

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



DLN: 93491137019856

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

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

For	caler	ndar year 2015, or tax y	ear beginning 01-0	1-2015	, and	d ending 1	2-31-2015	
	e of four	ndation EVELYN BARKEMA				A Employer ide	entification numbe	er
		E TRUST				46-6233696		
Num	ber and	street (or P O box number if mail is r	not delivered to street address)	Room/suite		B Telephone nun	nber (see instruction	s)
PO	BOX 461	1				(641) 456-5196		
Cıty	or town,	state or province, country, and ZIP or	foreign postal code			C If exemption	application is pendin	g, check here 🕨 🦵
HAM	PTON, IA	50441						
G CH	neck all	that apply Initial return	Initial return of a fo	ormer public charity		D 1 Foreign on	ganizations, check h	ere 🕨 🗀
		Final return Address chang	A mended return e Name change			-	ganizations meeting	·
<u>u c</u>	ock tw	pe of organization	ŗ	foundation			k here and attach co Indation status was t	mputation erminated
		947(a)(1) nonexempt charitab	le trust 「Other taxable	e private foundation		•	1 507(b)(1)(A), chec	. —
		t value of all assets at end	JAccounting method Other (specify)	✓ Cash	l		tion is in a 60-mont	. —
		om Part II, col. (c), \$ 20,068,677	(Part I, column (d) must	be on cash basıs.)		under section	n 507(b)(1)(B), chec	k nere 🕝 j
	τŧΙ	Analysis of Revenue a	nd Expenses					Disbursements
		(The total of amounts in columns (necessarily equal the amounts in co	b), (c), and (d) may not	Revenue and expenses per	(b)	et investment income	Adjusted net (c) income	for charitable purposes
		instructions))	manni (u) (see	(a) books	(-)		(=,	(d) (cash basis only)
	1	Contributions, gifts, grants, e	tc , received (attach					
		schedule)						
	2	Check ► ✓ If the foundation	s not required to attach					
	,	Sch B	orary cach investments	66,368		46,419		
	3 4	Dividends and interest from s		67,341		61,514		
	- т 5а	Gross rents		457,606		457,606		
	ь	Net rental income or (loss)	337,543					
<u>Φ</u>	6a	Net gain or (loss) from sale of	fassets not on line 10	18,834				
₽	ь	Gross sales price for all asse	ts on line 6a					
Revenue	_	976,347	D = vt TV lvv = 2\			10.034		
	7 8	Capital gain net income (from Net short-term capital gain.				18,834		
	9	Income modifications						
	10a	Gross sales less returns and	1					
		allowances						
	b	Less Cost of goods sold						
	С	Gross profit or (loss) (attach	·					
	11	Other income (attach schedu						
	12	Total.Add lines 1 through 11		610,149		584,373		12 500
	13	Compensation of officers, dire Other employee salaries and		50,000		37,500		12,500
w	14 15	Pension plans, employee bene	_					
<u>\$</u>	16a	Legal fees (attach schedule).		9,670				9,670
Expenses	ь	Accounting fees (attach sche				6,100		
	c	O ther professional fees (attac	ch schedule)	_				
and Administrative	17	Interest	·	-				
trai	18	Taxes (attach schedule) (see		1,681		1,681		
Ē	19	Depreciation (attach schedule		91,250		91,250		
튿	20	Occupancy		22,816		22,816		
Δ Α	21	Travel, conferences, and mee	tıngs					
	22	Printing and publications						
Ē	23	Other expenses (attach sche	dule)	13,713		13,636		79
Operating	24	Total operating and administr	-					
<u>z</u>		Add lines 13 through 23		195,230		172,983		22,249
_	25	Contributions, gifts, grants pa		852,120				852,120
	26	Total expenses and disbursen 25	nents.Add lines 24 and	1,047,350		172,983		874,369
	27	Subtract line 26 from line 12						
	a	Excess of revenue over expen		-437,201				
	b	Net investment income (if neg				411,390		
	С	Adjusted net income(If negation	ve, enter -0 -)					

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year		f year
		should be for end-or-year amounts only (see instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	1.610.770	1 004 566	1 004 555
	2	Savings and temporary cash investments	1,619,770	1,004,566	1,004,566
	3	Accounts receivable -			
		Less allowance for doubtful accounts			
	4	Pledges receivable			
		Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts 🕨			
2	8	Inventories for sale or use			
ssets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U S and state government obligations (attach schedule)	793,571	947,894	967,032
	b	Investments—corporate stock (attach schedule)		o s	
	С	Investments—corporate bonds (attach schedule)	264,582	331,909	325,269
	11	Investments—land, buildings, and equipment basis -			
		Less accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans	L		
	13	Investments—other (attach schedule)	2,684,778	2,734,254	2,626,357
	14	Land, buildings, and equipment basis 18,293,677		leen	
		Less accumulated depreciation (attach schedule) 182,500	18,202,427		
	15	Other assets (describe •)	48,013	46,140	46,140
	16	Total assets(to be completed by all filers—see the			
		instructions Also, see page 1, item I)	23,613,141	23,175,940	20,068,677
	17	Accounts payable and accrued expenses			
S	18	Grants payable			
bilities	19	Deferred revenue			
Ē	20	Loans from officers, directors, trustees, and other disqualified persons			
Lia	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe)			
	23	Total liabilities(add lines 17 through 22)		0	
Ş		Foundations that follow SFAS 117, check here			
Balance		and complete lines 24 through 26 and lines 30 and 31.	22.642.444	22.475.040	
<u> </u>	24	Unrestricted	23,613,141	23,175,940	
ă	25	Temporarily restricted			
Fund	26	Permanently restricted			
Ξ.		Foundations that do not follow SFAS 117, check here			
. or		and complete lines 27 through 31.			
ets	27	Capital stock, trust principal, or current funds			
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds	22.642.444	22.475.040	
Net	30	Total net assets or fund balances(see instructions)	23,613,141		
_	31	Total liabilities and net assets/fund balances(see instructions)	23,613,141	23,175,940	
	rt III				
1		Total net assets or fund balances at beginning of year—Part II, column		- I I	22.642.44
~		with end-of-year figure reported on prior year's return)		 	23,613,141
2		Enter amount from Part I, line 27a		 	-437,201
3		Other increases not included in line 2 (itemize)			22.175.040
4		Add lines 1, 2, and 3			23,175,940
5 6		Decreases not included in line 2 (itemize) Total net assets or fund balances at end of year (line 4 minus line 5)—If		5	23,175,940
J		in ocal nec assets of fund paralices at ellu of year (IIIIe 4 IIIIIIus IIIIe 5)—f	aitii, colullii (D), l	1116 JU . U	∠ ⊃ , ⊥ / ⊃ , ⊃ 4 U

the Part VI instructions

Part	IV Capital Gains a	nd Lo	sses for Tax on Inve	stmer	nt Income					
			(s) of property sold (e g , re or common stock, 200 shs			How acquired P—Purchase (b) D—Donation	(a) (n	ate acquired no , day, yr)	Date sold (d) (mo , day, yr	
1 a	PUBLICLY TRADED S	ECURI	TIES			Р		15-06-01	2015-08-20	
ь	PUBLICLY TRADED S	ECURI	TIES			Р	20:	13-10-17	2015-06-01	
	PUBLICLY TRADED S	ECURI	TIES			Р	20:	13-10-17	2015-06-01	
d										
e										
(6	e) Gross sales price		Depreciation allowe (f) (or allowable)	d		or other basis expense of sale		Gain or (loss) (h) (e) plus (f) minus (g)		
a	20	0,602				22,11	0		-1,508	
ь	502	2,961				515,23	4		-12,273	
С	419	9,142				420,16	9		-1,027	
d										
е										
Сс	mplete only for assets sh	nowing	gain in column (h) and owne	ed by th	ie foundation	on 12/31/69		Gains (Col	(h) gain minus	
(i) F M V as of 12/31/69			A djusted basis (j) as of 12/31/69		Exc	ess of col (ı) col (j), ıf any	(I)	ol (k), but no	ot less than -0-) or (from col (h))	
а									-1,508	
ь									-12,273	
С									-1,027	
d										
e										
3	·	gaın or	t capital loss) (loss) as defined in sections (c) (see instru	If (los:	s), enter -0- 2(5) and (6)	,	2		18,834	
Dovt	-	-d 6	Section 4940(e) for R	la dina	ad Tay an	Not Investme	3	<u> </u>		
	-	ivate fo	undations subject to the se							
Was the	e foundation liable for the	section	14942 tax on the distribut under section 4940(e) Di				eriod?		┌ Yes ┌ No	
1 En	iter the appropriate amoui	nt ın ea	ch column for each year, s	ee ınstı	ructions befo	re making any en	ries			
	(a) e period years Calendar for tax year beginning in)	Adjus	(b) ted qualifying distributions	Net va	(c) alue of nonchar	Itable-use assets		(d) Distributio	n ratio	
year (2014		567,793			9,834,256	((cor (b) divided	0 057736	
	2013		231,418			2,940,707			0 078695	
	2012		968			2,549,471			0 000380	
	2011									
	2010									
2	Total of line 1, column	(d)					2		0 136811	
3			the 5-year base period—di [.] ation has been in existenc				3		0 045604	
4	Enter the net value of i	nonchai	ritable-use assets for 201!	5 from l	Part X, line 5	[4		21,170,342	
5	Multiply line 4 by line 3	3				[5		965,452	
6	Enter 1% of net invest	tment ır	come (1% of Part I, line 2	7b)		[6		4,114	
7	Add lines 5 and 6					[7		969,566	
8	Enter qualifying distrib	utions	from Part XII, line 4				8		874.369	

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See

	990-PF (2015) t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4	1940(a)	or 4948—se	e nage	18 of	the inst	ructio		age 4
	Exempt operating foundations described in section 4940(d)(2), check here		, 01 4540 30	c pag	10 01	the mac	ructio	113)	
1a	and enter "N/A" on line 1								
	Date of ruling or determination letter			}					
	(attach copy of letter if necessary-see instructions)				4				
b	Domestic foundations that meet the section 4940(e) requirements in Part V	, cneck)	1				3,228
_	here ► Tand enter 1% of Part I, line 27b			•					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organiz Part I, line 12, col (b)	ations	enter 4% of						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable fou	ındatıon	s only Othe	rs					
	enter -0-)				2				
3	Add lines 1 and 2			•	3			8	3,228
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable fou enter -0-)	undation	ns only Othe	ers	4				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, e	enter-0)		5				3,228
6	Credits/Payments								
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	6	,800					
b	Exempt foreign organizations—tax withheld at source	6b							
C	Tax paid with application for extension of time to file (Form 8868)	6с							
d	Backup withholding erroneously withheld	6d							
7	Total credits and payments Add lines 6a through 6d		_	_	7			6	5,800
8	Enter any penalty for underpayment of estimated tax. Check here 🔽 if Form			ୟ	8				
9	Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed .				9				428,1
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount	nt over		•	10				
11 Par	Enter the amount of line 10 to be Credited to 2015 estimated tax ► t VII-A Statements Regarding Activities		Refunded		11				
1a	During the tax year, did the foundation attempt to influence any national, state	o orloa	ral logiclatio	n or di	<u></u>			Yes	No
Ia	It participate or intervene in any political campaign?	.e, or 100	ai legisiatio	ii oi ui	u		1a	163	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for	nolitica	l nurnoses (see In	• • structi	ons			110
_	for definition)?					•	1b		No
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities	s and co	opies of any n	nateria	ls				
	published or distributed by the foundation in connection with the activities.								
С	Did the foundation file Form 1120-POL for this year?						1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) impo	osed du	rıng the year						
	(1) On the foundation 🕨 \$ (2) On foundation managers								
е	Enter the reimbursement (if any) paid by the foundation during the year for po	litical e	xpenditure to	ax imp	osed				
	on foundation managers 🕨 \$								
2	Has the foundation engaged in any activities that have not previously been re	eported	to the IRS?	• •			2		No
2	If "Yes," attach a detailed description of the activities. Has the foundation made any changes, not previously reported to the IRS, in					_			
3	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a con-	_	_	•		>	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more of						4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	_					4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction du						5		No
	If "Yes," attach the statement required by General Instruction T.	-	•						
6	Are the requirements of section 508(e) (relating to sections 4941 through 49	945)sa	itisfied eithei	r					
	By language in the governing instrument, or								
	By state legislation that effectively amends the governing instrument so the state of the s	hat no r	mandatory di	rectio	ns				
	that conflict with the state law remain in the governing instrument? . $$.						6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year	r? <i>If "Ye</i> :	s," complete l	Part II	, col. (c),			
_							7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered	(see ins	structions)						
h	► IA If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 9	90-PF	to the Attorn	nev					
	General (or designate) of each state as required by General Instruction G? If						8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the				(j)(3)				
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (s		_						
	If "Yes," complete Part XIV						9		No
10	Did any persons become substantial contributors during the tax year? If "Yes	," attacl	h a schedule l	isting	their n	ames			
	and addresses.						10		No

Par	Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	. 12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ► <u>N/A</u>			
14	The books are in care of ►ZOE BROWN Telephone no ►(641	1)456	-5196	
	Located at ▶700 FEDERAL STREET SOUTH PO BOX 461 HAMPTON IA ZIP+4 ▶50441			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here		▶ □	-
1.5	and enter the amount of tax-exempt interest received or accrued during the year	•	- ,	
			1	l
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over	1	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country			
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
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(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? Yes V 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)			
ь	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	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,			
Ī	that were not corrected before the first day of the tax year beginning in 2015?	1c		
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 Vo			
	If "Yes," list the years • 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement—see instructions)	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20, 20, 20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section $4943(c)(7)$) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	if the foundation had excess business holdings in 2015.)	3b	1	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	1	No

Pai	Tt VIII-B Statements Rega	arding Activities for	Which Form 4720	May Be Required (Cont	tinued)		
5a	During the year did the foundation	on pay or incurany amoun	t to				
	(1) Carry on propaganda, or othe	erwise attempt to influence	e legislation (section 49	45(e))? Tyes F	No		
	(2) Influence the outcome of any	specific public election (see section 4955), or to	carry			
	on, directly or indirectly, any	voter registration drive?.		T Yes F	No		
	(3) Provide a grant to an individu	ual for travel, study, or oth	ner sımılar purposes?	┌ Yes ┌	√ No		
	(4) Provide a grant to an organiz			scribed			
				T Yes 🖟	No		
	(5) Provide for any purpose othe			·			
	educational purposes, or for			Г Y es Г	No		
b	If any answer is "Yes" to 5a(1)-						
	Regulations section 53 4945 or				5b		
	Organizations relying on a curre						
c	If the answer is "Yes" to questio						
_	tax because it maintained expen				- No		
	If "Yes," attach the statement requ						
6a	Did the foundation, during the ye			premiums on			
	a personal benefit contract?			·	√ No		
ь	Did the foundation, during the ye			· · · · · · · · · · · · · · · · · · ·			
_	If "Yes" to 6b, file Form 8870.	, p., p,,	,		. 65		
7a	At any time during the tax year,	was the foundation a party	to a prohibited tay shel	ter transaction?	V No		
	If yes, did the foundation receive		•	·			
	· · ·	· · ·	<u> </u>	ation Managers, Highly			
Pa	rt VIII and Contractors	it officers, birectors	s, Trastees, Touride	ition Hanagers, inging	raid Employees,		
1	List all officers, directors, trustee	es, foundation managers a	nd their compensation (see instructions).			
		Title, and average (c		(d)			
	(a) Name and address	hours per week	(c) Compensation(If not paid, enter	Contributions to employee benefit plans	Expense account, (e) other allowances		
		(b) devoted to position	-0-)	and deferred compensation			
ZOE E	BROWN	TRUSTEE	50,000		†		
700	SOUTH FEDERAL ST	25 00	,				
MAH	1PTON,IA 50441						
2	Compensation of five highest-pai	d employees (other than	those included on line 1-	-see instructions). If none, e	nter "NONE."		
	(a)	Title, and aver	age	Contributions to	F		
Nar	me and address of each employee			employee benefit plans and deferred	Expense account, (e) other allowances		
	more than \$50,000	(b) devoted to posi	tion	(d) compensation			
10 N	NE						
							
	I number of other employees hald			<u> </u>			

Part VIII Information About Officers, Directors, Trust and Contractors (continued)	tees, Foundation Managers, Hi	ghly Paid Employees,
3 Five highest-paid independent contractors for professional services	(see instructions). If none, enter "NON	NE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		•
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include re organizations and other beneficiaries served, conferences convened, research papers pro		er of Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments	(see instructions)	
Describe the two largest program-related investments made by the foundation during	the tax year on lines 1 and 2	A mount
1 N/A		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		▶

Form 990-PF (2015) Part X Minimum Investment Return

- (-	(All domestic foundations must complete this part. Foreign foundations, see instruction	ıs.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	3,819,622
b	A verage of monthly cash balances	1b	1,636,000
c	Fair market value of all other assets (see instructions)	1c	16,037,111
d	Total (add lines 1a, b, and c)	1d	21,492,733
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	21,492,733
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	322,391
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	21,170,342
6	Minimum investment return. Enter 5% of line 5	6	1,058,517
Par	Tit XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certificate here ► ☐ and do not complete this part.)	rtaın for	eign organizations
1	Minimum investment return from Part X, line 6	1	1,058,517
2a	Tax on investment income for 2015 from Part VI, line 5 2a 8,228		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		
c	Add lines 2a and 2b	2c	8,228
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,050,289
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1,050,289
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	1,050,289
Par	t XII Qualifying Distributions (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	874,369
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
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	874,369
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	874,369
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth	er the fo	undation qualifies for

Р	art XIII Undistributed Income (see inst	ructions)			
		(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1	Distributable amount for 2015 from Part XI, line 7				1,050,289
	Undistributed income, if any, as of the end of 2015				
а					
ь	Total for prior years 20, 20, 20				
	Excess distributions carryover, if any, to 2015				
а	From 2010				
b	From 2011				
c	From 2012				
d	From 2013				
е	From 2014				
f	Total of lines 3a through e	214,185			
4	Qualifying distributions for 2015 from Part				
	XII, line 4 🕨 \$874,369				
а	Applied to 2014, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2015 distributable amount				874,369
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2015	175,920			175,920
	(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:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	38,265			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
C	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable amount				
	—see instructions				
е	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount—see				
_	instructions				
Т	Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must				
	be distributed in 2015				0
7	A mounts 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	38,265			
10	Analysis of line 9				
	Excess from 2011				
b	Excess from 2012				
c	Excess from 2013				
d	Excess from 2014 38,265				
е	Excess from 2015				

P	art XIV	Private Operating Foundati	ions (see ınstrı	ictions and Part	VII-A, question	າ 9)	
1a		dation has received a ruling or determ , and the ruling is effective for 2015,			- I		
b	Check box	to indicate whether the organization	is a private opera	ting foundation des	scribed in section	☐ 4942(1)(3) or	T 4942(1)(5)
		esser of the adjusted net	Tax year		Prior 3 years		
		m Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
		t return from Part X for each	(-,	(-,	(-,	(-,	
b 8		2a					
		distributions from Part XII,					_
		ach year listed					
d		ncluded in line 2c not used					
	•	active conduct of exempt					
e		distributions made directly					
	for active	conduct of exempt activities					
		ne 2d from line 2c					
3 (a, b, or c for the e test relied upon					
а		alternative test—enter					
-		of all assets					
	(2) Value	of assets qualifying					
		section 4942(j)(3)(B)(i)					
b		nt" alternative test— enter 2/3					
		n investment return shown in e 6 for each year listed					
c	· ·	alternative test—enter					
	(1) Total	support other than gross					
		ment income (interest,					
		nds, rents, payments curities loans (section					
)(5)), or royalties)					
		ort from general public					
		or more exempt zations as provided in					
	_	on 4942(j)(3)(B)(III)					
		st amount of support					
		n exempt organization					
Dа		investment income upplementary Information (C	 	nart only if th	 e organizatio	 n had \$5 000 o	r more in
T G		ssets at any time during the			e organizació	45,000 c	
1	Information	on Regarding Foundation Managers:		•			
а		anagers of the foundation who have co close of any tax year (but only if they					lation
	belore the	close of any tax year (but only if they	nave contributed	more than \$5,000) (See Section 5	07(d)(2))	
ь		anagers of the foundation who own 10				large portion of th	e
	ownership	of a partnership or other entity) of wh	ich the foundation	has a 10% or gre	eater interest		
2	Information	on Regarding Contribution, Grant, Gift	· Loan Scholarshi	n etc Programs:			
_		e 🔭 ıf the foundation only makes co				nd does not accept	
	unsolicited	requests for funds If the foundation	makes gifts, gran				
	other cond	itions, complete items 2a, b, c, and d					
а		, address, and telephone number or e-	mail address of tl	he person to whom	applications sho	uld be addressed	
		WN TRUSTEE					
	700 S FEI	N,IA 50441					
	(641)456	•					
b	The form i	n which applications should be submi	tted and informati	on and materials t	hey should includ	e	
		TION FOR FUNDS FORM FULLY FILI					
		ATTACHED, OR CERTIFICATION TO	HAT THE ORGAN	IIZATION IS A PO	OLITICAL SUBDI	VISION OF THE	STATE IN
		IS LOCATED					
C	•	ssion deadlines					
		ER 30, 2016		-1			
d	factors	ctions or limitations on awards, such		·	·		
		ED TAX-EXEMPT CHARITABLE ORG ER, IOWA, INCLUDING BUT NOT L					

Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 852,120 **b** Approved for future payment

Enter gross amounts unless otherwise indicated					1	
		siness income	Excluded by section		(e) Related or exemp function income	
1 Program service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	(See instructions)	
a b						
c d						
e f						
 g Fees and contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and temporary cash investments			14	66,368		
4 Dividends and interest from securities 5 Net rental income or (loss) from real estate			14	67,341		
a Debt-financed property b Not debt-financed property			16	337,543		
Net rental income or (loss) from personal property						
7 Other investment income			14	18,834		
O Net income or (loss) from special events O Gross profit or (loss) from sales of inventory				10,031		
. L Other revenue a b						
c						
e						
2 Subtotal Add columns (b), (d), and (e) 3 Total.Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify			1	490,086 L 3		
Part XVI-B Relationship of Activities to						
			(e) of Part XVI-A c	antributed importa	ntly to	
Explain below how each activity for wh the accomplishment of the foundation's instructions)						
the accomplishment of the foundation's						
the accomplishment of the foundation's						
the accomplishment of the foundation's						
the accomplishment of the foundation's						
the accomplishment of the foundation's						
the accomplishment of the foundation's						
the accomplishment of the foundation's						
the accomplishment of the foundation's						
the accomplishment of the foundation's						
the accomplishment of the foundation's						
the accomplishment of the foundation's						
the accomplishment of the foundation's						
the accomplishment of the foundation's						
the accomplishment of the foundation's						
the accomplishment of the foundation's						
the accomplishment of the foundation's						

Part	XVI	Noncharitable					nsaction	is and i	keiationsnips	with			
		organization directly or i	ndırectly e	ngage	ın any of t	the following v						Yes	No
org	anızat	tions?											
a Tra	nsfers	s from the reporting foui	ndation to	a nonc	harıtable (exempt organ	ızatıon of						
(1)	Cas	h									1a(1)		No
(2)	Othe	erassets									1a(2)		No
b 0 th	ner tra	nsactions											
(1)	Sale	s of assets to a noncha	rıtable exe	mpt or	ganızatıoı	n					1b(1)		No
(2)	Purc	hases of assets from a	noncharita	able ex	empt orga	anızatıon					1b(2)		No
(3)	Rent	tal of facilities, equipme	nt, or othe	rasset	ts						1b(3)		No
(4)	Rein	nbursement arrangemer	nts								1b(4)		No
(5)	Loar	ns or loan guarantees.									1b(5)		No
(6)	Perfor	rmance of services or m	embership	or fun	draising s	olicitations.					1b(6)		No
c Sha	arıng o	of facilities, equipment,	mailing list	ts, oth	er assets,	or paid emplo	yees				1c		No
of t	he go	swer to any of the above ods, other assets, or se ansaction or sharing arr	rvices give angement,	en by t show i	he reporti In column	ng foundation (d) the value	If the fou of the goo	ndation r	eceived less thai	n fair marke	et value		
(a) Line	No No	(b) Amount involved	(c) Name	of nonch	narıtable exe	empt organizatior	1 (d) [Description	of transfers, transact	tions, and sha	ring arra	ngemer	nts
des	cribe	undation directly or indi d in section 501(c) of the complete the following (a) Name of organizatio	ne Code (o schedule		an sectioi		or in sectio			ption of relati	. TY e	es 🔽	No
Sign Here	the Info	der penalties of perjury, best of my knowledge a ormation of which prepai ***** Signature of officer or t	and belief, r er has any	ıt ıs tru	ie, correct		e Declara			May t May t return with t below	r) is bas he IRS di he prepa	sed on scuss th	all nis vn
		T	- I					Title			nstr)? 🔽	Yes I	No
		Print/Type preparer's R MICHAEL MCCO CPA		Prepa	rer's Sıgn	ature	Date 2016	-05-16	Check if self- employed ▶	PTIN P	000645	502	
Paid Prep Use Only		Firm's name ► HOGAN - HANSEN P	С				1		Firm's EIN ► 4	2-099121	2		
Only		PO BOX 1318 MASO	N CITY, IA	A 504	021318				Phone no (641	L)423-057	74		

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
a Paid during the year				
ABERDEEN VILLAGE 17500 W 119TH ST OLATHE,KS 660619524			GOOD SAMARITAN FUND	7,000
ACCESS INC 20 5TH ST NW PO BOX 268 HAMPTON,IA 50441			VAN	5,000
AL EXITO HAMPTON PO BOX 93531 DES MOINES,IA 50393			LATINO MENTORSHIP PROGRAM	3,000
ALEXANDER FIRE DEPARTMENT CITY OF ALEXANDER 419 HARRIMAN ST ALEXANDER,IA 50420			FIREMEN'S GEAR	11,500
ALEXANDER PUBLIC LIBRARY PO BOX 27 ALEXANDER,IA 50420			OVERHEAD LIGHTING,BATHROOM RENOV	18,000
APPLE DAYCARE INC PO BOX 693 SHEFFIELD, IA 50475			MINI-SPLIT HEAT PUMPS	5,000
BELMOND FIRE DEPARTMENT FOUNDATION 307 7TH ST NE BELMOND,IA 50421			INFRARED THERMAL IMAGING CAMERA	7,500
BELMOND PUBLIC LIBRARY FOUNDATION 440 EAST MAIN BELMOND,IA 50421			COMPUTERS AND SOFTWARE, OUTSIDE HAND	3,000
BELMOND YOUTH ROBOTICS TEAM 323 EAST MAIN BELMOND,IA 50421			COMPUTER, SOFTWARE AND BLDG COMPONEN	1,500
BELMOND-KLEMME COMM SCHOOLS 411 10TH AVE NE BELMOND,IA 50421			SCHOLARSHIPS	33,000
BETHANY REFORMED CHURCH PO BOX 52 BELMOND,IA 50421			CHAIRLIFTS	6,000
BRIDGE OF HOPE PO BOX 623 HAMPTON,IA 50441			TV/DVD AND MOBILE CART, ACTIVITIES	2,000
CAL CSD 1441 GULL AVE LATIMER,IA 50452			MUSIC INSTRUMENTS AND EQUIPMENT	13,700
CAL EDUCATION FOUNDATION 1441 GULL AVE LATIMER,IA 50452			SCHOLARSHIPS	17,600
CARING PREGNANCY CENTER 830 15TH ST SW SUITE 1 MASON CITY,IA 50401			BABY ESSENTIALS FOR BABY BUCKS	4,000
Total				852,120

Recipient	If recipient is an individual,	Foundation	Purpose of grant or	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
CITY OF ALEXANDER PO BOX 1 ALEXANDER, IA 50420			STANDBY GENERATOR	20,000
CITY OF BELMOND LUICK MEM SWIMMING 908 1ST ST SE BELMOND,IA 50421			CHAIRS, TABLES, BENCHES	5,000
CITY OF SHEFFIELD PO BOX 252 SHEFFIELD,IA 50475			RESTROOM FOR CITY PARK	10,000
CITY OF MESERVEY PO BOX 246 MESERVEY,IA 50457			PUMP HOUSE	8,000
CLEAN UP CLOSET 100 CENTRAL AVE E HAMPTON,IA 50441			CLEANING PRODUCTS AND TOILETRIES	1,500
COMMUNITY KITCHEN OF NORTH IOWA IN PO BOX 58 MASON CITY,IA 50401			EVENING MEAL PROGRAM	2,000
COULTER COMMUNITY CENTER PO BOX 62 COULTER,IA 50431			NEW SIDING AND SOFFITS	11,500
COULTER PUBLIC LIBRARY PO BOX 87 COULTER,IA 50431			READING/COMPUTER AREA UPDATE	1,000
COULTER VOLUNTEER FIRE DEPARTMENT CITY OF COULTER PO BOX 5 COULTER,IA 50431			FIREHOSE AND NOZZLE	4,200
CRISIS INTERVENTION SERVICE PO BOX 656 MASON CITY, IA 50402			NEEDS FOR VICTIMS AND FAMILIES	5,000
DUMONT COMMUNITY LIBRARY 602 2ND ST PO BOX 159 DUMONT,IA 50625			COMMUNITY ROOM REMODEL	4,500
DUMONT PARKS AND REC 720 3RD ST DUMONT,IA 50625			WELLNESS TRACK SEALANT/LANDSCAPING	5,000
DUMONT REFORMED CHURCH 912 3RD ST BOX 247 DUMONT,IA 50625			ANNUAL DISTRIBUTION	20,000
DUMONT VOLUNTEER FIRE DEPARTMENT CITY OF DUMONT 625 1ST ST BOX 303 DUMONT,IA 50625			GENERATOR	2,700
ELLSWORTH COLLEGE 1100 COLLEGE AVE IOWA FALLS,IA 50126			INFUSION PUMP FOR NURSING STUDENTS	4,000
Total				852,120

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
·	or substantial contributor			
a Paid during the year				
FIRESIDE LTD 11241 US HWY 65 IOWA FALLS,IA 50126			NEW ROOF FOR 12 STEP MTG HOUSE	5,000
FIRST REFORMED CHURCH 214 BROWN ST ALEXANDER,IA 50420			ANUAL DISRIBUTION	20,000
FIRST REFORMED CHURCH 620 2ND ST MESERVEY,IA 50457			ANNUAL DISTRIBUTION	20,000
FRANKLIN COUNTY 4-H FOUNDATION 3 FIRST AVE NW HAMPTON,IA 50441			BUILDING ADDITION W/ RESTROOMS	20,000
FRANKLIN COUNTY FAIR FOUNDATION PO BOX 442 HAMPTON,IA 50441			PLEASANT HILL CHURCH REPAIRS	4,000
FRANKLIN COUNTY FOOD PANTRY 123 1ST AVE SW HAMPTON,IA 50441			FOOD PRODUCTS	5,000
FRANKLIN COUNTY MINISTERIAL ALLIANC PO BOX 354 HAMPTON,IA 50441			FRANKLIN CO CRISIS FUND	5,000
FRANKLIN COUNTY PUBLIC HEALTH 1600 CENTRAL AVE E HAMPTON,IA 50441			SUPPLIES AND EQUIP FOR FOOT CLINICS	1,250
FRANKLIN GENERAL HOSPITAL FOUDATION 1720 CENTRAL AVE E HAMPTON,IA 50441			PORTABLE X-RAY MACHINE	25,000
FRANKLIN WELLNESS CENTER 1514 CENTRAL AVE E HAMPTON,IA 50441			AIR HANDLERS/POOL AREA/ ELLIPTICAL	18,000
FULLY CHARGED FIRST LEGOTEAM 1248 TAYLOR AVE BELMOND,IA 50421			ROBOT MOTORS, PLAYING FIELD, REGISTR	330
GOODELL AMERICAN LEGION 407 W MAIN BELMOND,IA 50421			TRAILER/PROJECTOR/SOUND SYST	6,500
GOVERNOR'S CHARITY STEER SHOW 1441 PLEASANT ST DES MOINES,IA 50314			RONALD MCDONALD HOUSES (IOWAO	10,000
HAMPTON COMMUNITY CHRISTIAN DAY CAR 104 12TH AVE NE HAMPTON,IA 50441			2 WASHERS/DRYERS	3,000
HAMPTON FIRE DEPARTMENT 122 1ST AVE NW HAMPTON,IA 50441			PICKUP FOR GRASS/FIELD FIRES	13,000
Total			▶ 3a	852,120

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
HAMPTON POLICE DEPARTMENT 17 2ND ST NW HAMPTON,IA 50441			CAMERA SYSTEM	1,750
HAMPTON SENIOR CENTER 23 FIRST ST HAMPTON,IA 50441			ICE CREAM FREEZERS, CARD TABLES	2,500
HAMPTON-DUMONT CSD 114 11TH PLACE NE HAMPTON,IA 50441			READING BUDDIES PR, INSTR REP, STEM	15,600
HAMPTON-DUMONT SCHOLARSHIP FUND 501 OAK HILL DR HAMPTON,IA 50441			SCHOLARSHIPS	75,200
IMMANUEL REFORMED CHURCH 3157 130TH ST BELMOND,IA 50421			ANNUAL DISTRIBUTION	20,000
IOWA RIVER PLAYERS PO BOX 22 BELMOND,IA 50421			LED LIGHTING UPGRADE	3,400
LA LUZ HISPANA 116 FIRST AVE NE HAMPTON,IA 50441			COMPUTER LAB UPDATE	2,500
LATIMER FIRE DEPARTMENT CITY OF LATIMER 115 S DONOVAN ST BOX 552 LATIMER,IA 50452			BUILDING ADDITION	7,500
MERCY MEDICAL CENTER FOUNDATION - N 1000 4TH ST SW MASON CITY,IA 50401			NURSING SCHOLARSHIPS MATCHING CAMPAI	10,000
MESERVEY FIRE & RESCUE 428 1ST ST MESERVEY,IA 50457			FIRE STATION ADDITION	9,000
MESERVEY PUBLIC LIBRARY 719 1ST STREET MESERVEY,IA 50457			DVD RACK, TV, BLUE-RAY, COMPUTERS	8,500
MISSION THORNTON INC PO BOX 92 THORNTON,IA 50479			FENCE/BASKETBALL HOOPS FOR CITY BB	8,700
MOSAIC IN NORTHERN IOWA 210 NW 2ND SE CLARION,IA 50525			NEEDS OF THOSE W/ INTELLECTUAL DISAB	2,000
MY HAPPY PLACE PO BOX 982 MASON CITY, IA 50401			2-BEDROOM MAKEOVERS	4,000
NIACC 500 COLLEGE DRIVE			CAPITAL CAMPAIGN FOR	25,000

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
NIYFC-FRANKLIN COUNTY PO BOX 581 HAMPTON,IA 50441			CAMP SCHOLARSHIPS/2- DOORS	10,500
NORTH IA VOCATIONAL CTR (NIVC) 1225 S HARRISON AVE MASON CITY,IA 50401			VIDEO DEV FOR SEARCH PROGRAM	3,000
NORTH CENTRAL IA AG IN THE CLASS 65 STATE ST GARNER,IA 50438			AG EDUCATION	2,500
OPPORTUNITY VILLAGE PO BOX 622 CLEAR LAKE,IA 50428			CUBE VAN	30,000
RELAY FOR LIFE-FRANKLIN COUNTY AMERICAN CANCER SOCIETY 204 E GILMAN SHEFFIELD, IA 50475			CANCER RESEARCH	10,000
REEVES TOWNSHIP FRANKLIN COUNTY 879 MALLARD AVE HAMPTON,IA 50441			MAYESVILLE SCHOOL HOUSE WINDOWS	2,500
ROCKWELL COMMUNITY FIRE SERVICE PO BOX 626 ROCKWELL,IA 50469			AIR COMPRESSOR	4,400
ROCKWELL-SWALEDALE EMT'S 3 WALNUT COUT ROCKWELL,IA 50469			FIRST RESPONDERS AMBULANCE	25,000
ROWAN FIRE DEPARTMENT PO BOX 97 ROWAN,IA 50470			FIREMEN'S GEAR	3,000
ROWAN PLAYGROUND COMMITTEE 3030 220TH ST ROWAN,IA 50470			PEA ROCK FOR PUBLIC PLAYGROUND	990
SHEFFIELD CARE CENTER 100 BENNETT DR SHEFFIELD,IA 50475			NEW RANGE, OVEN AND GRIDDLE	5,700
SOCIETY TO PRESERVE ANTIQUATED TOWN 420 PATRICK ST SE GOUGHERTY,IA 50433			WINDOWS	2,000
SPECIAL KIDS SPECIAL LOVE PO BOX 1703 MASON CITY,IA 50402			SOCIALLY SAFE EVENTS/ KIDS W/AUTISM	4,000
ST PAUL'S LUTHERAN SCHOOL 404 W MAIN ST LATIMER,IA 50452			GEOTHERMAL SYSTEM	10,000
TEACHING & LEARNING IN CHRIST PRESC 304 3RD AVE NE BELMOND,IA 50421			BUILDING BLOCKS, SANDBOX	1,000
Total			▶ 3a	852,120

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	A mount
a Paid during the year				
THE NEW LYRIC THEATRE BELMOND AREA ARTS COUNCIL 431 EAST MAIN ST BELMOND,IA 50421			ROOF REPLACEMENT	20,000
THE WINDSOR THEATER 103 FEDERAL ST HAMPTON,IA 50441			BAT/RODENT EXCLUSION AND PREVENTION	7,800
THORNTON EMS ASSOCIATION PO BOX 193 THORNTON,IA 50479			WINE III CELL PHONE AND TABLET	1,000
UNIVERSITY OF IOWA FOUNDATION CHILDREN'S HOSPITAL PO BOX 4550 IOWA CITY,IA 52244			CHILDREN'S HOSPITAL NEW BLDG FD	18,000
UPPER DES MOINES OPPORTUNITY INC 221 WEST BROADWAY EAGLE GROVE,IA 50533			EMERGENCY SERVICES, BELMOND, IA	2,500
WEST FORK CSD 504 PARK ST SHEFFIELD, IA 50475			CARDIOVASCULAR EQUIP FOR WELLNESS	15,000
WEST FORK SCHOLARSHIP FUND 215 N 7TH ST SHEFFIELD,IA 50475			2014 SCHOLARSHIPS- 600/ELIGIBLE GRAD	38,000
WINGS OF REFUGE PO BOX 562 IOWA FALLS,IA 50126			SAFE HOME FOR VICTIMS	11,800
WRIGHT CO HISTORICAL SOCIETY ROWAN CHAPTER 905 W BROADWAY ST ROWAN,IA 50470			ROWAN MUSEUM	3,300
WRIGHT COUNTY HOSPICE 115 1ST ST SE CLARION,IA 50425			WAFFLE CUSHIONS AND PORTABLE SCANNER	2,200
WRIGHT COUNTY PUBLIC HEALTH & HOSPI 115 1ST ST SE CLARION,IA 50525			VACCINE REFRIGERATOR/FREEZER	4,000
ZION REFORMED CHURCH 2029 JONQUIL AVE SHEFFIELD, IA 50475			ANNUAL DISTRIBUTION	20,000
Total				852,120

TY 2015 Accounting Fees Schedule

Name: FOSTER & EVELYN BARKEMA

CHARITABLE TRUST

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INDIRECT ACCOUNTING FEES	6,100	6,100		

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2015 Depreciation Schedule

Name: FOSTER & EVELYN BARKEMA

CHARITABLE TRUST

EIN: 40-6233696									
Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
LAND NW OF 36-94-24 HANCOCK	2013-08-30	1,480,450							
TILE NW OF 36-94-24 HANCOCK	2013-08-30	164,000	8,200	S/L	20 0000	8,200	8,200		
LAND NE OF 1-95-22 CERRO GORDO	2013-08-30	1,540,028							
TILE NE OF 1-95-22 CERRO GORDO	2013-08-31	171,000	8,550	S/L	20 0000	8,550	8,550		
LAND W 1/2 OF 25-93- 22 FRANKLIN	2013-08-30	2,808,006							
TILE W 1/2 OF 25-93-22 FRANKLIN	2013-08-30	311,000	15,550	S/L	20 0000	15,550	15,550		
LAND NW OF 34-93-22 FRANKLIN	2013-08-30	1,203,293							
TILE NW OF 34-93-22 FRANKLIN	2013-08-30	133,000	6,650	S/L	20 0000	6,650	6,650		
LAND SW OF 21-92-22 FRANKLIN	2013-08-30	1,395,308							
TILE SW OF 21-92-22 FRANKLIN	2013-08-30	155,000	7,750	S/L	20 0000	7,750	7,750		
LAND NE OF 9-92-22 FRANKLIN	2013-08-30	1,306,695							
TILE NE OF 9-92-22 FRANKLIN	2013-08-30	145,000	7,250	S/L	20 0000	7,250	7,250		
LAND NE OF 35-93-22 FRANKLIN	2013-08-30	1,341,158							
TILE NE OF 35-93-22 FRANKLIN	2013-08-30	148,000	7,400	S/L	20 0000	7,400	7,400		
LAND NE OF 34-93-22 FRANKLIN	2013-08-30	1,242,592							
TILE NE OF 34-93-22 FRANKLIN	2013-08-30	138,000	6,900	S/L	20 0000	6,900	6,900		
LAND VAR OF 5-92-22 FRANKLIN	2013-08-30	2,810,560							
TILE VAR OF 5-92-22 FRANKLIN	2013-08-30	312,000	15,600	S/L	20 0000	15,600	15,600		
LAND SW OF 4-92-22 FRANKLIN	2013-08-30	1,340,587							
TILE SW OF 4-92-22 FRANKLIN	2013-08-30	148,000	7,400	S/L	20 0000	7,400	7,400		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491137019856

TY 2015 Investments Corporate Bonds Schedule

Name: FOSTER & EVELYN BARKEMA

CHARITABLE TRUST

Name of Bond	End of Year Book Value	End of Year Fair Market Value
CORPORATE BONDS	331,909	325,269

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - DLN: 93491137019856

TY 2015 Investments Government Obligations Schedule

Name: FOSTER & EVELYN BARKEMA

CHARITABLE TRUST

EIN: 46-6233696

US Government Securities - End of

Year Book Value: 947,894

US Government Securities - End of

Year Fair Market Value: 967,032

State & Local Government Securities - End of Year Book

Value:

State & Local Government Securities - End of Year Fair Market Value: efile GRAPHIC print - DO NOT PROCESS | As Filed Data - DLN: 93491137019856

TY 2015 Investments - Other Schedule

Name: FOSTER & EVELYN BARKEMA

CHARITABLE TRUST

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
ETF'S AND CEF'S	AT COST	313,211	335,551
MUTUAL FUNDS	AT COST	2,004,219	1,876,752
UNIT TRUSTS	AT COST	416,824	414,054

TY 2015 Land, Etc. Schedule

Name: FOSTER & EVELYN BARKEMA

CHARITABLE TRUST

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
	1,825,000	182,500	1,642,500	15,099,313
FARMLAND	16,468,677		16,468,677	

TY 2015 Legal Fees Schedule

Name: FOSTER & EVELYN BARKEMA

CHARITABLE TRUST

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
	1,900			1,900
ADMINISTRATION COSTS	7,770			7,770

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491137019856

TY 2015 Other Assets Schedule

Name: FOSTER & EVELYN BARKEMA

CHARITABLE TRUST

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
AVIVA ANNUITY	48,013	46,140	46,140

TY 2015 Other Expenses Schedule

Name: FOSTER & EVELYN BARKEMA

CHARITABLE TRUST

Descript ion	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
RENTAL REAL ESTATE				
INSURANCE	370	370		
DRAINAGE ASSESSMENT	5,282	5,282		
FARM REPAIRS	345	345		
EXPENSES				
OFFICE EXPENSE	158	79		79
INSURANCE	1,775	1,775		
TIMING DIFFERENCES	5,783	5,785		

TY 2015 Taxes Schedule

Name: FOSTER & EVELYN BARKEMA

CHARITABLE TRUST

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ESTIMATED PAYMENT (2015)	1,681	1,681		
REAL ESTATE TAXES				

Additional Data

Software ID: Software Version:

EIN: 46-6233696

Name: FOSTER & EVELYN BARKEMA

CHARITABLE TRUST