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Form **990-PF**

Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0052

Department of the Treasury ▶ Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf. Internal Revenue Service APR 13, 2015 2015 För calendar year 2015 or tax year beginning and ending DEC 31, A Employer identification number Name of foundation THE MORGAN E. CLINE PERPETUAL CHARITABLE FOUNDATION 47-7016421 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number BRADLEY BANK BLDG 2ND FLR 307 N 13TH ST 641-856-2746 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here 52544 CENTERVILLE, ΙA G Check all that apply: X Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation X Address change Name change Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated __] Section 4947(a)(1) nonexempt charitable trust _____ Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: X Accrual If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here 5,045,615. (Part I, column (d) must be on cash basis) ▶\$ Part I | Analysis of Revenue and Expenses (d) Disbursements (c) Adjusted net (a) Revenue and (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) expenses per books income income Contributions, gifts, grants, etc., received N/A 5,050,000 2 Check If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on In ECEIVED 0. 7 Capital gain net income (from Part AUG 2 2 2016 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances OGDEN. UT b Less Cost of goods sold c Gross profit or (loss) 11 Other income 0. 5,050,000 12 Total Add lines 1 through 11 0. 0. 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees **b** Accounting fees 찟 STMT 1 2,750 0. 2,750 c Other professional fees and Administrative 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses
24 Total operating
expenses. Add
contributions of 1,635 0 1,635. STMT 2 24 Total operating and administrative 0 4,385. 4,385 expenses. Add lines 13 through 23 0 25 Contributions, gifts, grants paid 26 Total expenses and disbursements 0 4,385. 4,385 Add lines 24 and 25 27 Subtract line 26 from line 12: 5,045,615 a Excess of revenue over expenses and disbursements 0. b Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-) LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2015)

N/A

THE MORGAN E. CLINE PERPETUAL CHARITABLE FOUNDATION

Fo	rm 99	0-PF (2015) CHARITABLE FOUNDATION		<u>47-'</u>	7016421 Page 2
	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
<u></u>	arı	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1、	Cash - non-interest-bearing		5,045,615.	5,045,615.
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable			
	1	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 ▶			
ţ	8	Inventories for sale or use			- ···
Assets	9	Prepaid expenses and deferred charges			
4	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 ▶			
	1	Less accumulated depreciation			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the			
_		instructions. Also, see page 1, item I)	0.	5,045,615.	5,045,615.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
iab	21	Mortgages and other notes payable			
_	22	Other liabilities (describe)			
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
	-	Foundations that follow SFAS 117, check here			
ý	l	and complete lines 24 through 26 and lines 30 and 31.		E 04E 61E	
Net Assets or Fund Balances	24	Unrestricted		5,045,615.	
alaı	25	Temporarily restricted			
d B	26	Permanently restricted			
Ë		Foundations that do not follow SFAS 117, check here			
P		and complete lines 27 through 31.			
sts	27	Capital stock, trust principal, or current funds			
SSE	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
¥,	29	Retained earnings, accumulated income, endowment, or other funds	0.	E 04E 61E	
ž	30	Total net assets or fund balances	U •	5,045,615.	
		The Life Life Control of the Life Control of t	0.	5,045,615.	
=	31	Total liabilities and net assets/fund balances	· · · · · · · · · · · · · · · · · · ·	5,045,615.	
F	art	Analysis of Changes in Net Assets or Fund B	Balances		
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		at agree with end-of-year figure reported on prior year's return)		1	0.
2	•	r amount from Part I, line 27a		2	5,045,615.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	5,045,615.
5	Decr	eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30	6	5,045,615.
					Form QQ0-PF (2015)

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2-story brick w	cribe the kind(s) of property sold (e arehouse; or common stock, 200 s	e.g., real estate, shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr)	
la	<u> </u>					
b NC)NE					
<u>C</u>						
<u>d</u>						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	IS .	(h) Gain or (loss) (e) plus (f) minus (h) Gain or (loss) plus (f) minus (g)		
a						
b						
C						
<u>d</u>						
Complete only for access above	l Ing gain in column (h) and owned t	by the foundation on 12/21/60		(I) On an (Onl. (b) and		
Complete only for assets show		(k) Excess of col. (i		(I) Gains (Col. (h) gain col. (k), but not less than	111111us 1 -0-) or	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	over col. (j), if any		`Losses (from col. (I		
a						
b				· · · · · · · · · · · · · · · · · · ·		
C	<u> </u>					
d						
e						
	∫ If gain, also en	iter in Part I, line 7	7			
Capital gain net income or (net o	apıtal loss) 🕴 lf (loss), enter	iter in Part I, line 7 -0- in Part I, line 7	f 2			
Net short-term capital gain or (Ic	oss) as defined in sections 1222(5)	and (6):				
If gain, also enter in Part I, line 8			} _			
If (loss), enter -0- in Part I, line 8	Jnder Section 4940(e) f	or Poducod Tay on N	lot Investment	Incomo		
				IIICOIII C	N/A	
For optional use by domestic priva	te foundations subject to the sectio	in 4940(a) tax on het investine	it income.)		M/A	
f section 4940(d)(2) applies, leave	this part blank.					
Mas the foundation liable for the se	ction 4942 tax on the distributable	amount of any year in the hase	period?		Yes N	
	alify under section 4940(e). Do not	• •	P			
Enter the appropriate amount in	each column for each year see th					
	cacif column for cacif your, occ in	e instructions before making ai	ny entries.			
(a)	(b)	e instructions before making a	ny entries. (c)	Dietrih	(d)	
(a) Base period years Calendar year (or tax year beginn	(b)				(d) ution ratio ded by col. (c))	
(a) Base period years Calendar year (or tax year beginn 2014	(b)		(c)		ùtión ratio	
Calendar year (or tax year beginn	(b)		(c)		ùtión ratio	
Calendar year (or tax year beginn 2014	(b)		(c)		ùtión ratio	
2014 2013 2012 2011	(b)		(c)		ùtión ratio	
2014 2013 2012	(b)		(c)		ùtión ratio	
2014 2013 2012 2011 2010	(b)		(c)	sets (col. (b) divi	ùtión ratio	
2014 2013 2012 2011 2010 Total of line 1, column (d)	(b) Adjusted qualifying o	distributions Net value o	(c) f noncharitable-use as		ùtión ratio	
Calendar year (or tax year beginn 2014 2013 2012 2011 2010 Total of line 1, column (d) Average distribution ratio for the	Adjusted qualifying of	distributions Net value o	(c) f noncharitable-use as	sets (col. (b) divi	ùtión ratio	
2014 2013 2012 2011 2010 Total of line 1, column (d)	Adjusted qualifying of	distributions Net value o	(c) f noncharitable-use as	sets (col. (b) divi	ùtión ratio	
Calendar year (or tax year beginn 2014 2013 2012 2011 2010 **Total of line 1, column (d) Average distribution ratio for the the foundation has been in exist.**	Adjusted qualifying of Adjusted participations o	distributions Net value o	(c) f noncharitable-use as	2 3	ùtión ratio	
Calendar year (or tax year beginn 2014 2013 2012 2011 2010 **Total of line 1, column (d) Average distribution ratio for the the foundation has been in exist.**	Adjusted qualifying of	distributions Net value o	(c) f noncharitable-use as	sets (col. (b) divi	ùtión ratio	
2014 2013 2012 2011 2010 Total of line 1, column (d) Average distribution ratio for the the foundation has been in exist. Enter the net value of noncharita	Adjusted qualifying of Adjusted participations o	distributions Net value o	(c) f noncharitable-use as	2 3 4	ùtión ratio	
Calendar year (or tax year beginn 2014 2013 2012 2011 2010 **Total of line 1, column (d) Average distribution ratio for the the foundation has been in exist.**	Adjusted qualifying of Adjusted participations o	distributions Net value o	(c) f noncharitable-use as	2 3	ùtión ratio	
2014 2013 2012 2011 2010 Total of line 1, column (d) Average distribution ratio for the the foundation has been in exist. Enter the net value of noncharitation of the second se	Adjusted qualifying of Adjusted qualifying of Adjusted qualifying of S-year base period - divide the tot ence if less than 5 years	distributions Net value o	(c) f noncharitable-use as	2 3 4	ùtión ratio	
Calendar year (or tax year beginn 2014 2013 2012 2011 2010 Total of line 1, column (d) Average distribution ratio for the the foundation has been in exist Enter the net value of noncharital Multiply line 4 by line 3	Adjusted qualifying of Adjusted qualifying of Adjusted qualifying of S-year base period - divide the tot ence if less than 5 years	distributions Net value o	(c) f noncharitable-use as	2 3 4 5 5	ùtión ratio	
2014 2013 2012 2011 2010 **Total of line 1, column (d) Average distribution ratio for the the foundation has been in exist Enter the net value of noncharita Multiply line 4 by line 3 Enter 1% of net investment inco	Adjusted qualifying of Adjusted qualifying of Adjusted qualifying of S-year base period - divide the tot ence if less than 5 years	distributions Net value o	(c) f noncharitable-use as	2 3 4 5 5	ùtión ratio	
2014 2013 2012 2011 2010 **Total of line 1, column (d) Average distribution ratio for the the foundation has been in exist Enter the net value of noncharita Multiply line 4 by line 3 Enter 1% of net investment inco	Adjusted qualifying of Adjusted qualifying of Adjusted qualifying of S-year base period - divide the tot ence if less than 5 years	distributions Net value o	(c) f noncharitable-use as	2 3 4 5 6	ùtión ratio	
Calendar year (or tax year beginn 2014 2013 2012 2011 2010 Protal of line 1, column (d) Average distribution ratio for the the foundation has been in exist. Enter the net value of noncharitation of the column (d) 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Adjusted qualifying of Adjusted qualifying of S-year base period - divide the tot ence if less than 5 years able-use assets for 2015 from Part of the tot from Part of the the the the the the the tot from Part of the	distributions Net value o	(c) f noncharitable-use as	2 3 4 5 6	ùtión ratio	
Calendar year (or tax year beginn 2014 2013 2012 2011 2010 Total of line 1, column (d) Average distribution ratio for the the foundation has been in exist Enter the net value of noncharita Multiply line 4 by line 3 Enter 1% of net investment inco Add lines 5 and 6 Enter qualifying distributions fro	Adjusted qualifying of Adjusted qualifying of S-year base period - divide the tot ence if less than 5 years able-use assets for 2015 from Part of the tot from Part of the the the the the the the tot from Part of the	al on line 2 by 5, or by the num	(c) f noncharitable-use as ber of years	2 3 4 5 6 7	ùtión ratio	

THE MORGAN E. CLINE PERPETUAL CHARITABLE FOUNDATION 47-7016421 Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here Land enter "N/A" on line 1. _ (attach copy of letter if necessary-see instructions) Date of ruling or determination letter: b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 0. 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). Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 0. Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4 0. Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-6 Credits/Payments: a 2015 estimated tax payments and 2014 overpayment credited to 2015 **b** Exempt foreign organizations - tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 6c d Backup withholding erroneously withheld 6d 7 Total credits and payments. Add lines 6a through 6d 0. 8 Enter any penalty for underpayment of estimated tax. Check here _____ if Form 2220 is attached 0. Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 10 Overpayment, If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Enter the amount of line 10 to be: Credited to 2016 estimated tax 11 Part VII-A | Statements Regarding Activities No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in Yes X any political campaign? 1a X b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 1b If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities Х c Did the foundation file Form 1120-POL for this year? 1c 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 foundation 0. managers. > \$ 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? X 2 If "Yes," attach a detailed description of the activities Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A b If "Yes," has it filed a tax return on Form 990-T for this year? 4b Х 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T. 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law X remain in the governing instrument? 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 X

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Х

8b

10

8a Enter the states to which the foundation reports or with which it is registered (see instructions)

of each state as required by General Instruction G? If "No," attach explanation

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)

year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar

Page 5

Pa	irt VII-A Statements Regarding Activities (continued)										
			Yes	No							
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	١									
40	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X							
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	12		х							
40	If "Yes," attach statement (see instructions) 13. Did the foundation comply with the public inspection requirements for its applied returns and exemption application?										
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?										
Website address ► N/A 14 The books are in care of ► THE IOWA TRUST AND SAVINGS BANK Telephone no. ►641-43											
14	Located at ► 200 N 10TH ST., CENTERVILLE, IA ZIP+4 ► 52										
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	<u>,) 4 4</u>									
10	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	`							
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No							
10	securities, or other financial account in a foreign country?	16	.03	X							
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	1.0									
	foreign country										
Pa	ort 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?	i									
	(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?										
	(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"										
	ıf the foundation agreed to make a grant to or to employ the official for a period after										
	termination of government service, if terminating within 90 days.)										
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations										
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b									
	Organizations relying on a current notice regarding disaster assistance check here										
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	,									
_	before the first day of the tax year beginning in 2015?	1c		<u>X</u>							
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):										
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?										
	If "Yes," list the years >										
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		İ								
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach										
	statement - see instructions.) N/A	_2b									
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.										
	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time										
3a											
	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		- 1								
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	_									
_	Form 4720, to determine if the foundation had excess business holdings in 2015) N/A	3b									
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Pld the foundation make any prostream to a prior year (but effect Person ber 31, 1969) that could repost the physical than the prostream to a prior year (but effect Person ber 31, 1969) that could repost the physical than t	4a		X							
D	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	,.		v							
_	had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b m 990	DE /	X 2015)							
	Ful	111 JJU	- I I (2010)							

THE MORGAN E. CLINE PERPETUAL CHARITABLE FOUNDATION 47-7016421 Form 990-PF (2015) Page 6 Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 4945(d)(4)(A)? (see instructions) (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? N/A 5b Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained Yes No N/A expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No **b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b X If "Yes" to 6b, file Form 8870 Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7b b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred (b) Title, and average hours per week devoted to position (c) Compensation (e) Expense account, other (If not paid, (a) Name and address enter -0-) allowances 0. 0. SEE STATEMENT

	i			
2 Compensation of five highest-paid employees (other than those in	ncluded on line 1). If none	, enter "NONE."	<u> </u>	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, othe allowances
NONE				
Total number of other employees paid over \$50,000			<u> </u>	(

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3 Five highest-paid independent contractors for professional services. If no	ne. enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(5) 1300 01 001 100	(O) componential
HOMB		
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 relev	rant statistical information such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research pa	pers produced, etc.	
1 N/A		
2		
		
3		
4		
Port IV B Comments of Discourse Deleted Investments		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax	y year on lines 1 and 2	Amount
	x year on lines rand z.	Amount
1 <u>N/A</u>		
2		
2		
All other program-related investments. See instructions.		,
3		
v		
		0.

CHARITABLE FOUNDATION 47-7016421

L	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:		
a	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	2,118,112.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	2,118,112.
е	Reduction claimed for blockage or other factors reported on lines 1a and	1 1	
	1c (attach detailed explanation) 1e 0.	<u> </u>	
2	Acquisition indebtedness applicable to line 1 assets	_2	0.
3	Subtract line 2 from line 1d	3	2,118,112.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	31,772.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,086,340.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	75,165.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations at foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	75,165.
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.)		
С	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	75,165.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	75,165.
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	75,165.
<u>'</u>	Qualifying Distributions (see instructions)	I	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	1.1	4 205
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	<u>4,385.</u>
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:		
a	Suitability test (prior IRS approval required)	3a	
Ь	Cash distribution test (attach the required schedule)	3b	4 205
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	4,385.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	•
_	income. Enter 1% of Part I, line 27b	5	0. 4,385.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualities for	the section

Part XIII ·	Undistributed	Income	(see instructions)
-------------	---------------	--------	--------------------

,	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI,				
line 7				75,165.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			0.	
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				
e From 2014	•			
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2015 from		· ·		
Part XII, line 4: ► \$ 4,385.		,		
a Applied to 2014, but not more than line 2a			0.	
b Applied to undistributed income of prior		0		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	0			
(Election required - see instructions)	0.			4 205
d Applied to 2015 distributable amount				4,385.
e Remaining amount distributed out of corpus	<u> </u>			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions	·	0.		
e Undistributed income for 2014. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2016				70,780.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2010				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2016				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2011				
b Excess from 2012				
c Excess from 2013				
d Excess from 2014				
e Excess from 2015		<u> </u>	1	L

CHARITABLE FOUNDATION

47-7016421 Page 11

3 Grants and Contributions Paid During the Ye	***	Dayment		
Doginiont	If recipient is an individual.			
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
	or substantial contributor	recipient		
a Paid during the year				
NONE				
		Ì		
		1		
Total			▶ 3a	0.
b Approved for future payment				
NONE				
	<u> </u>			
			}	
Total			▶ 3b	0.

CHARITABLE FOUNDATION

nter gross amounts unless otherwise indicated.	Unrelated	business income		ded by section 512, 513, or 514	(e)
•	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	Code		+		<u></u>
a b	-	-	† †		
			+		
	1		 		
· · · · · · · · · · · · · · · · · · ·			+		
e	-		1		·-·-
g Fees and contracts from government agencies	-				
2 Membership dues and assessments			1		
3 Interest on savings and temporary cash			1 1		
investments					
4 Dividends and interest from securities					<u></u>
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					
property	1				
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b	I I				
С					
d					
e	_				
12 Subtotal. Add columns (b), (d), and (e)		0.	•	0.	0.
13 Total Add line 12, columns (b), (d), and (e)				13	0.
See worksheet in line 13 instructions to verify calculations.)				
- 1000 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	to the Accor	mplishment of E	xemp	t Purposes	
Part XVI-B Relationship of Activities					
		aclume (a) of Dort VIII		uitad importantly to the accom	ankahmant of
Line No. Explain below how each activity for which in	come is reported in		A contrib	outed importantly to the accon	nplishment of
	come is reported in		A contrib	outed importantly to the accon	nplishment of
Line No. Explain below how each activity for which in	come is reported in		A contrib	outed importantly to the accon	nplishment of
Line No. Explain below how each activity for which in	come is reported in		A contrib	outed importantly to the accon	nplishment of
Line No. Explain below how each activity for which in	come is reported in		A contrib	outed importantly to the accon	nplishment of
Line No. Explain below how each activity for which in	come is reported in		A contrib	outed importantly to the accon	nplishment of
Line No. Explain below how each activity for which in	come is reported in		A contrit	outed importantly to the accon	nplishment of
Line No. Explain below how each activity for which in	come is reported in		A contrit	outed importantly to the accon	nplishment of
Line No. Explain below how each activity for which in	come is reported in		A contrit	outed importantly to the accon	nplishment of
Line No. Explain below how each activity for which in	come is reported in		A contrib	outed importantly to the accon	nplishment of
Line No. Explain below how each activity for which in	come is reported in		A contrib	outed importantly to the accon	nplishment of
Line No. Explain below how each activity for which in	come is reported in		A contrib	uted importantly to the accon	nplishment of
Line No. Explain below how each activity for which in	come is reported in		A contrib	outed importantly to the accon	nplishment of
Line No. Explain below how each activity for which in	come is reported in		A contrib	outed importantly to the accon	nplishment of
Line No. Explain below how each activity for which in	come is reported in		A contrib	outed importantly to the accon	nplishment of
Line No. Explain below how each activity for which in	come is reported in		A contrib	outed importantly to the accon	nplishment of
Line No. Explain below how each activity for which in	come is reported in		A contrib	outed importantly to the accon	nplishment of
Line No. Explain below how each activity for which in	come is reported in		A contrib	outed importantly to the accon	nplishment of
Line No. Explain below how each activity for which in	come is reported in		A contrib	outed importantly to the accon	nplishment of

		_	_			_	-	_		_	-	
CHZ	ART	T	Α	F	۲		E	F	\cap T	INI	ТТА	ON

Phone no. 319-363-2697

Form **990-PF** (2015)

Form 99			TABLE FO				47-70			ge 13
Part	XVII	Information Re	egarding Tra	ansfers To a	and Transactions a	and Relations	hips With Nonch	aritabl	е	
		Exempt Organ							N 1	
•		-		-	ig with any other organization		ion 501(c) of		Yes	NO
		• •		•	27, relating to political organ	nizations?				
		from the reporting found	ation to a noncha	iritable exempt or	ganization of:					
	Cash							1a(1)		_X_
(2)	Other	assets						1a(2)	 	<u>x</u>
		sactions:								
(1)	Sales	of assets to a noncharita	ible exempt organ	nization				<u>1b(1)</u>	ļ	<u> </u>
(2)	Purch	ases of assets from a no	ncharitable exem	pt organization				1b(2)	ļ	X
(3)	Renta	l of facilities, equipment,	or other assets					1b(3)		X
(4)	Reiml	oursement arrangements	3					1b(4)		<u>X</u>
(5)	Loans	s or loan guarantees						1b(5)		<u>X</u>
(6)	Perfo	rmance of services or me	embership or fund	draising solicitatio	ons			1b(6)	<u> </u>	_X_
c Sh	aring of	facilities, equipment, ma	alling lists, other a	issets, or paid em	ployees			_ 1c_		_X_
d Ift	he ansv	ver to any of the above is	"Yes," complete t	the following sche	edule. Column (b) shou <mark>ld</mark> al	ways show the fair r	market value of the goods	s, other as:	sets,	
or	services	s given by the reporting fo	oundation. If the	foundation receiv	ed less than fair market vali	ue in any transactior	n or sharing arrangement	, show in		
СО	lumn (d) the value of the goods,	other assets, or s	services received.						
(a) Line r	10	(b) Amount involved	(c) Nam	e of noncharitable	e exempt organization	(d) Description	of transfers, transactions, ar	nd sharing ar	rangeme	nts
				N/A						
		-								
		·-								
								-		
								,		
									_	
2a Is	the four	ndation directly or indirec	tly affiliated with	or related to, one	or more tax-exempt organ	zations described				
		501(c) of the Code (othe						Yes	X] No
		omplete the following sch								
	100, 00	(a) Name of org		. =	(b) Type of organization		(c) Description of relation	nship		
		N/A				-	·.·			
										
										
								· · · · · · · · · · · · · · · · · · ·		
	Under	penalties of perjury, I declare	that I have examine	d this return, including	ng accompanying schedules and	statements, and to the	best of my knowledge	day the IDC	diagram Al	
Sign	and be	elief, it is true, correct, and cor	mplete Declaration of	of preparer (other tha	n taxpayer) is based on all inforr	mation of which prepare	r has any knowledge	May the IRS of	e prepare	11S
Here		Muy 6	4 XIIII	1	18-11-2010	CHAIR	PERSON	hown below]″ _{No}
	Sign	ature of officer or trustee	el F	/)	Date	Title				
	1	Print/Type preparer's na	! /	Preparer's s		Date	Check If PTI	٧		
		, , , , , , , , , , , , , , , , , , ,	•				self- employed			
Paid		DAVID LITT	T.E	Day	lick Kitlo	8-4-16		01480	921	
Prep	arer	Firm's name ► CLI		SONALTEN	I LLP		Firm's EIN ► 41-			
Use		Thin Shame > CHI		~ ~= 12 111 11 11 11 11 11 11 11 11 11 11 11				201		
	Firm's address > 600 3RD AVE. SE. STE. 300						1			

CEDAR RAPIDS, IA 52401

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

Name of the organization

THE MORGAN E. CLINE PERPETUAL CHARITABLE FOUNDATION

Employer identification number

47-7016421

Organization type (check one)					
Filers of	•	Section:			
Form 990 or 990-EZ		501(c)() (enter number) organization			
		4947(a)(1) nonexempt charitable trust not treated as a private foundation			
		527 political organization			
Form 99	0·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			
	-	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.			
General	Rule				
X	•	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or 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.				
	year, contributions is checked, enter high purpose. Do not co	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box here the total contributions that were received during the year for an exclusively religious, charitable, etc., complete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year.			
but it m u	ust answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), 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 the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).			

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

Name of organization

THE MORGAN E. CLINE PERPETUAL

Employer identification number

<u>CHARI</u>	TABLE FOUNDATION	4	<u>7-7016421</u>
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	al space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ESTATE OF MORGAN E. CLINE C/O DAVIS BROWN LAW FIRM 215 10TH ST., STE. 1300 DES MOINES, IA 50309	\$ 5,050,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for

noncash contributions)

Name of organization

Employer identification number

THE MORGAN E. CLINE PERPETUAL CHARITABLE FOUNDATION

47-7016421

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

Name of organization

Employer identification number

THE	MORGAN	Ε.	CLINE	PERPETUAL

RTTA	GAN E. CLINE PERPETUA BLE FOUNDATION	Ц	47-7016421				
t III	Exclusively religious, charitable, etc., cont the year from any one contributor. Complete	ributions to organizations described in sec	ction 501(c)(7), (8), or (10) that total more than \$1,000 fo				
	completing Part III, enter the total of exclusively religiou	s, charitable, etc., contributions of \$1,000 or less fo	or the year (Enter this info once) \$				
No.	Use duplicate copies of Part III if addition	al space is needed					
No. om rt I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
_ -							
		(e) Transfer of gift					
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
<u>rt I </u>							
	(e) Transfer of gift						
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
No. om rt I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
_ _							
	(e) Transfer of gift						
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
No. om rt I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
_ _							
			-				
-		(e) Transfer of gift					
	Transferee's name, address, a		Relationship of transferor to transferee				

FORM 990-PF (OTHER PROFES	SIONAL FEES	STATEMENT 1		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
COMPENSATION STUDIES	2,750.	0.		2,750.	
TO FORM 990-PF, PG 1, LN 16C	2,750.	0.		2,750.	
FORM 990-PF	OTHER EXPENSES		STATEMENT 2		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
OFFICE SUPPLIES INSURANCE	112. 1,523.			112. 1,523.	
TO FORM 990-PF, PG 1, LN 23	1,635.	0.		1,635.	
	F SUBSTANTIA PART VII-A,	L CONTRIBUTORS	S S'	TATEMENT 3	
NAME OF CONTRIBUTOR	ADDR	ESS			
ESTATE OF MORGAN E. CLINE	STE.	DAVIS BROWN LA 1300 MOINES, IA 503		ОТН ST.,	

FORM 990-PF PART VIII - LIST TRUSTEES AND	OF OFFICERS, DI	STATEMENT 4		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE
FRANK REZNICEK BRADLEY BANK BLDG., 2ND FLR., 307 N 13TH ST. CENTERVILLE, IA 52544	TRUSTEE 2.00	0.	0.	0.
CONNIE STATER BRADLEY BANK BLDG., 2ND FLR., 307 N 13TH ST. CENTERVILLE, IA 52544	TRUSTEE 2.00	0.	0.	0.
JAMES MILANI, ESQ. BRADLEY BANK BLDG., 2ND FLR., 307 N 13TH ST. CENTERVILLE, IA 52544	TRUSTEE 2.00	0.	0.	0.
ANN YOUNG BRADLEY BANK BLDG., 2ND FLR., 307 N 13TH ST. CENTERVILLE, IA 52544	TRUSTEE 2.00	0.	0.	0.
VANESSA FRASER BRADLEY BANK BLDG., 2ND FLR., 307 N 13TH ST. CENTERVILLE, IA 52544	TRUSTEE 2.00	0.	0.	0.
MICHAEL CRAVER, ESQ. BRADLEY BANK BLDG., 2ND FLR., 307 N 13TH ST. CENTERVILLE, IA 52544	TRUSTEE 2.00	0.	0.	0.
THE IOWA TRUST AND SAVINGS BANK 200 N 10TH ST. CENTERVILLE, IA 52544	CORPORATE TRUST	TEE 0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	0.	0.	0.

FORM 990-PF

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

STATEMENT

r 5

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

ANN YOUNG

BRADLEY BANK BLDG., 2ND FLR., 307 N 13TH ST.

CENTERVILLE, IA 52544

TELEPHONE NUMBER

641-856-2746

FORM AND CONTENT OF APPLICATIONS

AT THIS TIME THERE IS NO FORMAL GRANT APPLICATION FORM. IT IS BELIEVED THAT THE FOUNDATION WILL REQUIRE APPLICATIONS AND GRANT PROPOSALS FOR ALL GRANTS IN EXCESS OF \$10,000.

ANY SUBMISSION DEADLINES

THERE ARE NO SUBMISSION DEADLINES AT THIS TIME.

RESTRICTIONS AND LIMITATIONS ON AWARDS

ANY GRANT AWARDED WILL REQUIRE AN ACKNOWLEDGEMENT FROM THE RECIPIENT THAT THE FUNDS WILL BE USED EXCLUSIVELY FOR CHARITABLE PURPOSES. EACH RECIPIENT WILL BE REQUIRED TO SUBMIT PROOF OF 501(C)(3) EXEMPT STATUS. IT IS INTENDED THAT AWARDEE ORGANIZATIONS BE LOCATED IN AND AROUND THE APPANOOSE COUNTY IOWA AREA.