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#### DLN: 93491190005096

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  $\underline{www.irs.gov/form990pf}$ .

Open to Public Inspection

For	cale	ndar year 2015, or tax y	ear beginning 06-0	1-2015	, aı	nd ending 0	5-31-2016	
	e of four	ndation ETH K KINSEY FAMILY FOUNDATION				A Employer ide	entification numbe	er
111	L KLIVIVL	THE KINSEL LAMIEL LOONDATION				36-4154135		
		street (or P O box number if mail is	not delivered to street address)	Room/suite		<b>B</b> Telephone nur	nber (see instruction	s)
38	POST R	OAD				(319) 354-5000		
		state or province, country, and ZIP o A 52245	r foreign postal code			<b>C</b> If exemption	application is pendin	g, check here 🕨 🦵
<b>G</b> CI	neck al	I that apply     I nitial return	Initial return of a fo	ormer public charity		D.1 Faragan ar	annantione choole h	
		Final return Address chang	Amended return ge Name change	,		<b>2.</b> Foreign or	ganizations, check h ganizations meeting k here and attach co	the 85%
H Ch	neck ty ection 4	pe of organization 🔽 Section 1947(a)(1) nonexempt charital	ole trust  Other taxabl	e private foundation			ndation status was t n 507(b)(1)(A), chec	
of	year <i>(fr</i>	et value of all assets at end com Part II, col. (c), \$ 4,405,780	JAccounting method Other (specify) (Part I, column (d) must	· 	I		tion is in a 60-mont i 507(b)(1)(B), chec	
	rt I	Analysis of Revenue a	and Expenses					Disbursements
		(The total of amounts in columns ( necessarily equal the amounts in c instructions)	'b), (c), and (d) may not	Revenue and expenses per (a) books	(b)	Net investment income	Adjusted net (c) income	for charitable purposes (d) (cash basis only)
	1	Contributions, gifts, grants, e	tc , received (attach					
		schedule)		79,051				
	2	Check 🟲 🦵 If the foundation	is <b>not</b> required to attach					
	3	Interest on savings and temp	•	14,120		14,120		_
	4	Dividends and interest from s		148,051		148,051		
	5a   .	Gross rents						
ds	b	Net rental income or (loss) _ Net gain or (loss) from sale o		-19,327				
ž	6a			-19,527				
Revenue	Ь	Gross sales price for all asse 107,079	ts on line 6a					
	7	Capital gain net income (from	n Part IV, line 2)			0		
	8	Net short-term capital gain .						
	9	Income modifications						
	10a	Gross sales less returns and allowances						
	Ь	Less Cost of goods sold.						
	C	Gross profit or (loss) (attach	·					
	11	Other income (attach schedu						
	12	Total.Add lines 1 through 11		221,895		162,171		
	13	Compensation of officers, dire		1,800		0		900
_	14	Other employee salaries and						
Š	15	Pension plans, employee ben Legal fees (attach schedule).						
Expenses	16a	- '				1,643		1,642
Ë	b	Accounting fees (attach sche		3,285		1,043		1,042
	_ c	Other professional fees (atta	-					
Admını strative	17	Interest		<b>%</b> 3,331		0		0
돌	18	Taxes (attach schedule) (see	•	3,331		0		0
뒫	19	Depreciation (attach schedul						
₽G	20	Occupancy						
and	21	Travel, conferences, and mee Printing and publications	_					
	23	Other expenses (attach sche		<b>%</b> 124		0		0
ij		Total operating and administ		29				,
Operating	24	Add lines 13 through 23	<u>-</u>	8,540		1,643		2,542
å	25	Contributions, gifts, grants p		183,400		1,0 15		183,400
	26	Total expenses and disburser						
		25	IICHESIA UU IIIICS 24 dIIU	191,940		1,643		185,942
	27	Subtract line 26 from line 12						
	а	Excess of revenue over expen		29,955				
	b	Net investment income (if ne	- '			160,528		
	С	Adjusted net income(If negat	ive, enter -0-)					

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	(a) Book value	(B) Book Value	(c) Full Planket Value
	2	Savings and temporary cash investments	103,987	90,060	90,060
	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			
	O	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
	,	Less allowance for doubtful accounts			
		Inventories for sale or use			
2	8	<b>-</b>			
Assets	9	Prepaid expenses and deferred charges			
Ā	10a	Investments—U S and state government obligations (attach schedule)		<b>-</b>	
	b	Investments—corporate stock (attach schedule)	1,798,177	1,934,353	3,914,124
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis 🕨			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	530,491	438,197	401,596
	14	Land, buildings, and equipment basis 🕨			
		Less accumulated depreciation (attach schedule)			
	15	O ther assets (describe 🟲)			
	16	Total assets(to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	2,432,655	2,462,610	4,405,780
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ě	19	Deferred revenue			
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
_	21	Mortgages and other notes payable (attach schedule)			
	22	O ther liabilities (describe 🟲)			
	23	Total liabilities(add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here 🕨 🦵			
Balances		and complete lines 24 through 26 and lines 30 and 31.			
aŭ	24	Unrestricted			
88	25	Temporarily restricted			
핃	26	Permanently restricted			
Fund		Foundations that do not follow SFAS 117, check here 🕨 🔽			
<u>-</u>		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds	2,432,655	2,462,610	
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	0	0	
Net	30	Total net assets or fund balances(see instructions)	2,432,655	2,462,610	
-	31	Total liabilities and net assets/fund balances(see instructions)	2,432,655	2,462,610	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances	•		
1		Total net assets or fund balances at beginning of year—Part II, column (	a), line 30 (must ag	ree	
		with end-of-year figure reported on prior year's return)			2,432,655
2		Enter amount from Part I, line 27a			29,955
3		Other increases not included in line 2 (itemize)		_ 3	0
4		Add lines 1, 2, and 3		4	2,462,610
5		Decreases not included in line 2 (itemize)		_ 5	0
6		Total net assets or fund balances at end of year (line 4 minus line 5)—Pa		ne 30 . <b>6</b>	2,462,610

7

the Part VI instructions

List and describe	e the kınd(s)	of property sold (e g , recommon stock, 200 shs	al estate,	How acquire P—Purchase (b) D—Donation	e (C)	Date acquired (mo , day, yr )	Date sold (d) (mo , day, yr )
1a PUBLICLY TRADED	SECURITI	S		Р			
<b>b</b> CAPITAL GAINS D	ISTRIBUTIO	NS		Р			
С							
d							
e							
(e) Gross sales price		Depreciation allower (f) (or allowable)		t or other basıs expense of sale			or (loss) (f) mınus (g)
a 1	.04,739			126,40	6		-21,667
b	2,340						2,340
c							
d							
e							
Complete only for assets	showing gai	n ın column (h) and owne	d by the foundation	n on 12/31/69		Gains (Col	(h) gain minus
(i) F M V as of 12/31/69	)	A djusted basıs (j) as of 12/31/69		cess of col (ı) r col (j), ıf any	(1)	col (k), but no	rt less than -0-) <b>or</b> (from col (h))
a							-21,667
b							2,340
С							
d							
e							
	tal gaın or (lo	loss) as defined in sectio 3, column (c) (see instru		)	2		-19,327
		ction 4940(e) for R		Not Tono a store	3		
(For optional use by domestic If section 4940(d)(2) applies, Was the foundation liable for tl If "Yes," the foundation does r	private foun leave this p ne section 4 not qualify ur	dations subject to the se art blank 942 tax on the distributa nder section 4940(e) Do	ection 4940(a) tax able amount of any o not complete this	on net investmen year in the base p part	t incor	me )	┌ Yes ┌ No
	Tuncin each	Column for each year, Se	ee mstructions ben	Te making any en	uies		
(a) Base period years Calendar year (or tax year beginning in)	Adjusted	(b) qualifying distributions	(c) Net value of noncha			(d) Distributio (col (b) divided	n ratio
2014		154,842		3,819,832			0 040536
2013		137,810		3,187,288			0 043237
2012		124,333		2,710,981			0 045863
2011		108,800		2,556,447			0 042559
2010	 	117,007		2,371,838			0 049332
2 Totalof line 1, colum		E veer been marked do			2		0 221527
		: 5-year base period—div on has been in existence			3		0 044305
		ble-use assets for 2015			4		3,936,175
5 Multiply line 4 by lin	e 3				5		174,392
		me (1% of Part I, line 2)		<b>⊢</b>	6		1,605

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

Form **990-PF** (2015)

175,997

185,942

ĽŒL	Excise Tax based on Investment Income (Section 4940(a), 4940(b), 49	54U(E),	, UI 4940—St	e pag	= 10 OL	the ins	LIUCLIO	115)	
1a		<b>-</b> _		)					
	and enter "N/A" on line 1  Date of ruling or determination letter			l					
	(attach copy of letter if necessary—see instructions)			ĺ					
b	Domestic foundations that meet the section 4940(e) requirements in Part V,			ļ	1				1,605
	here 🟲 🔽 and enter 1% of Part I, line 27b			• '					
С	All other domestic foundations enter $2\%$ of line $27b$ Exempt foreign organization Part I, line $12$ , col (b)	ations 6	enter 4% of						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable four enter -0-)	ndation	s only Othe	ers	2				0
3				1,605					
4	Subtitle A (income) tax (domestic section $4947(a)(1)$ trusts and taxable four enter -0-)	ndatıor	s only Oth	ers	4				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, e	nter - 0		•	5				605, 1
6	Credits/Payments								
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a		3,000					
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				7				3,000
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here $\  \  \  \  \  \  \  \  \  \  \  \  \ $	2220 is	attached		8				
9	$\textbf{Tax due.} If the total of lines 5 and 8 is more than line 7, enter \textbf{amount owed} \ .$				9				
10	Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amoun	nt over	paid	F	10				1,395
11		1,395	Refunded	<b>•</b>	11				0
Pai	t VII-A Statements Regarding Activities								
1a	During the tax year, did the foundation attempt to influence any national, state	e, or loc	al legislatio	n or d	d			Yes	No
	it participate or intervene in any political campaign?						1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for p			see In	structi	ons			
	for definition)?					•	1b		No
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities	and co	pies of any r	nateria	ls				
	published or distributed by the foundation in connection with the activities.								
	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) impos								
	(1) On the foundation $\blacktriangleright$ \$ 0 (2) On foundation managers			0					
е	Enter the reimbursement (if any) paid by the foundation during the year for poli	itical e	xpenditure t	ax ımp	osed				
_	on foundation managers  \$0		t - th - IDC2						NI-
2	Has the foundation engaged in any activities that have not previously been rep	portea	to the IRS?				2		No
_	If "Yes," attach a detailed description of the activities.								
3	Has the foundation made any changes, not previously reported to the IRS, in it of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conf	-	_	-		5	3		No
4-	Did the foundation have unrelated business gross income of \$1,000 or more d						4a		No
4a	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?						4b		140
ь 5	Was there a liquidation, termination, dissolution, or substantial contraction du						-		No.
,	If "Yes," attach the statement required by General Instruction T.	ing the	e year				,		NO
6	Are the requirements of section 508(e) (relating to sections 4941 through 49	45)ca	ticfied eithe	r					
•	By language in the governing instrument, or	+3 ) 3u	tisiica citiic	•					
	By state legislation that effectively amends the governing instrument so the	nat no n	nandatory d	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?					),			
	and Part XV.		·			′′ • • •	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (	see ins	structions)						
	<u> </u>								
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99	90-PF	to the Attor	ney					
	General (or designate) of each state as required by General Instruction G? $\it If$	"No," at	tach explana	tion .			8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the r	meanın	g of section	4942	(3)(3)				
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (s	ee inst	ructions for	Part X	(IV)?				
	If "Yes," complete Part XIV						9		No
10	Did any persons become substantial contributors during the tax year? If "Yes,	" attach	n a schedule	listing	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 ►NONE			
14	The books are in care of ►KENNETH K KINSEY Telephone no ►(319)	1338	-2580	
	Located at ►38 POST ROAD IOWA CITY IA  ZIP+4 ►52245	, , , , ,		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here	• •		
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over		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?			
	(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?  Yes  No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes \( \bar{V} \) Yes			
	(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 ) Yes V No			
Ь	If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations	41.		NI-
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		No
_	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,	10		No
_	that were not corrected before the first day of the tax year beginning in 2015?	1c		NO
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			
u	and 6e, Part XIII) for tax year(s) beginning before 2015?			
	If "Yes," list the years > 20			
ь	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to <b>all</b> years listed, answer "No" and attach statement—see instructions )	2b		
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
	<b>▶</b> 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		
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		No

Pai	rt VII-B	Statements Rega	rdii	ng Activities for	wr	ich Form 4/20	мау	y Be Required ( <i>Cont</i>	inue	ea)
5a	During the	year did the foundatio	n pay	orincurany amoun	t to					
	<b>(1)</b> Carry (	on propaganda, or othe	rwise	attempt to influenc	e leg	ıslatıon (section 494	45(e	e)) <sup>?</sup>	No	
	(2) Influen	ce the outcome of any	spec	rific public election (	see	section 4955), or to	car	ry		
		ectly or indirectly, any					•			
	(3) Provide	e a grant to an individu	al for	travel, study, or otl	ners	ımılar purposes?		「 Yes ▽	No	
		e a grant to an organiza non 4945(d)(4)(A)? (s						bed ..... <b>.                               </b>	No	
		e for any purpose other					-	,,		
		ional purposes, or for t							, No	
ь								exceptions described in		
_								instructions)?		5b
									_	
c	_	ver is "Yes" to question								
								<b> Y</b> es 「	- No	
		tach the statement requ					-	,,		
6a		indation, during the yea					prer	miums on		
		benefit contract?							No	
ь	•							benefit contract?		6b No
_		6b, file Form 8870.	, .	, , ,	,	,,			-	
7a		e during the tax year, \	vas t	he foundation a part	v to a	a prohibited tax shel	ter ti	ransaction? <b>Tyes</b>	, No	
	•			•	•	•		the transaction?		7b
	1							n Managers, Highly		
Pai		and Contractors		,	-,					p.:-,,
1	List all offi	cers, directors, trustee	s, fo	undation managers a	nd t	heir compensation (	see i	instructions).		
	<b>(a)</b> Nam	e and address	/h)	Title, and average hours per week devoted to position		Compensation(If not paid, enter -0-)	e	(d) Contributions to employee benefit plans		Expense account, other allowances
			<u> </u>	·	<u> </u>	<u> </u>	and	d deferred compensation		
	ETH K KINSEY		PRE 1 0	SIDENT		0		0		
	OST ROAD A CITY,IA		"	J						
	ETTE A KINSEY		DIR	ECTOR		0		0		1
	OST ROAD		1 00			Ŭ		Ŭ		
	'A CITY, IA									
ELIZA	BETH J HAWLE	Υ	DIR	ECTOR		900		0		ı
38 P	OST ROAD		1 00	ס						
	A CITY, IA									
	TOFER K KINSI		-	ECTOR		900		0		
	OST ROAD A CITY,IA		1 00	J						
			l em	oloyees (other than	t hos	e included on line 1—	-see	instructions). If none, er	nter "	NONE."
	<u> </u>	(a)		Title, and aver				Contributions to		
Nar		ess of each employee   than \$50,000	oaıd	hours per we  (b) devoted to pos	ek	(c) Compensatio	n	employee benefit plans and deferred		Expense account, other allowances
		······ + <b>/</b>		(-,				(d) compensation		
NON	IE .			4						
				1						
				]						
				]						
				]						
Tota	I number of	other employees paid (	over:	\$50,000 <b></b>						1

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Part VIII Information About Officers, Directors, Trus and Contractors (continued)	tees, Foundation Managers, Highly	Paid Employees,
3 Five highest-paid independent contractors for professional service	s (see instructions). If none, enter "NONE".	
(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 service		0
<u></u>	5	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year Include organizations and other beneficiaries served, conferences convened, research papers pi		Expenses
1NONE		0
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	ng the tax year on lines 1 and 2	A mount
1 NO NE		0
2		
All other program-related investments See instructions		
3 📆		0
Total Add lines 1 through 3	<b>•</b>	^

#### Part X Minimum Investment Return

Pa	(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	Average monthly fair market value of securities	1a	3,912,782
b	Average of monthly cash balances	1b	83,335
c	Fair market value of all other assets (see instructions)	1c	0
d	<b>Total</b> (add lines 1a, b, and c)	1d	3,996,117
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	0
3	Subtract line 2 from line 1d	3	3,996,117
4	Cash deemed held for charitable activities $$ Enter 1 $$ 1/2 $$ % of line 3 (for greater amount, see		
	ınstructions)	4	59,942
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	3,936,175
6	Minimum investment return. Enter 5% of line 5	6	196,809
Pai	Distributable Amount  (see instructions) (Section 4043(1)(3) and (1)(5) private energing foundations and see		alan aranninahana
	(see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cell check here ► ☐ and do not complete this part.)	italli ioi	eigii organizations
1	Minimum investment return from Part X, line 6	1	196,809
2a	Tax on investment income for 2015 from Part VI, line 5 2a 1,605		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		
c	Add lines 2a and 2b	2c	1,605
3	Distributable amount before adjustments Subtract line 2c from line 1	3	195,204
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	195,204
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	195,204
	Overlife in a Biotellection of the contractions		
2 <b>3</b> 11	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	185,942
	Program-related investments—total from Part IX-B	1b	0
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	A mounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	За	
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	185,942
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	1,605
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	184,337
	<b>Note:</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	ner the fo	undation qualifies for

-	art XIIII Undistributed Income (see instr	ructions)			
		(a) Corpus	(b) Years prior to 2014	<b>(c)</b> 2014	<b>(d)</b> 2015
1	Distributable amount for 2015 from Part XI, line 7				195,204
2	Undistributed income, if any, as of the end of 2015				
а	Enter amount for 2014 only			182,065	
b	Total for prior years 20, 20, 20		0		
3	Excess distributions carryover, if any, to 2015				
а	From 2010				
	From 2011				
c	From 2012				
	From 2013				
e	From 2014				
	Total of lines 3a through e	(	0		
	Qualifying distributions for 2015 from Part				
Ī	XII, line 4 🕨 \$ 185,942				
а	Applied to 2014, but not more than line 2a			182,065	
	Applied to undistributed income of prior years		<b>%</b> 0	·	
	(Election required—see instructions)		<b>29</b> 0		
	Treated as distributions out of corpus (Election required—see instructions)		,		
d	Applied to 2015 distributable amount				3,877
е	Remaining amount distributed out of corpus	(			
5	Excess distributions carryover applied to 2015	(			0
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	(	0		
b	Prior years' undistributed income Subtract		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)		0		
	tax has been previously assessed		U		
d	Subtract line 6c from line 6b Taxable amount —see instructions		0		
е	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount—see			0	
_	instructions			Ů	
t	Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must				
	be distributed in 2015				191,327
7	Amounts treated as distributions out of				
•	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (Election may				
	be required - see instructions)				
8	Excess distributions carryover from 2010 not				
_	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	[			
10	Analysis of line 9				
	Excess from 2011				
	Excess from 2012				
	Excess from 2013				
	Excess from 2014				
	Excess from 2015				
-	EXCOSS HOME STORE				

- c Any submission deadlines
- **d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

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 183,400 **b** Approved for future payment

Part XVI-A Analysis of Income-Produc	ing Activitie	S			Page <b>12</b>	
nter gross amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by section	n 512, 513, or 514	<b>(e)</b> Related or exemp	
1 Program service revenue	(a) Business code	<b>(b)</b> A mount	(c) Exclusion code	(d) A mount	function income (See	
-					ınstructions )	
a b						
с						
d						
e f						
g Fees and contracts from government agencies						
Membership dues and assessments						
Interest on savings and temporary cash investments.			1.4	14 120		
Dividends and interest from securities			14	14,120 148,051		
Net rental income or (loss) from real estate						
a Debt-financed property						
<b>b</b> Not debt-financed property						
property						
Other investment income						
Gain or (loss) from sales of assets other than inventory						
Net income or (loss) from special events			18	-19,327		
Gross profit or (loss) from sales of inventory						
Other						
Dother revenue a						
c						
d						
e 2 Subtotal Add columns (b), (d), and (e)		0		142.044	,	
3 Total.Add line 12, columns (b), (d), and (e)				142,844 <b>13</b>		
(See worksheet in line 13 instructions to verify		-1:-b				
Relationship of Activities to Explain below how each activity for whi					ntly to	
the accomplishment of the foundation's						
' instructions )						
	<u> </u>					

Part X\	<b>/II</b>	Information Re Noncharitable					action	ns and F	Relationships	With			
		nization directly or ii (c) of the Code (othe	ndırectly (	engage ın aı	ny of th	he following wit						Yes	No
organi	zations	;?											
<b>a</b> Transf	ers fro	m the reporting four	idation to	a noncharit	table e	xempt organiza	ition of						
<b>(1)</b> C:	ash.										1a(1)		No
<b>(2)</b> 0	ther as	ssets									1a(2)		No
<b>b</b> Other	transa	ctions											
<b>(1)</b> Sa	ales of	assets to a noncha	rıtable ex	empt organı	ızatıon						1b(1)		No
<b>(2)</b> Pu	urchas	es of assets from a	noncharıt	able exemp	t orgai	nızatıon					1b(2)		No
<b>(3)</b> Re	ental o	f facilities, equipme	nt, or othe	er assets.							1b(3)		No
<b>(4)</b> Re	eımbur	sement arrangemen	ts								1b(4)		No
		r loan guarantees.									1b(5)		No
		nce of services or m									1b(6)		No
											1c		No
<b>d</b> If the a of the one of the of	answer goods, transa	to any of the above other assets, or se ction or sharing arm	ıs "Yes," rvıces gıv angement	complete t en by the re , show in co	the follo eportin olumn <b>(</b>	owing schedule g foundation I ( <b>d)</b> the value of	Colum f the fou the god	nn <b>(b)</b> sho indation r ods, other	uld always show eceived less thar assets, or servio	the fair ma n fair mark ces receive	et value ed		at c
(a) line No	+ '	b) Amount involved	(c) Name	or nonchantal	DIC CXCI	Tipt organization	<u>(u)</u>	Description	or transfers, transact	ions, and site	ining arrai	igenien	11.5
descri	bed in s," con	section 501(c) of th aplete the following s	ie Code (d schedule		ection	501(c)(3)) or	ın sectı				·	s 🔽	No
Sign t	he bes nforma	t of my knowledge a tion of which prepar	nd belief,	ıt ıs true, c	orrect,	, and complete				in taxpaye May t	r) is bas he IRS dis	ed on	all
Here	) <u> </u>						-)			with t	he prepar	er show	/n
	Sig	nature of officer or the	rustee			Date	<u> </u>	TITIE	1		nstr )? 🔽	Yes	lo
				Preparer's	Signa	iture	Date		Check if self- employed ►	PTIN	000941	.37	
Prepare Use	er RS	SM US LLP		•					Firm's EIN ▶ 4	1-194441	6		
d If the answer to any of the above is "Yes," complete the following schedule:  of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services than fair market value in any transaction or sharing arrangement.  (a) Line No (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangement arrangement of the goods, and the value of the goods, other assets, or services than fair market value in any transactions of the goods, other assets, or services than fair market value in any transactions of the goods, other assets, or services than fair market value in any transaction of the goods, other assets, or services than fair market value in any transactions of the goods, other assets, or services than fair market value in any transaction of the goods, other assets, or services than fair market value in any transaction of the goods, other assets, or services than fair market value in any transaction of the goods, other assets, or services than fair market value in any transaction of transfers, transactions, and sharing arrangement for the goods, the fair market value in any transaction of transfers, transactions, and sharing arrangement for the goods, the fair market value in any transaction of transfers, transactions, and sharing arrangement for the goods, the fair value fair any transaction of transfers, transactions, and sharing arrangement for the goods, the fair value fair any transaction of transfers, transactions, and sharing arrangement fair arrangement fair value fair and transaction of transfers, transactions, and sharing arrangement fair value fair													

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

KENNETH K KINSEY

JEANETTE A KINSEY

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				
AGING SERVICES 317 7TH AVE SE 302 CEDAR RAPIDS,IA 52401	NONE	PUBLIC	GENERAL OPERATING FUND	1,500
ALZHEIMER'S ASSOCIATION EAST CENTRAL IOWA	NONE	PUBLIC	GENERAL OPERATING FUND	750
317 SEVENTH AVENUE SE STE 402 CEDAR RAPIDS,IA 52401				
AMERICAN SENIORS GOLF ASSN PO BOX 100 MARSTONS MILLS, MA 02648	NONE	PUBLIC	GENERAL OPERATING FUND	3,000
ATHLETES IN ACTION - CO CRAIG WELT 3741 LACINA DR SW IOWA CITY,IA 52240	NONE	PUBLIC	GENERAL OPERATING FUND	550
BIG BROTHERS BIG SISTERS 3109 OLD HWY 218 SOUTH IOWA CITY,IA 52240	NONE	PUBLIC	GENERAL OPERATING FUND	500
BIRDIES THAT CARE PO BOX 2336 CEDAR RAPIDS,IA 52406	NONE	PUBLIC	GENERAL OPERATING FUND	4,000
BOSTON CHILDREN'S HOSPITAL TRUST 401 PARK DR BOSTON,MA 02115	NONE	PUBLIC	GENERAL OPERATING FUND	500
BRETT GREENWOOD FOUNDATION 2001 SPRUCE HILLS DR BETTENDORF,IA 52722	NONE	PUBLIC	GENERAL OPERATING FUND	400
BROOKLINE EDUCATION FOUNDATION PO BOX 470652 BROOKLINE,MA 02447	NONE	PUBLIC	GENERAL OPERATING FUND	200
CAMP COURAGEOUS 12007 190TH STREET MONTICELLO,IA 52310	NONE	PUBLIC	GENERAL OPERATING FUND	1,700
CEDAR RAPIDS MUSEUM OF ART 410 THIRD AVE SE CEDAR RAPIDS,IA 52401	NONE	PUBLIC	GENERAL OPERATING FUND	1,000
CEDAR RAPIDS PUBLIC LIBRARY FOUNDATION 450 5TH AVE SE CEDAR RAPIDS,IA 52401	NONE	PUBLIC	GENERAL OPERATING FUND	1,000
CEDAR RAPIDS SCOTTISH RITE 616 A AVE NE CEDAR RAPIDS,IA 52401	NONE	PUBLIC	GENERAL OPERATING FUND	500
CLUBFOOT SOLUTIONS 2835 FRIENDSHIP ST IOWA CITY,IA 52245	NONE	PUBLIC	GENERAL OPERATING FUND	1,500
COMMUNITY DEVELOPMENT ALTERNATIVES FOR KIDS 410 E WASHINGTON ST IOWA CITY,IA 52240	NONE	PUBLIC	GENERAL OPERATING FUND	250
Total			▶ 3a	183,400

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient		
<b>a</b> Paid during the year				
COMMUNITY FOUNDATION OF JOHNSON COUNTY 325 E WASHINGTON STREET IOWA CITY,IA 52240	NONE	PUBLIC	GENERAL OPERATING FUND	5,000
COMMUNITY HEALTH FREE CLINIC 947 14TH AVE SE CEDAR RAPIDS,IA 52401	NONE	PUBLIC	GENERAL OPERATING FUND	2,000
COMMUNITY MENTAL HEALTH CENTER FOR MIDEASTERN IOWA 507 E COLLEGE ST IOWA CITY,IA 52240	NONE	PUBLIC	GENERAL OPERATING FUND	3,000
DOMESTIC VIOLENCE INTERVENTION PROGRAM PO BOX 3170 IOWA CITY,IA 52244	NONE	PUBLIC	GENERAL OPERATING FUND	2,000
DONALD ROSS SOCIETY FOUNDATION (DRS) 450 MONTBROOK LANE KNOXVILLE,TN 37919	NONE	PUBLIC	GENERAL OPERATING FUND	1,000
EL KAHIR SHRINE HOSPITAL 1400 BLAIRS FERRY RD NE CEDAR RAPIDS,IA 52402	NONE	PUBLIC	GENERAL OPERATING FUND	300
EVANS SCHOLARS FOUNDATION ONE BRIAR RD GOLF,IL 60029	NONE	PUBLIC	GENERAL OPERATING FUND	2,500
EWALU LUTHERAN CAMP 37776 ALPHA AVE STRAWBERRY POINT,IA 52076	NONE	RELIGIOUS ORGANIZATI	GENERAL OPERATING FUND	500
FAMSCO - ROTARY DISTRICT 6000 HUMANITARIAN AND EDUCATIONAL FOUNDATION INC 1811 N DUBUQUE RD IOWA CITY,IA 52240	NONE	PUBLIC	GENERAL OPERATING FUND	3,000
FARAJA FUND FOUNDATION C/O DON TOLMIE 8919 PARK RD UNIT 249 CHARLOTTE,NC 28210	NONE	PUBLIC	GENERAL OPERATING FUND	2,000
FEED MY STARVING CHILDREN C/O MARGY TOWERS 175 E DOVETAIL DR CORALVILLE,IA 52241	NONE	PUBLIC	GENERAL OPERATING FUND	1,000
FIRST CHRISTIAN CHURCH 800 LINCOLNSHIRE PLACE CORALVILLE,IA 52241	NONE	RELIGIOUS ORGANIZATI	GENERAL OPERATING FUND	200
FIRST CONGREGATIONAL CHURCH 500 8TH AVE SE MINNEAPOLIS,MN 55414	NONE	RELIGIOUS ORGANIZATI	GENERAL OPERATING FUND	1,200
FIRST PRESBYTERIAN CHURCH 2701 ROCHESTER AVE IOWA CITY,IA 52245	NONE	RELIGIOUS ORGANIZATI	GENERAL OPERATING FUND	2,000
FIRST TEE OF GREATER DES MOINES	NONE	PUBLIC	GENERAL OPERATING FUND	1,500

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	Тестріспе		
a Paid during the year				
FIRST TEE IN NAPLES 9393 VANDERBILT BEACH RD NAPLES,FL 34120	NONE	PUBLIC	GENERAL OPERATING FUND	1,500
FOLDS OF HONOR FND 5800 N PATRIOT DR OWASSO,OK 74055	NONE	PUBLIC	GENERAL OPERATING FUND	1,000
FRIENDS OF THE ANIMAL CENTER PO BOX 1345 IOWA CITY,IA 52244	NONE	PUBLIC	GENERAL OPERATING FUND	500
GIVE FOUNDATION 3184 HWY 22 RIVERSIDE,IA 52327	NONE	PUBLIC	GENERAL OPERATING FUND	1,500
GREATER CEDAR RAPIDS COMMUNITY FOUNDATION 324 3RD ST SE CEDAR RAPIDS,IA 52401	NONE	PUBLIC	GENERAL OPERATING FUND	3,000
HEALTHY KIDS COMMUNITY CARE (COMMUNITY FOUNDATION OF JOHNSON COUNTY IOWA) 325 E WASHINGTON STREET IOWA CITY,IA 52240	NONE	PUBLIC	GENERAL OPERATING FUND	5,000
HEIFER INTERNATIONAL 1 WORLD AVENUE LITTLE ROCK, AR 72202	NONE	PUBLIC	GENERAL OPERATING FUND	500
HERBERT HOOVER LIBRARY 210 PARKSIDE DR WEST BRANCH,IA 52358	NONE	PUBLIC	GENERAL OPERATING FUND	5,500
HERMAN SANI SCHOLARSHIP FUND - IOWA GOLF ASSN FOUNDATION 8515 DOUGLAS AVE STE 25 URBANDALE,IA 50322	NONE	PUBLIC	GENERAL OPERATING FUND	4,500
HITCHCOCK WOODS FOUNDATION POBOX 1702 AIKEN,SC 29802	NONE	PUBLIC	GENERAL OPERATING FUND	250
HOLDEN COMPREHENSIVE CANCER CENTER PO BOX 4550 IOWA CITY,IA 52244	NONE	PUBLIC	GENERAL OPERATING FUND	2,200
I CAN READ SONG SIGHT WORLD ACTIVITIES 1826 BROWN DEER COVE CORALVILLE,IA 52241	NONE	PUBLIC	GENERAL OPERATING FUND	750
ICCSD 509 S DUBUQUE IOWA CITY,IA 52240	NONE	PUBLIC	GENERAL OPERATING FUND	6,000
IJAG GRIMES STATE OFFICE BUILDING 3RD FLOOR DES MOINES,IA 50319	NONE	PUBLIC	GENERAL OPERATING FUND	1,500
IOWA CITY UNESCO CITY OF LITERATURE 123 S LINN ST IOWA CITY,IA 52240	NONE	PUBLIC	GENERAL OPERATING FUND	1,000
Total			▶ 3a	183,400

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	тестрієні		
a Paid during the year				
IOWA CITY ENGLERT THEATRE 221 E WASHINGTON ST IOWA CITY,IA 52240	NONE	PUBLIC	GENERAL OPERATING FUND	1,500
IOWA CITY FREE MEDICAL CLINIC 2440 TOWNCREST DR IOWA CITY,IA 52240	NONE	PUBLIC	GENERAL OPERATING FUND	1,000
IOWA CITY HOSPICE 1025 WADE ST IOWA CITY,IA 52240	NONE	PUBLIC	GENERAL OPERATING FUND	400
IOWA CITY MASONIC FOUNDATION 4970 AMERICAN LEGION RD IOWA CITY,IA 52240	NONE	PUBLIC	GENERAL OPERATING FUND	4,000
IOWA CITY PUBLIC LIBRARY 123 S LINN ST IOWA CITY,IA 52240	NONE	PUBLIC	GENERAL OPERATING FUND	1,000
IOWA CITY ROTARY WHEEL CLUB PO BOX 684 IOWA CITY,IA 52244	NONE	PUBLIC	GENERAL OPERATING FUND	500
IOWA ENVIRONMENTAL COUNCIL 521 E LOCUST ST STE 220 DES MOINES,IA 50309	NONE	PUBLIC	GENERAL OPERATING FUND	2,000
IOWA NATURAL HERITAGE FND 505 5TH AVE 444 DES MOINES,IA 50309	NONE	PUBLIC	GENERAL OPERATING FUND	200
IOWA PGA FOUNDATION ATTN BRIAN WERNIMONT 1900 COUNTRY CLUB DR CORALVILLE,IA 52241	NONE	PUBLIC	GENERAL OPERATING FUND	1,000
IOWA PUBLIC RADIO 2022 COMMUNICATIONS BUILDING AMES,IA 50011	NONE	PUBLIC	GENERAL OPERATING FUND	500
IOWA PUBLIC TELEVISION 6450 CORPORATE DRIVE JOHNSTON,IA 50131	NONE	PUBLIC	GENERAL OPERATING FUND	500
IOWA WOMEN'S FOUNDATION 2201 GRANTVIEW DR SUITE 200 CORALVILLE,IA 52241	NONE	PUBLIC	GENERAL OPERATING FUND	700
JOHNSON COUNTY CRISIS CENTER 1121 GILBERT COURT IOWA CITY,IA 52240	NONE	PUBLIC	GENERAL OPERATING FUND	1,000
JOHNSON COUNTY I CLUB PO BOX 4550 IOWA CITY,IA 52244	NONE	PUBLIC	GENERAL OPERATING FUND	200
JOHNSON COUNTY HISTORICAL SOCIETY 860 QUARRY RD CORALVILLE,IA 52241	NONE	PUBLIC	GENERAL OPERATING FUND	1,000
Total			▶ 3a	183,400

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	
<b>a</b> Paid during the year				
JUNIOR ACHIEVEMENT OF EASTERN IOWA 324 3RD ST SE 200 CEDAR RAPIDS,IA 52401	NONE	PUBLIC	GENERAL OPERATING FUND	500
KIRKWOOD COMMUNITY COLLEGE FOUNDATION 6301 KIRKWOOD BLVD SW CEDAR RAPIDS,IA 52404	NONE	PUBLIC	GENERAL OPERATING FUND	3,000
CORALVILLE ECUMENICAL FOOD PANTRY 2031 1ST STREET CORALVILLE,IA 52241	NONE	PUBLIC	GENERAL OPERATING FUND	1,500
MACPHAIL CENTER FOR MUSIC PO BOX 86 MINNEAPOLIS,MN 55486	NONE	PUBLIC	GENERAL OPERATING FUND	500
MARCY OPEN SCHOOL 415 4TH AVE SE MINNEAPOLIS,MN 55414	NONE	PUBLIC	GENERAL OPERATING FUND	1,000
MERCY HOSPITAL FDN 500 E MARKET ST IOWA CITY,IA 52245	NONE	PUBLIC	GENERAL OPERATING FUND	1,000
METRO MIX CHORUS 1417 3RD ST SE CEDAR RAPIDS,IA 52403	NONE	PUBLIC	GENERAL OPERATING FUND	1,000
MISSOURI MILITARY ACADEMY 204 N GRAND ST MEXICO,MO 65265	NONE	PUBLIC	GENERAL OPERATING FUND	1,200
MOUNT MERCY UNIVERSITY 1330 ELMHURST DR NE CEDAR RAPIDS,IA 52402	NONE	PUBLIC	GENERAL OPERATING FUND	5,000
NATIONAL ALLIANCE ON MENTAL ILLNESSJOHNSON COUNTY 1105 GILBERT CT IOWA CITY,IA 52240	NONE	PUBLIC	GENERAL OPERATING FUND	2,000
NATIONAL CZECH & SLOVAK MUSEUM AND LIBRARY 1400 INSPIRATION PLACE SW CEDAR RAPIDS,IA 52404	NONE	PUBLIC	GENERAL OPERATING FUND	500
NATIONAL WRESTLING HALL OF FAME 405 W HALL OF FAME AVE STILLWATER,OK 74075	NONE	PUBLIC	GENERAL OPERATING FUND	500
NEIGHBORHOOD CENTERS OF JOHNSON COUNTY PO BOX 2491 IOWA CITY,IA 52244	NONE	PUBLIC	GENERAL OPERATING FUND	1,000
OAKNOLL FOUNDATION 1 OAKNOLL COURT IOWA CITY,IA 52246	NONE	PUBLIC	GENERAL OPERATING FUND	1,000
ORCHESTRA IOWA SIGHT & SOUND 119 THIRD AVENUE SE CEDAR RAPIDS,IA 52401	NONE	PUBLIC	GENERAL OPERATING FUND	500
Total			▶ 3a	183,400

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
PARKINSON'S FOUNDATION 7700 LEESBURG PIKE SUITE 208 FALLS CHURCH,VA 22043	NONE	PUBLIC	GENERAL OPERATING FUND	200
PATHWAYS 817 PEPPERWOOD LANE IOWA CITY,IA 52240	NONE	PUBLIC	GENERAL OPERATING FUND	800
PONSETI INTERNATIONAL ASSOCIATION 401 SE 3RD STREET LEON,IA 50144	NONE	PUBLIC	GENERAL OPERATING FUND	500
REGINA FOUNDATION 2140 ROCHESTER AVE IOWA CITY,IA 52245	NONE	PUBLIC	GENERAL OPERATING FUND	100
RONALD MCDONALD HOUSE 730 HAWKINS DR IOWA CITY,IA 52246	NONE	PUBLIC	GENERAL OPERATING FUND	3,500
RIVERSIDE THEATRE 213 N GILBERT STREET IOWA CITY,IA 52245	NONE	PUBLIC	GENERAL OPERATING FUND	700
RUSSELL & ANN GERDIN AMERICAN CANCER SOCIETY HOPE LODGE 750 HAWKINS DR IOWA CITY,IA 52246	NONE	PUBLIC	GENERAL OPERATING FUND	1,200
SAFETY VILLAGE-MERCY IA CITY COMMUNITY RELATIONS 500 E MARKET ST IOWA CITY,IA 52245	NONE	PUBLIC	GENERAL OPERATING FUND	400
SHELTER HOUSE COMMUNITY 429 SOUTHGATE AVE IOWA CITY,IA 52240	NONE	PUBLIC	GENERAL OPERATING FUND	1,200
SOUTH FLORIDA PGA FOUNDATION C/O OLDE FLORIDA 9393 VANDERBILT BEACH RD NAPLES,FL 34120	NONE	PUBLIC	GENERAL OPERATING FUND	500
SUMMER OF THE ARTS 325 E WASHINGTON ST 301 IOWA CITY,IA 52240	NONE	PUBLIC	GENERAL OPERATING FUND	700
THE FIRST TEE OF BALTIMORE C/O SINCLAIR EADDY JR 1321 CHURCH HILL DR BALTIMORE,MD 21208	NONE	PUBLIC	GENERAL OPERATING FUND	1,000
THE FIRST TEE OF MINNEAPOLIS 445 ST ANTHONY PARKWAY MINNEAPOLIS, MN 55418	NONE	PUBLIC	GENERAL OPERATING FUND	500
THE IOWA CHILDRENS MUSEUM 1451 CORAL RIDGE AVE CORALVILLE,IA 52241	NONE	PUBLIC	GENERAL OPERATING FUND	1,200
THE READING CENTER - DYSLEXIA INSTITUTE OF MN 847 5TH ST NW ROCHESTER,MN 55901	NONE	PUBLIC	GENERAL OPERATING FUND	1,000
Total			▶ 3a	183,400

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				
THE SALVATION ARMY IOWA CITY CORP 1116 E GILBERT COURT IOWA CITY,IA 52240	NONE	PUBLIC	GENERAL OPERATING FUND	750
THE UNIVERSITY OF IOWA FOUNDATION LEVITT CENTER IOWA CITY,IA 52242	NONE	PUBLIC	GENERAL OPERATING FUND	38,500
THE WARRIOR ALLIANCE- OPERATION DOUBLE EAGLE 1205 JOHNSON FERRY RD SUITE 136 201 MARIETTA,GA 30068	NONE	PUBLIC	GENERAL OPERATING FUND	800
THEATRE CEDAR RAPIDS 102 3RD STREET SE CEDAR RAPIDS,IA 52401	NONE	PUBLIC	GENERAL OPERATING FUND	1,000
UNITED METHODIST CHURCH OF TIFFIN 300 WEST MARENGO ROAD TIFFIN,IA 52340	NONE	RELIGIOUS ORGANIZATI	GENERAL OPERATING FUND	200
UNITED WAY OF JOHNSON COUNTY 1150 5TH ST 290 CORALVILLE,IA 52241	NONE	PUBLIC	GENERAL OPERATING FUND	3,500
UNIVERSITY OF IOWA ALUMNI ASSOCIATION PO BOX 1970 IOWA CITY,IA 52244	NONE	PUBLIC	GENERAL OPERATING FUND	1,000
VISITING NURSE ASSN 2953 SIERRA CT SW IOWA CITY,IA 52240	NONE	PUBLIC	GENERAL OPERATING FUND	2,000
YMCA OF WASHINGTON COUNTY 121 E MAIN ST WASHINGTON,IA 52353	NONE	PUBLIC	GENERAL OPERATING FUND	5,000
YOUNG LIFE IOWA CITY 818 S GILBERT CT IOWA CITY,IA 52240	NONE	PUBLIC	GENERAL OPERATING FUND	1,000
YOUTH HOMES OF MID-AMERICA PO BOX 39 JOHNSTON,IA 50131	NONE	PUBLIC	GENERAL OPERATING FUND	1,200
Total				183,400

### **TY 2015 Accounting Fees Schedule**

Name: THE KENNETH K KINSEY FAMILY FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAX PREP FEES	3,285	1,643		1,642

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## **TY 2015 All Other Program Related Investments Schedule**

Name: THE KENNETH K KINSEY FAMILY FOUNDATION

Category	Amount
NONE	0

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### **TY 2015 Applied to Prior Year Election**

Name: THE KENNETH K KINSEY FAMILY FOUNDATION

**EIN:** 36-4154135

**Election:** 

PURSUANT TO REG. SEC. 53.4942(A)-3(D)(2), THE FOUNDATION

HEREBY ELECTS TO APPLY EXCESS QUALIFYING DISTRIBUTIONS

TO PRIOR YEAR UNDISTRIBUTED INCOME IN THE AMOUNT OF

\$1,135 FOR THE PRIOR YEAR ENDED DECEMBER 31, 2008.

KENNETH

K. KINSEY, PRESIDENT

#### DLN: 93491190005096

## **TY 2015 Investments Corporate Stock Schedule**

Name: THE KENNETH K KINSEY FAMILY FOUNDATION

Name of Stock	End of Year Book Value	End of Year Fair Market Value
2000 AMEREN CORP	48,230	99,100
2000 BRISTOL MYERS SQUIBB CO	47,351	143,400
1000 CALIFORNIA WATER SERVICE GROUP	19,356	29,150
5000 CENTURYLINK	168,472	135,600
5000 COEUR D ALENE MINES CORP	76,266	37,650
1000 DCP MIDSTREAM PARTNERS LP	29,770	33,530
2000 EMPIRE DISTRICT ELECTRIC CO	29,891	67,000
1000 FACTORSHARES TRUST	30,630	24,230
10000 FRONTIER COMMUNICATIONS CORP	86,232	51,700
10000 GREAT PLAINS ENERGY	224,899	291,800
9000 LOCKHEED MARTIN CORP	421,382	2,126,070
4500 MDU RESOURCES GROUP INC.	73,882	102,915
1000 NEWMONT MINING CORP	49,105	32,410
20000 ORASURE TECHNOLOGIES INC	146,992	153,600
3000 OTTER TAIL CORP	69,106	88,740
1000 PINNACLE FOODS INC	25,056	42,130
1000 SOUTHWEST GAS CORP	19,245	69,430
1000 SPECTRA ENERGY CORP	31,315	31,860
8000 TEKLA HEALTHCARE	137,876	206,640
1000 VERIZON COMMUNICATIONS	36,906	50,900
1833 WINDSTREAM CORP	40,056	15,379
2000 BARRICK GOLD CORP	57,170	33,540
1800 GOLAR LNG LIMITED	47,813	31,320
1000 SHIP FINANCE INTERNATIONAL LIMITED	17,352	16,030

#### **TY 2015 Investments - Other Schedule**

Name: THE KENNETH K KINSEY FAMILY FOUNDATION

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
1500 QWEST CORPORATION	AT COST	37,500	39,000
4000 SATURNS TR NO 2007	AT COST	72,224	64,400
2000 PUBLIC STORAGE (PSAPRP)	AT COST	0	0
2000 PUBLIC STORAGE (PSAPRQ)	AT COST	0	0
1000 PUBLIC STORAGE (PSAPRR)	AT COST	25,000	25,640
100000 EMBARQ CORP	AT COST	107,961	99,900
2200 COMMUNICATIONS SALES & LEASING	AT COST	67,354	54,956
750 MARKET VECTORS	AT COST	0	0
2000 PLUM CREEK TIMBER CO INC	AT COST	0	0
500 VANECK VECTORS	AT COST	47,187	16,900
3200 WEYERHAEUSER CO	AT COST	80,971	100,800

### **TY 2015 Other Expenses Schedule**

Name: THE KENNETH K KINSEY FAMILY FOUNDATION

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
USPS	59	0		0
CHECK ORDER	65	0		0

#### **TY 2015 Taxes Schedule**

Name: THE KENNETH K KINSEY FAMILY FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL TAX PAID	3,298	0		0
FOREIGN TAX PAID	33	0		0

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As Filed Data -

DLN: 93491190005096

14. 93491190003090

OMB No 1545-0047

0045

**Employer identification number** 

#### Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Schedule of Contributors**

► Attach to Form 990, 990-EZ, or 990-PF.
► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

2015

THE KI	ENNETH K KINSEY	FAMILY FOUNDATION				
			36-4154135			
Organ	ization type (check	one)				
Filers	of:	Section:				
Form 990 or 990-EZ		□ 501(c)( ) (enter number) organization				
		☐ 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation	ו			
		☐ 527 political organization				
Form 9	90-PF	<b>▽</b> 501(c)(3) exempt private foundation				
		☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation				
		☐ 501(c)(3) taxable private foundation				
Gener 「マ		n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions im any one contributor. Complete Parts I and II. See instructions for determining a				
Specia	al Rules					
Γ	under sections 509( received from any o	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> /3% suppa)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part ne contributor, during the year, total contributions of the greater of <b>(1)</b> \$5,000 or ii) Form 990-EZ, line 1 Complete Parts I and II	ll, line 13, 16a, or 16b, and that			
Γ	during the year, tota	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received locontributions of more than \$1,000 exclusively for religious, charitable, scientifical for children or animals. Complete Parts I, II, and III	•			
Г	during the year, con this box is checked, purpose Do not con	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received tributions exclusively for religious, charitable, etc., purposes, but no such contributions there the total contributions that were received during the year for an exclusive any of the parts unless the <b>General Rule</b> applies to this organization becaute, contributions totaling \$5,000 or more during the year	butions totaled more than \$1,000 lf usively religious, charitable, etc, ause it received nonexclusively			

990-EZ, or 990-PF)

For Paperwork Reduction Act Notice, see the Instructions

for Form 990, 990-EZ, or 990-PF

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990,

Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990,

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its

Name of organization
THE KENNETH K KINSEY FAMILY FOUNDATION

Employer identification number 36-4154135

Part I	Contributors (see instructions) Use duplicate copies of Part I if ac	dditional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
1	KERMIT KINSEY CHARITABLE LEAD UNIT BANK OF AMERICA 401 LOS OLAS BLVD	\$ 79,051	Person Payroll	r _
	FORT LAUDERDALE, FL 34394		Noncash (Complete Part II f contributions)	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Γ
		\$	Payroll	Γ
			Noncash	Γ
			(Complete Part II f contributions)	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Γ
		\$	Payroll	Г
			Noncash	Г
			(Complete Part II f contributions)	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Г
	-	\$	Payroll	Г
			Noncash	Г
			(Complete Part II f contributions)	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Γ
	-	\$	Payroll	Γ
			Noncash	Г
			(Complete Part II f contributions)	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Γ
		\$	Payroll	Γ
		<u> </u>	Noncash	Г
			(Complete Part II f contributions)	or noncash

Name of organization THE KENNETH K KINSEY FAMILY FOUNDATION		Employer identification number	
		36-4154135	
	Noncash Property (see instructions) Use duplicate copies of Part 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) Vo.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u> </u>	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u> </u>	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u> </u>	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-		<del></del>	

Schedule B (Form 990, 990-EZ, or 990-F	F)	(201	5)
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0, 990-EZ, or 990-PF) (2015)		Page <b>4</b>
		Employer identification number
NSELTATIELLOGNEALION		36-4154135
re than \$1,000 for the year from any o y. For organizations completing Part or less for the year. (Enter this infor	one contributor. Complete co III, enter the total of exclusive mation once. See instruction	olumns (a) through (e) and the following ely religious, charitable, etc., contributions
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Transferee's name, address, an		ft Relationship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Transferee's name, address, an	, ,	ft Relationship of transferor to transferee
<u>-</u> 		
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Transferee's name, address, an	, ,	ft Relationship of transferor to transferee
<u>-</u>		
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Transferee's name, address, an		ft Relationship of transferor to transferee
	n NSEY FAMILY FOUNDATION  ely religious, charitable, etc., contribute than \$1,000 for the year from any cy. For organizations completing Part or less for the year. (Enter this inforcate copies of Part III if additional space is  (b) Purpose of gift  Transferee's name, address, and  (b) Purpose of gift	NSEY FAMILY FOUNDATION  Party religious, charitable, etc., contributions to organizations descrete than \$1,000 for the year from any one contributor. Complete corp. For organizations completing Part III, enter the total of exclusive or less for the year. (Enter this information once. See instruction cate copies of Part III if additional space is needed  (b) Purpose of gift  (c) Use of gift  (e) Transfer of gift  (b) Purpose of gift  (c) Use of gift  (c) Use of gift  (d) Transfer of gift  (e) Transfer of gift  (e) Transfer of gift  (f) Use of gift  (g) Transfer of gift  (h) Purpose of gift