*	* * * * * * * * * * * * * * * * * * *	72 71 58 47	-	U	FEN. U	-72
	D	Less Cost of goods		L		- 12 -	• • • • • • • • • • • • • • • • • • • •	26,87	***		s , v x	. Y	
		Gross profit or (Other income	(iuss)										$\overline{}$
	11 12	Total. Add lines	: 1 throug	nh 11			693,803.	3	5,816.		0.	, ()	$\overline{}$
_	13	Compensation of o			s etc		0.		0.		0.	7	0.
	14	Other employee			-,								
	15	Pension plans, e		-		-					. '		
Se		Legal fees			TMT 3		1,637.		1,637.		0.		0.
ens	b	Accounting fees	:	S	TMT 4		6,450.		6,450.		0.		0.
ăx	C	Other profession	nal fees										
Ve F	17	Interest						ļ					
rati	18	Taxes				L							
3 tsi	19	Depreciation and	d depletio	on						ļ			
# <u> </u>	20	Occupancy				-		ļ		<u> </u>			
∧ia~a <u>H</u> nd Admi	21	Travel, conferen				ļ		ļ	-				
and	22	Printing and put		3		 		<u> </u>		ļ		<u></u>	
್ಟಾನ್ಎಕ್ಟ್ರಿ ಉ Operating and Administrative Expenses	23	Other expenses				<u> </u>		<u> </u>				<u> </u>	
rati	24	Total operating					0 007		0 007		Λ		0.
Spe		expenses. Add		-		-	8,087. 18,422.	 	8,087.	 	<u> </u>	18,4	22
.]	20	Contributions, g	-			ļ	10,424.	 		 	* 3 ·	10,4	44.
4	26	Total expenses		ursements			26,509.		8,087.		0.	18,4	.22
	27	Add lines 24 and Subtract line 26		a 12·		•	<u> </u>	t.	0,00/.	 	<u></u>		. <u></u>
2016		Excess of revenue			zaamanta	-	667,294.				\$ 2 3	· ·	\dashv
7 7		Net investment				V	1 3 3 4 1 1 3 3 1	2	7,729.	, , ,,,*	3. XX 12.	₩	(, ↓ §°
		Adams d act to				" •	23, 12	1 - 7		1		3.	1989

Form **990-PF** (2015)

LHA For Paperwork Reduction Act Notice, see instructions.

46-4160748 Form 990-PF (2015) 46 1 FUND Page 2 Beginning of year Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only End of year (c) Fair Market Value (a) Book Value (b) Book Value 205,019 447,319. 447,319. 1 Cash - non-interest-bearing 708,250. 800,081. 800,081 2 Savings and temporary cash investments 3 Accounts receivable ► Less; allowance for doubtful accounts 4 Pledges receivable ► Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations b Investments - corporate stock c Investments - corporate bonds 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 64,079. 567,311. 567,311. STATEMENT 6 15 Other assets (describe ► 16 Total assets (to be completed by all filers - see the 977,348. 1,814,711 instructions Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 282,236 21 Mortgages and other notes payable 22 Other liabilities (describe 282,236 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Balances 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Fund **▶** X Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ŏ 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 1,532,475 977,348. 29 Retained earnings, accumulated income, endowment, or other funds 532,475 977,348. 흦 30 Total net assets or fund balances 977,348. 1,814,711 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year - Part II, column (a), line 30 977,348. (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30
523511
11-24-15

Add lines 1, 2, and 3

1,532,475. Form **990-PF** (2015)

1,644,642.

112,167.

SEE STATEMENT 5

5 Decreases not included in line 2 (itemize)

3 Other increases not included in line 2 (itemize)

Part IV Capital Gains a	and Lo		vestment	Income				410	07-40 Tage 0
(a) List and desci	ribe the ki	nd(s) of property sold (e.g., or common stock, 200 shs.	, real estate,		(b) Ho	w acquired Purchase Donation	(c) Date (mo.,	acquired day, yr.)	(d) Date sold (mo., day, yr)
18 SEI SHORT TERM		ATTACHED DE			1	Donation	VARI	ous	VARIOUS
b SEI LONG TERM				-			VARI		VARIOUS
c 9000 SHS. NY RI							VARI	OUS	10/12/15
d CAPITAL GAINS I	DIVID	ENDS							
е		- 			<u> </u>		<u></u>		<u> </u>
(e) Gross sales price	(f) [[]	Depreciation allowed (or allowable)	(g) Cos plus e	st or other basis expense of sale				Gain or (loss is (f) minus	(g)
a 74,386.				71,79	6.				2,590.
b 49,458.				49,45	2.				6.
c 99,043.				79,70	8.				19,335.
d 1,860.									1,860.
<u>e</u>				40/04/00	 -				
Complete only for assets showin				•		c		Col. (h) gain not less tha	
(i) F.M.V. as of 12/31/69		j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any				(from col.	(h)) ´
8									2,590.
b		.,							6.
c						•			19,335.
<u>d</u>									1,860.
e									
2 Capital gain net income or (net ca	pital loss)	If gain, also enter If (loss), enter -0-	in Part I, line - in Part I, line	7 7	}	2			23,791.
3 Net short-term capital gain or (los	s) as defi	ned in sections 1222(5) and	d (6):						
If gain, also enter in Part I, line 8,	column (c).							2 500
If (loss), enter -0- in Part I, line 8 Part V Qualification U	==== 6	ection 4940(e) for	Dadwaad	Tay on Not	1000	3	20000		2,590.
Was the foundation liable for the sect	ify under :	section 4940(e) Do not cor	mplete this pa	rt					Yes X No
Enter the appropriate amount in (a)	ach colui		SU UCTIONS DE	ore making any ei					(4)
Base period years Calendar year (or tax year beginnii	ng in)	(b) Adjusted qualifying dist		Net value of no				Distri (col. (b) di	(d) button ratio vided by col. (c))
2014			500.			369,73			.001352
2013			0.				0.		.000000
2012									
2011 2010								-	
2010	1						_	1	
2 Total of line 1, column (d)							2		.001352
3 Average distribution ratio for the state the foundation has been in exister			on line 2 by 5,	or by the number	of year	S	3		.000676
4 Enter the net value of noncharitab	ile-iise ass	sets for 2015 from Part X h	ine 5				4		1,083,951.
4 Eliter the net value of horionalitati	116-U36 d3.	sets for 20 to from Fart A, i							
5 Multiply line 4 by line 3							5_	 	733.
6 Enter 1% of net investment incom	ne (1% of	Part I, line 27b)					6		277.
7 Add lines 5 and 6							7	ļ	1,010.
8 Enter qualifying distributions from	n Part XII,	line 4					8		18,422.
If line 8 is equal to or greater than See the Part VI instructions.	n line 7, cl	neck the box in Part VI, line	1b, and comp	olete that part usir	ng a 1%	tax rate.			
523521 11-24-15			-						Form 990-PF (2015

	990-PF (2015) 46 1 FUND	46-	4160	/48	Page 4	
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	/ 48 -	see in	struction	is)	
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 X and enter 1%	1		2	277.	
	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).	Ĺ				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			0.	
3	Add lines 1 and 2	3		2	277.	
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		2	277.	
6	Credits/Payments:			΄.	İ	
	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 6a			,		
b	Exempt foreign organizations - tax withheld at source 6b					
C	Tax paid with application for extension of time to file (Form 8868) 6c 490.	,4			1	
đ	Backup withholding erroneously withheld 6d	47.	2/ 4			
7	Total credits and payments. Add lines 6a through 6d	7		4	190.	
8	Enter any penalty for underpayment of estimated tax. Check here	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	<u> </u>		-	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			213.	
	Enter the amount of line 10 to be: Credited to 2016 estimated tax	11			0.	
	rt VII-A Statements Regarding Activities			- IV.	TNI	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın		Yes		
	any political campaign?			1a	X	
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition	•		1b	X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	d or) (n) (n)		
	distributed by the foundation in connection with the activities			<u> </u>	4	
	Did the foundation file Form 1120-POL for this year?		:	1c	X	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			2 3		
	(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0 .	-		l'		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			ķ l		
	managers ► \$0.				x	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2	┼┻┐	
	If "Yes," attach a detailed description of the activities			1.	· ·	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, o	r		 	$\frac{1}{x}$	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3	$\frac{1}{X}$	
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	N	/A	4a 4b	 ^ -	
	If "Yes," has it filed a tax return on Form 990-T for this year?	14	<i>,</i> 11	5	X	
3	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			 	+*	
e	If "Yes," attach the statement required by General Instruction T. Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			(i) (2)	3 × 1	
6	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			1 3	
	remain in the governing instrument?	, 1G **		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	+	
•	bid the loandation have at least \$0,000 in assets at any time during the year. If Yes, Complete Part II, Cor (c), and Part XV			 	1-7	
g a	Enter the states to which the foundation reports or with which it is registered (see instructions)			* / / · · ·	il , [
va	IA					
.	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				2	
U	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 cale	ndar		· ·	1	
J	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV			9	\mathbf{x}	
10				10	X	
10	TO DIG any persons become substantial continuators during the tax year if Yes, affect a schedule listing their names and addresses					

3b

48

N/A

Form 4720, to determine if the foundation had excess business holdings in 2015.)

had not been removed from jeopardy before the first day of the tax year beginning in 2015?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 990-PF (2015) 46 1 FUND			<u>46-41607</u>	48	Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be R	equired (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					\top
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	s X No	1	
(2) Influence the outcome of any specific public election (see section 4955); or		ectly.		Ì	
any voter registration drive?	. , .		s X No		1 1
(3) Provide a grant to an individual for travel, study, or other similar purposes'	?		s X No	>	
(4) Provide a grant to an organization other than a charitable, etc., organization					1 1
4945(d)(4)(A)? (see instructions)	, decombed in equion	☐ Ye	s X No	, <	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or aducational nurnoses or f		,3 [12] 110		
the prevention of cruelty to children or animals?	or educational purposes, or i		s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	dar the eventions described i		.s <u>21</u> NO	* . ``	1 1
		in negalations	N/A	5h	 -
section 53.4945 or in a current notice regarding disaster assistance (see instru	•			5b	+
Organizations relying on a current notice regarding disaster assistance check hi				- 1	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		- /	k		,. j
expenditure responsibility for the grant?	T.	I/A	es No	`. `´	
If "Yes," attach the statement required by Regulations section 53.4945					1. 1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on			`	1
a personal benefit contract?		Ye	es X No		<u> </u>
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		L	6b	X
If "Yes" to 6b, file Form 8870				Ť	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b	
Part VIII Information About Officers, Directors, Truste	es, Foundation Mai	nagers, Highly			
Paid Employees, and Contractors		· · · · · · · · · · · · · · · · · · ·			
1 List all officers, directors, trustees, foundation managers and their of	T	γ	- 7-N		
(-) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Ex	xpense nt, other
(a) Name and address	to position	enter -0-)	and deterred compensation	allow	vances
SCOTT BECKWITH	DIRECTOR			i	
600 ARIZONA AVE.				İ	
AMES, IA 50014	1.00	0.	0.		0.
KATHY BECKWITH	DIRECTOR				
600 ARIZONA AVE.					
AMES, IA 50014	1.00	0.	0.		0.
		1			
		1		1	
2 Compensation of five highest-paid employees (other than those incl	luded on line 1). If none.	enter "NONE."	L	1	
		T	(d) Contributions to	(e) £:	хрепѕе
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	accour	nt, other vances
NONE	devoted to position	 	compensation	allow	varices
NONE					
		 			
		1		 	
	<u></u>	<u> </u>		1	
				<u> </u>	
				1	
			<u> </u>	<u></u>	
Total number of other employees paid over \$50,000			<u>▶</u>		0
			Form	990-P	F (2015)

Form 990-PF (2015) 46 1 FUND 4	6-4160	/48	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)			
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		•	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	,	(c) Comper	nsation
NONE			
	_	,	
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities	<u> </u>		0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses	
1 N/A	+		
			0.
2			
	_		
3			
	-		
4			
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.		Amount	
1 NONE			
			0.
2			<u> </u>
All other program-related investments. See instructions.			
3 NONE			
	-		0.
Total. Add lines 1 through 3	>		0.
	For	m 990-PF	(2015)

	n 990-P⊦ (2015) 46 1 FUND	40-4100/40	Page 6
<u>P</u>	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, 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 709	,561.
b	Average of monthly cash balances	1b 105	,822.
C	Fair market value of all other assets		,311.
d	Total (add lines 1a, b, and c)	1d 1,382	,694.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2 282	<u>,236.</u>
3	Subtract line 2 from line 1d	3 1,100	, 4 58.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4 16	,507.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5 1,083	,951.
6	Minimum investment return Enter 5% of line 5	6 54	,198.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations at	nd certain	
	foreign organizations check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6		,198.
2a	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.)] <i>(</i>	
C	Add lines 2a and 2b	2c	277.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3 53	,921.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5 53	,921.
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 53	,921.
P	Qualifying Distributions (see instructions)		
	Qualitying bistributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a 18	,422.
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	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4 18	,422.
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	277.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6 18	,145.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for the section	
	4940(e) reduction of tax in those years.		

Form **990-PF** (2015)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
Distributable amount for 2015 from Part XI,	- · · ·	···· · · · · · · · · · · · · · · · ·		
line 7	·			53,921.
2 Undistributed income, if any, as of the end of 2015	:			, ',
a Enter amount for 2014 only		` <i>;</i>	18,422.	,
b Total for prior years:				,
		0.		
3 Excess distributions carryover, if any, to 2015:		\$,	
a From 2010				
b From 2011		, , '		
c From 2012				
d From 2013	\$\tau_{\tau_{\tau}} \tau_{\tau_{\tau}}	;	, ^	
e From 2014			,	. «
f Total of lines 3a through e	0.		\$ × <	· *,*
4 Qualifying distributions for 2015 from		•	22	
Part XII, line 4: ► \$ 18,422.	, , ,			<**
a Applied to 2014, but not more than line 2a	*		18,422.	
b Applied to undistributed income of prior	, *		*	\$ \infty \(\sigma \sig
years (Election required - see instructions)		0.	, , , , , , , , , , , , , , , , , , ,	,
c Treated as distributions out of corpus	_		, × × ×	*
(Election required - see instructions)	0.	<u> </u>	, , ,	· · · · · · · · · · · · · · · · · · ·
d Applied to 2015 distributable amount	. < /	*, ,,		0.
e Remaining amount distributed out of corpus	0.		, , , , , , , , , , , , , , , , , , ,	<u>, , , , , , , , , , , , , , , , , , , </u>
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount	0.	<u> </u>	`	0.
must be shown in column (a)))}	7	žį	%
6 Enter the net total of each column as	* 2°		, , ,	
indicated below:	, , , , , , , , , , , , , , , , , , ,	, . 2	\$ 17 EX	,
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.	` ` ` `	· »	
b Prior years' undistributed income. Subtract	, \ \	0.	÷ *	¢ ^
line 4b from line 2b	<u> </u>	0.	`	
c Enter the amount of prior years' undistributed income for which a notice of	\$ 12.7		, , 4 % '	1 (1)
deficiency has been issued, or on which	· ·			·
the section 4942(a) tax has been previously	*	0.	. > %	, * ' ' &
assessed d Subtract line 6c from line 6b. Taxable	*,			, , , , , , , , , , , , , , , , , , ,
amount - see instructions	**	0.	* *.	× ′ , , , , , , , , , , , , , , , , , ,
e Undistributed income for 2014 Subtract line	*	S		,
4a from line 2a. Taxable amount - see instr.	* * * * * * * * * * * * * * * * * * * *		0.	*\^ *\
f Undistributed income for 2015 Subtract) (; °)	
lines 4d and 5 from line 1. This amount must	7 7 78 7	,	· /\$	
be distributed in 2016	, \$ sec	^ ,	, , ,	53,921.
7 Amounts treated as distributions out of		2	`	4
corpus to satisfy requirements imposed by		<i>4</i> .		\$ \$* \$
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	0.	* ;	190 8 3 St St St	1 34 15 61
9 Excess distributions carryover to 2016.		, , , , , , ,	· · · · · · · · · · · · · · · · · · ·	,
Subtract lines 7 and 8 from line 6a	0.	* * *	· · · ** · · · ·	A
10 Analysis of line 9:		, ,	, , , , , , , , , , , , , , , , , , ,	^-
a Excess from 2011		* / * ;		,
b Excess from 2012	(),,,	8		,
c Excess from 2013			1 / 3	1.34
d Excess from 2014	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	S. S. M. Harrison		\$5 k 855 A 1 S S C S
e Excess from 2015		\$ \$4. \$4. 4. 4.5\(\alpha\) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	4	5 .000 DE
523581 11-24-15				Form 990-PF (2015)

Form 990-PF (2015) 46 1 FU					L60748 Page 10
Part XIV Private Operating F				N/A	
1 a If the foundation has received a ruling of		· · · · · ·	·		
foundation, and the ruling is effective fo	•	-	▶		
b Check box to indicate whether the found		ng foundation described		4942(j)(3) or 4	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	41.0044	Prior 3 years	1 40 0040	4.5.7
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		ļ			
c Qualifying distributions from Part XII,			İ		
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities			1		L
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter:					
(1) Value of all assets					
• •					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					-
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties) (2) Support from general public					
and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(iii)				- 	+
(3) Largest amount of support from					
an exempt organization		-		-	
(4) Gross investment income Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5 000 or mo	re in accets
at any time during t			ii die iodiidadoii	1188 40,000 01 1110	ic iii assets
<u> </u>					
1 Information Regarding Foundation	•	than 70/ of the total con	tributions recovered by the	foundation before the ele	as of any tay
a List any managers of the foundation where year (but only if they have contributed representation).			a idutions received by the	e touttuation before the cio	Se of any lax
SEE STATEMENT 7	, , , , , , , , , , , , , , , , , , ,				
b List any managers of the foundation wh	o own 10% or more of th	e stock of a cornoration	(or an equally large port	on of the ownership of a n	artnership or
other entity) of which the foundation ha			(2. a oquany largo port	and of the property of a p	
NONE					
2 Information Regarding Contribute	on. Grant. Gift. Loan.	Scholarship, etc., P	rograms:		
Check here ► X if the foundation of				not accept unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	ber or e-mail address of t	he person to whom app	lications should be addre	ssed:	
<u> </u>		р			
b The form in which applications should t	e submitted and informa	tion and materials they s	should include;		
c Any submission deadlines:		•••		· · . · . · . · . · . · . · . · . ·	-
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields	kinds of institutions or	other factors:	
y	_, o, goograpmo	,	., or momorio, or		

Grants and Contributions Paid During the Y	ear or Approved for Future I	Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (nome of business)	or substantial contributor	recipient		
Paid during the year				
ATIONAL CHRISTIAN FOUNDATION		PC	TO SUPPORT	
1265 RAINWATER DRIVE; SUITE 500			ORGANIZATION'S	
LPHARETTA, GA 30009			CHARITABLE AND	
			RELIGIOUS MISSIONS	18,42
		i		
	İ			
Total			► 3a	18,422
b Approved for future payment				
NONE				
110112				
			ļ	
Total			▶ 3b	(

1	Part XVI-A	Analysis of	Income-Producing	Activities
	1 00 () () ()	,a.y 0.0 0.		

	Unrelated h	usiness income	T Evolu	ded by section 512, 513, or 514	
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code	741100111	code		Tanotion modific
a	-		+-		
b	i i		+		
<u> </u>	-		┼	-1	
d			┼		
e			+		<u> </u>
f	_		+-		
g Fees and contracts from government agencies	<u> </u>		 		
2 Membership dues and assessments		<u> </u>	╁		
3 Interest on savings and temporary cash					
investments			-		· · · · · · · · · · · · · · · · · · ·
4 Dividends and interest from securities	3,87.8		-		N. 1,
5 Net rental income or (loss) from real estate:					
a Debt-financed property			—		
b Not debt-financed property					
6 Net rental income or (loss) from personal	1				
property			ļ		
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					<u> </u>
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					_
11 Other revenue:				-	
a					
b					
c					
d	1 1				
e			1		
12 Subtotal. Add columns (b), (d), and (e)	_	0.	2 × 1/2×	0.	0.
13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>	•		13	
(See worksheet in line 13 instructions to verify calculations.	١				
Part XVI-B Relationship of Activities		olishment of Ex	empt	Purposes	
Line No. Explain below how each activity for which in			A contrib	outed importantly to the accord	nplishment of
▼ the foundation's exempt purposes (other the	an by providing funds	for such purposes).			
					<u> </u>
					
		·. ·			
			_		•
					·
				 .	
				-	
					Form 990-PF (2015

ra	LL VAII	Exempt Organ		isiers to a	and Transactions a	ina Relationsh	nps with Nonchar	itabie		
1	Did the o			v of the following	ng with any other organizati	on described in secti	on 501(c) of		Yes	No
•		•		•	27, relating to political organ		011 30 1(0) 01			
		from the reporting found	,, , ,			iizations.				
a	(1) Cash	, ,	ation to a noncharia	able exempt of	gamzanon or.			1a(1)		X
	(1) Casil (2) Other							1a(1)		X
h	Other tran							18(2)		
U		s of assets to a noncharita	ahla avamnt organiz	ation				1b(1)		х
	٠,	hases of assets from a no						1b(1)		X
	• •	al of facilities, equipment,	•	or garnzation				1b(2)		X
		bursement arrangements						1b(4)		X
	` '	s or loan guarantees	,					1b(5)		X
		rmance of services or me	embershin or fundra	usina salicitatio	ากร			1b(6)	 	X
c	` '	f facilities, equipment, ma	•	-				10(0)		X
	-		-		edule Column (b) should a	lways show the fair n	narket value of the goods		ets	
·		-		_	ed less than fair market vali	•	• .		010,	
		i) the value of the goods,				,				
(a) ∟	ine no	(b) Amount involved	1		e exempt organization	(d) Description	of transfers, transactions, and	sharing arra	angemen	nts
				N/A	•					
		· · · · · · · · · · · · · · · · · · ·								
										
			<u> </u>							
			<u> </u>							
			<u> </u>							
			 							
			 							
			 							
						<u> </u>				
			<u></u>							
	la tha fou	ndation dispaths as indispa	L affiliated with a	r rolated to and	e or more tax-exempt organ	rations described				
24		501(c) of the Code (othe	•	•	. •	izations described	ſ	Yes	T	□ No
		omplete the following sch	•	2)(3)) or in 3000	iidii 327 ·		L	163	ششبا	J 110
<u>v</u> _	11 163, 0	(a) Name of org			(b) Type of organization		(c) Description of relations	ship		
		N/A	<u>, </u>		1		,			
				······································	· · · · · · · · · · · · · · · · · · ·	<u> </u>				
_										
					accompanying schedules and s taxpayer) is based on all informa		M. any knowledge	ay the IRS o		
Sig	3n 🔽	-AMALIN	MAAlou - 11	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				turn with the own below		
He	🚩	× (<i>``MUMUITII</i>	·	x7-10-16	. Z	[L	X Yes		_ No
	Sigi	nature et officer or frústee	7		Date	Title	Obesis (FE) & LOTH			
		Print/Type preparer's na	апте	Preparer's s	ignature	Date	Check X if PTIN			
Paid		AMANDA MEA	MILED C	Viena na	Weathers	7/5/16	self- employed	0026	202	
	eparer	AMANDA WEA		שוןכן	P0 Firm's EIN ► 47-5	0836				
	e Only	Firm's name > WEATHERS TAX CONSULTING LLC					FIRM'S EIN F4/-5	3400	U 4	
-	y	Firm's address ► 37	708 SW COT	JRT AVE	NIIR		-			
				50023	-101		Phone no. 515-3	26-0	347	
		1 2111		30020				orm 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, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Employer identification number Name of the organization 46-4160748 46 1 FUND Organization type (check one) Section: Filers of: 501(c)(Form 990 or 990-EZ) (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 Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule K For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

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)

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

Employer identification number

46 1 FUND

46-4160748

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	SCOTT & KATHY BECKWITH 600 ARIZONA AVE. AMES, IA 50014	\$ <u>97,987.</u>	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	SCOTT & KATHY BECKWITH 600 ARIZONA AVE. AMES, IA 50014	\$100,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	SCOTT & KATHY BECKWITH 600 ARIZONA AVE. AMES, IA 50014	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	SCOTT & KATHY BECKWITH 600 ARIZONA AVE. AMES, IA 50014	\$ <u>455,000.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Oncash Occash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Ocomplete Part II for noncash contributions.)

523452 10-26-15

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

Name of organization

Employer identification number

46 1 FUND

46-4160748

art 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
	5,141 SHARES KEMPHARM (KMPH)		-
		 \$97,987.	12/30/15
(a)		(c)	
No. from Part I	(b) Description of noncash property given	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
į		\$	
(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
}			90, 990-EZ, or 990-PF) (2

523454 10-26-15

Part I

Part I

Part I

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

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

FORM 990-PF INTER	EST ON SAVIN	IGS AND TE	MPOR	ARY CASH I	NVESTMENTS	STATEMENT 1
SOURCE	REV	(A) REVENUE PER BOOKS		(B) NVESTMENT NCOME	(C) ADJUSTED NET INCOME	
THE BANCORP BANK			265.		265.	0.
TOTAL TO PART I, L		265.		265.	0.	
FORM 990-PF	DIVIDENDS	S AND INTE	REST	FROM SECU	RITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITA GAINS DIVIDEN		(A) REVENUE PER BOOKS	(B) NET INVES' MENT INCO	
FS ENERGY & POWER	1,667.	. 1	12.	1,555	. 1,55	5. 0.
FS GLOBAL CREDIT OPP A	2,015.		0.	2,015	. 2,01	5. 0.
SEI PRIVATE TRUST COMPANY SIERRA INCOME	8,480.	1,7	43.	6,737	. 6,73	7. 0.
CORPORATION	1,458.	•	5.	1,453	. 1,45	3. 0.
TO PART I, LINE 4	13,620.	1,8	60.	11,760	. 11,76	0.
FORM 990-PF		LEGA	L FE	ES		STATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOM	
LEGAL FEES		1,637	•	1,637.		0.
TO FM 990-PF, PG 1	, LN 16A	1,637	<u> </u>	1,637.		0.
	=					

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING AND TAX PREPARATION	6,450.	6,450.	0.	0.	
TO FORM 990-PF, PG 1, LN 16B	6,450.	6,450.	0.	0.	

FORM 990-PF OTHER DECREASES IN	NET ASSETS OR F	UND BALANCES	STATEMENT 5
DESCRIPTION			AMOUNT
ADJUSTMENT FOR FAIR MARKET VALUE	OF SECURITIES		112,167.
TOTAL TO FORM 990-PF, PART III, I	LINE 5		112,167.
FORM 990-PF	OTHER ASSETS		STATEMENT 6
FORM 990-PF DESCRIPTION	OTHER ASSETS BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	STATEMENT 6 FAIR MARKET VALUE
DESCRIPTION LIFE INSURANCE POLICY GEN WORTH	BEGINNING OF		FAIR MARKET
DESCRIPTION	BEGINNING OF YR BOOK VALUE	BOOK VALUE	FAIR MARKET VALUE

		
FORM 990-PF	PART XV - LINE 1A	STATEMENT 7
	LIST OF FOUNDATION MANAGERS	

NAME OF MANAGER

SCOTT BECKWITH KATHY BECKWITH