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.

2016

Department of the Treasury Internal Revenue Service ► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Open to Public Inspection For calendar year 2016 or tax year beginning , 2016, and ending Jun 30 Name of foundation Employer identification number Claude W. & Dolly Ahrens Foundation
Number and street (or PO box number if mail is not delivered to street address) 39-1906775 Room/suite Telephone number (see instructions) PO Box 284

City or town, state or province, country, and ZIP or foreign postal code (641) 236-5518 C If exemption application is pending, check here. 50112 Grinnell IA G Check all that apply: Initial return Initial return of a former public charity D 1 Foreign organizations, check here > Amended return Final return 2 Foreign organizations meeting the 85% test, check Address change Name change here and attach computation X Section 501(c)(3) exempt private foundation Check type of organization: If private foundation status was terminated under section 507(b)(1)(A), check here . . Other taxable private foundation Section 4947(a)(1) nonexempt charitable trust Fair market value of all assets at end of year Accounting method. Cash X Accrual (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination under section 507(b)(1)(B), check here . . ► S (Part I, column (d) must be on cash basis) 13,545,151. Part I Analysis of Revenue and (d) Disbursements Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (a) Revenue and (b) Net investment (c) Adjusted net for charitable expenses per books income income purposes (cash basis only) (see instructions).) Contributions, gifts, grants, etc., received (attach schedule) . 11,435. Check ► I If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments . . . 0. 100,060. 5 a Gross rents b Net rental income or (loss) 6 a Net gain or (loss) from sale of assets not on line 10 . . . REVENU **b** Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 511,664 28,570. Income modifications 10 a Gross sales less returns and allowances - **b** Less Cost of C Gross profit or (loss) (attach schedule) Other income (attach schedule) See Line 11 Stmt 83,723 12 Total. Add lines 1 through 11. 195,218. 511,664. 28,570. Compensation of officers, directors, trustees, etc -278,925. 12,871. 266,054. 14 Other employee salaries and wages 235,535. 235,535. Pension plans, employee benefits. 15 69,701. 69,701. RECEIVED 16a Legal fees (attach schedule). . L-16a Stmt. 5<u>63.</u> 563. 5,200. 5,200. 129,869 MAY 2 9 201 130,544. 675. ์ 17 '18 Taxes (attach schedule)(see Instrs) Payroll Taxes. 984 37,491 36,507. OGDEN. Depreciation (attach 19 schedule) and depletion . . . 20 33,181 33,181. 21 Travel, conferences, and meetings 737. 737. 22 Printing and publications 616. 616. 23 Other expenses (attach schedule) See Line 23 Stmt 132,610. 132,610. SE SE Total operating and administrative 24 expenses. Add lines 13 through 23 . . 925,103 143,724 781,379. Contributions, gifts, grants paid 396,986 411,986. Total expenses and disbursements. 1,322,089. 1,193,365. 143,724. Subtract line 26 from line 12: 27

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

b Net investment income (if negative, enter -0-).

a Excess of revenue over expenses and disbursements

TEEA0301 12/16/16

367,940

Form 990-PF (2016)

28,570.

-1,126,871

| Part | I | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only | Beginning of year | End of | ` |
|-------------|-------|--|-----------------------------|----------------|---------------------------------------|
| | | (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | | 31,255. | 30,112. | 30,112. |
| | 2' | · · · · · · · · · · · · · · · · · · · | | | · · · · · · · · · · · · · · · · · · · |
| | 3 | Accounts receivable | | | <u> </u> |
| | | Less. allowance for doubtful accounts | 34,753. | 8,186. | 8,186. |
| | 4 | Pledges receivable | | | |
| | _ | Less allowance for doubtful accounts | · | | ··· |
| | 5 | Grants receivable | | | |
| | 6 | Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) | | | |
| | 7 | Other notes and loans receivable (attach sch) | | | |
| AS | | Less. allowance for doubtful accounts | | | |
| SSET | 8 | Inventories for sale or use | 6,529. | 6,529. | 6,529. |
| | 9 | Prepaid expenses and deferred charges | | | |
| S | | a Investments — U.S and state government obligations (attach schedule) | | | |
| | | b Investments — corporate stock (attach schedule) . L-10b, Stmt | 9,112,196. | 8,544,372. | 13,344,678. |
| | • | c 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) L-13 Stmt | 150,000. | 150,000. | 150,000. |
| | 14 | | | | |
| | | Less: accumulated depreciation (attach schedule) | | | |
| | 15 | Other assets (describe L-15 Stmt) | 4,752. | 5,646. | 5,646. |
| | | Total assets (to be completed by all filers — see the instructions Also, see page 1, item I) | | 8,744,845. | 13,545,151. |
| L | 17 | • | 39,239. | 193,785. | |
| Α | 18 | Grants payable | 55,000. | 40,000. | , |
| B | 19 | · · | | | |
| L | 20 | Loans from officers, directors, trustees, & other disqualified persons | | · | |
| Ť | 21 | Mortgages and other notes payable (attach schedule) | | | |
| - 1 | 22 | | 41,245. | 0. | ` , |
| E S | 23 | | 135,484. | 233,785. | |
| | | Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. | | | |
| N F E U | 24 | Unrestricted | | | |
| E U | 25 | Temporarily restricted | 9,204,001. | 8,511,060. | |
| , D | 26 | | | | • |
| A B S A E L | | Foundations that do not follow SFAS 117, check here Description and complete lines 27 through 31. | | | , , , |
| E L | 27 | Capital stock, trust principal, or current funds | | | 4 |
| SŅ | 28 | Pald-ın or capital surplus, or land, bldg , and equipment fund | | | |
| OE | 29 | Retained earnings, accumulated income, endowment, or other funds | | | |
| ŔŠ | 30 | Total net assets or fund balances (see instructions) | 9,204,001. | 8,511,060. | |
| | 31 | Total liabilities and net assets/fund balances (see instructions) | 9,339,485. | 8,744,845. | |
| Par | HI | Analysis of Changes in Net Assets or Fund Balance | es | | |
| | end- | il net assets or fund balances at beginning of year — Part II, column (of-year figure reported on prior year's return) | | 1 | 9,204,001. |
| 2 | Ente | er amount from Part I, line 27a | | 2 | -1,126,871. |
| 3 | Other | r increases not included in line 2 (itemize) | | 3 | 433,930. |
| 4 | Add | r increases not included in line 2 (itemize) | | 4 | 8,511,060. |
| • | Door | pages not included in line 2 (itemize) | | E | |
| 6 | Tota | il net assets or fund balances at end of year (line 4 minus line 5) — P | art II, column (b), line 30 | 6 | 8,511,060. |
| | | | | | |

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 the Part VI instructions.

1,193,365.

| a Exempl operating foundations described in acction 4940(p(02, check here. | m 990-PF (2016) Claude W. & Dolly Ahrens Foundation | | <u> 39-1</u> | 90677 | 5 | Р | age 4 |
|--|---|---|--|-------------|---------------|-----------------|--|
| Delie of fulling or determinations later (attach copy of letter If necessary — see instructions) Domhests foundations that meet the section 4940(e) requirements in Part V, check here — X and enter 1% of Part I, time 270 All other domests foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, cot (b) Zav Judies section 511 (domestics section 4947(e)(1) trusts and taxable foundations only. Others enter -0-) Ad other 4 and 2. Subtitle A (income) tax (domestic section 4947(e)(1) trusts and taxable foundations only. Others enter -0-) Tax based on Investment Income. Subtract line 4 from line 3 if zero or less, enter -0- Tax based on Investment Income. Subtract line 4 from line 3 if zero or less, enter -0- Tax based on Investment Income. Subtract line 4 from line 3 if zero or less, enter -0- Tax based on linvestment Income. Subtract line 4 from line 3 if zero or less, enter -0- Tax based on linvestment Income. Subtract line 4 from line 3 if zero or less, enter -0- Tax based on linvestment Income. Subtract line 4 from line 3 if zero or less, enter -0- Tax based on linvestment Income. Subtract line 4 from line 3 if zero or less, enter -0- Tax based on linvestment Income. Subtract line 4 from line 3 if zero or less, enter -0- Tax based on linvestment Income. Subtract line 4 from line 3 if zero or less, enter -0- Tax based on linvestment Income. Subtract line 4 from line 3 if zero or less, enter -0- Tax based on linvestment Income. Subtract line 4 from line 3 if zero or less, enter -0- Tax based on linvestment Income. Subtract line 4 from line 5 if zero or less, enter -0- Tax based on linvestment Income. Subtract line 4 from line 5 if zero or less, enter -0- Tax based on linvestment Income. Subtract line 4 from line 5 if zero or line 6 if zero or li | | or 4948 - | – see i | nstructi | ions) | | |
| Domestic foundations that meet the section 4940(e) requirements in Part V, | a Exempt operating foundations described in section 4940(d)(2), check here b and enter 'N/A' on line 1. | $\overline{}$ | | | | | |
| Domestic foundations that meet the section 4940(e) requirements in Part V, | Date of ruling or determination letter (attach copy of letter if necessary — see instruc | ctions) | ļ | 1 | | | |
| Ad 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. Add lines 1 and 2. 3 3, 677 Subtletla A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0. 4 (17ax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0. 5 3, 677. Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0. 5 3, 677. Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0. 5 3, 677. Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0. 5 3, 677. Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0. 5 3, 677. Tax based on investment line 4 from line 3 if zero or less, enter -0. 5 3, 677. Tax based on investment line 4 from line 5 if zero or less, enter -0. 5 4 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 | b Domestic foundations that meet the section 4940(e) requirements in Part V, | - | [| 1 | | 3,6 | 79. |
| Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4 (Add lines 1 and 2 3, 3, 671 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4 (Add lines 1 and 2 3, 671 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 (3, 671 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- 5 (3, 671 Credits:Payments. 2010 estimated tax prais and 2015 overpayment credited to 2016 Exempt foreign organizations — tax withheld at source — 6 b Exempt foreign organizations — tax withheld at source — 6 b Exempt foreign organizations — tax withheld at source — 6 b Tax paid with application for extension of time to file (Form 8868) — 6 c Tax paid with application for extension of time to file (Form 8868) — 6 c Enter any pensity for underpayment of estimated tax. Check here | check here . ► X and enter 1% of Part I, line 27b | | Γ | | | | |
| foundations only Others enter -0-) Add lines 1 and 2. Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Add lines 1 and 12. Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Add lines 1 and 2. Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Add lines 1 and 2. Add lines 1 and 2. Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Add lines 1 and 2. Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Add lines 1 and 3 | c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b) |] | - | | | | |
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| Credits/Payments. 2016 estimated tax prais and 2015 overpayment credited to 2016 Exempt foreign organizations — tax withheld at source 6 b Exempt foreign organizations — tax withheld at source 6 b Exempt foreign organizations — tax withheld at source 6 b Exempt foreign organizations — tax withheld at source 6 c 6 d Total credits and payments. Add lines 6a through 6d Enter any penalty for underpayment of estimated tax Check here Exit a que, if the fold fines 5 and 8 is more than line 10 at some than line. A enter amount ower. 9 3, 7,99 Overpayment, if line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be Credited to 2017 estimated tax. Refunded 11 rt VII-A Statements Regarding Activities a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? Do bot it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 1 b If the answer is Yes' to 1s 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. Did the foundation file Form \$120-POL for this year? (1) On the foundation in \$ Enter the reimbursement (fir any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation in \$ Enter the reimbursement (any) and by the foundation during the year for political expenditure tax imposed on foundation managers. \$ If Yes, attach a detailed description of the activities Has the foundation managers of other small instruments? Pres, attach a conformed copy of the changes 3 c Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4 a bit Yes, has it filed a tax return on Form 990-T for this year? 4 bit Yes, has it filed a tax return on Form 990-T for this year? 5 if Yes, attach he statement | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others ente | er -0-) | [| 4 | | | 0. |
| a 2016 estimated tax pmts and 2015 overpayment credited to 2016 6 6 b between foreign organizations — tax withheld at source 6 6 b c Tax paid with application for extension of time to file (Form 8868) 6 c d Backup withholding erroneously withheld . 6 d Total credits and payments Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here X of Form 2220 is attached 7 Tax due, if the total of lines 5 and 8 is more than line 7, enter amount owed 9 3, 7, 9 Overpayment, if line 7 is more than line total of lines 5 and 8, enter the amount owed 9 3, 7, 9 Overpayment, if line 7 is more than line total of lines 5 and 8, enter the amount owed 9 3, 7, 9 Overpayment, if line 10 to be Credited to 2017 estimated tax. P Refunded 11 If VII-A Statements Regarding Activities a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1 b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? If the answer is Yes' to 1 a or 1b, attach a detailed description of the activities and copies of any metenals published or distributed by the foundation in connection with the activities and copies of any metenals published or distributed by the foundation in connection with the activities. 1 b C di Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year 1 c di Enter the rembursement (if any) and by the foundation during the year for political expenditure tax imposed on foundation managers . \$ 9 c Enter the rembursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers . \$ 9 c Enter the rembursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers . \$ 9 c Enter the rembursement (if any) paid by the foundation during the year for political expenditure ta | Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0 | | [| 5 | | 3,6 | 79. |
| Exempt foreign organizations — tax withheld at source | Credits/Payments. | | | | | | |
| Tax paid with application for extension of time to file (Form 8868). d Backup withholding ernoeously withheld. Total credits and payments. Add lines 6a through 6d. Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached. 7 Tax due, if the total of lines 5 and 8 is more than line?, relief amount owed. 9 3, 79 Overpayment, If line? Is more than the total of lines 5 and 8, enter the amount overpaid. 10 11 Triad for the amount of line 10 to be Credited to 2017 estimated tax. ** ** ** ** ** ** ** ** ** | a 2016 estimated tax pmts and 2015 overpayment credited to 2016 | | |] | | | |
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| Total credits and payments. Add lines 6a through 6d. Enter any penalty for underpayment of estimated tax. Check here In Enter any penalty for underpayment of estimated tax. Check here In It as due, if the total of lines 5 and 8 is more than line 7, enter amount owed. 9 3, 7, 9. Overpayment, If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. Enter the amount of line 10 to be. Credited to 2017 estimated tax. 10 Enter the amount of line 10 to be. Credited to 2017 estimated tax. 11 In 17 In 1 | c Tax paid with application for extension of time to file (Form 8868) 6 c | | | - | | | |
| Enter any penalty for underpayment of estimated tax. Check here: X If Form 2220 is attached B 11.7 Tax due, If the total of lines 5 and 8 is more than line 7, enter amount owed 9 3, 79 | d Backup withholding erroneously withheld | | | | | | |
| Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed. Second Se | Total credits and payments Add lines 6a through 6d | | | 7 | | | |
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| Enter the amount of line 10 to be Credited to 2017 estimated tax. ***Refunded . ** 11 **Refunded . ** 11 **A Did A Statements Regarding Activities a participate or intervene in any political campaign? | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | ▶[| 9 | | 3,7 | 91. |
| To VII-A Statements Regarding Activities a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? b Ind it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? b It 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. c bid the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \(\times \circ \sqrt{\sqrt | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | ▶ | 10 | | | 0. |
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| (see Instructions for the definition)?. If the answer is 'Yes' to fa or 1b, attach a detailed description of the activities and copies of any meterials published or distributed by the foundation in connection with the activities. Did the foundation file Form 1120-POL for this year? If call the foundation file Form 1120-POL for this year? If chief the amount (if any) of tax on political expenditures (section 4955) imposed during the year? If On the foundation \$ \$ (2) On foundation managers \$ \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ \$ Enter the foundation engaged in any activities that have not previously been reported to the IRS? Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes 3 and the foundation have unrelated business gross income of \$1,000 or more during the year? 4 a bif 'Yes,' has it filed a tax return on Form 990-T for this year? 4 b bif 'Yes,' attach the statement required by General Instruction T Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument is registered (see instructions) B | | | | | . 1a | | Х |
| or distributed by the foundation in connector with the activities. C Did the foundation file Form 1120-PDL for this year? (1) On the foundation \$ (2) On foundation managers \$ Enter the amount (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ Has the foundation engaged in any activities that have not previously been reported to the IRS? 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 3 a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a bif 'Yes,' has it filed a tax return on Form 990-T for this year? 4b Was there a liquidation, termination, dissolution, or substantial contraction during the year? 4b Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 If 'Yes,' attach the statement required by General Instruction T Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 6 X Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col. (c), and Part XV 7 X a Enter the states to which the foundation reports or with which it is registered (see instructions) | (see Instructions for the definition)? | | | | . 1 b | | Х |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation > \$ (2) On foundation managers > \$ enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers > \$ > \$ | | , | | | | | |
| (1) On the foundation . | | | | | . 1c | | Х |
| e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers | | | | | , | | ` |
| Foundation managers | | | | | | | , |
| Has the foundation engaged in any activities that have not previously been reported to the IRS? 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 a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4 a bif 'Yes,' has it filed a tax return on Form 990-T for this year? 4 b Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 if 'Yes,' attach the statement required by General Instruction T Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col (c), and Part XV 7 X a Enter the states to which the foundation reports or with which it is registered (see instructions) 10WA b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Altorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation 8 b X | | mposea o | 111) | | | | |
| 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 a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4 a b if 'Yes,' has it filed a tax return on Form 990-T for this year? 4 b Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 if 'Yes,' attach the statement required by General Instruction T Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 5 id the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col. (c), and Part XV. 7 is a Enter the states to which the foundation reports or with which it is registered (see instructions) 1 OWA b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Altorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation 1 is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) | - | | | | 2 | | X |
| 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. a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4 a b if 'Yes,' has it filed a tax return on Form 990-T for this year? 4 b Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 b If 'Yes,' attach the statement required by General Instruction T Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either 8 by language in the governing instrument, or 8 by state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 5 complete Part II, col (c), and Part XV 7 X a Enter the states to which the foundation reports or with which it is registered (see instructions) 1 OWA 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) of each state as required by General Instruction G' If 'No,' attach explanation 1 s the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) | | | | | | | ├ ^ |
| of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes a Did the foundation have unrelated business gross income of \$1,000 or more during the year? b If 'Yes,' has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year? If 'Yes,' attach the statement required by General Instruction T Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 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 The answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Altorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation I OWA Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) | · | | | | | | l |
| a Did the foundation have unrelated business gross income of \$1,000 or more during the year? b If 'Yes,' has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year? If 'Yes,' attach the statement required by General Instruction T Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 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 Town a Enter the states to which the foundation reports or with which it is registered (see instructions) LOWA b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Altorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument of incompretion, or bulgue, or other similar instruments? If 'Ves' attach a conformed copy of the chair | nt, articles | • | | 3 | | X |
| b If 'Yes,' has it filed a tax return on Form 990-T for this year? | | | | | | | X |
| Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | | | | | | <u> </u> |
| If 'Yes,' attach the statement required by General Instruction T Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? | | | | | | | X |
| Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? | | · · · · · | | | - | | <u> </u> |
| By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? | · | | | | | 1 | 1 |
| By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? | | | | | | | |
| with the state law remain in the governing instrument? | | | _ | | - 1 | | |
| 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 | By state legislation that effectively amends the governing instrument so that no mandatory direction with the state law remain in the governing instrument? | ns that co | onflict | | 6 | v | |
| a Enter the states to which the foundation reports or with which it is registered (see instructions) | | | | | | } | |
| I OWA 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) 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) of each state as required by General Instruction G? If 'No,' attach explanation | | | - | | | | |
| (or designate) of each state as required by General Instruction G? If 'No,' attach explanation | | | ······································ | | 1 | } | ì |
| Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) | 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) of each state as required by General Instruction G2 if 'No.' attach explanation | | | | 8h | x | |
| Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If 'Yes,' complete Part XIV 9 | | | | | - | ^` | |
| 10. caronical Jean 20.00 tillo taxable Jean beginning in 20.0 (open instruction of a trivial). It is only complete a trivial | Is the foundation claiming status as a private operating foundation within the meaning of section 494 for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If 'Yes' | i2(j)(3) or complete | 4942(J) Part X | (5) 7V | | | X |
| Did any persons become substantial contributors during the tax year? If 'Yes.' attach a schedule listing their names | | | | • | | | |

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Form 990-PF (2016)

| For | n 990-PF (2016) Claude W. & Dolly Ahrens Foundation 39-1906775 rt VII-A Statements Regarding Activities (continued) | <u> </u> | Р | age 5 |
|-----|--|---------------|------|--|
| | | ····· | Yes | No |
| 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 | .00 | X |
| 12 | · | 12 | | |
| 13 | - | | Х | X |
| | Website address ahrensfamilyfoundation.org | | | L |
| 14 | The books are in care of Claude W. & Dolly Ahrens Foundation Telephone no (641) Located at 1510 Penrose Street Grinnell IA ZIP+4 50112 | 23 <u>6</u> - | -551 | 8 |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here | | | |
| 16 | At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? | 16 | Yes | No X |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country | | | - |
| Pa | rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | ! |
| | File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies. | | Yes | No |
| 1 | a During the year did the foundation (either directly or indirectly). | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | | | · |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) 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' 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) | | | |
| | 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)? | 1 b | | X |
| | 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 2016? | 1 c | | X |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)) | | | |
| | a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? | 1 | | |
| | If 'Yes,' list the years ▶ 20 , 20 , 20 | | | |
| | b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions.) | 2 b | | |
| | c if the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | 20 | | |
| | ► 20, 20, 20 | | | 1 |
| 3 | a 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 2016 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 2016) | 2 6 | | |
| A | a Did the foundation invest during the year any amount in a manner that would jeopardize its | 3 b | | |
| 7 | chantable purposes? | 4 a | | х |

4 b

| Form 990-PF (2016) Claude W. & Dolly | Ahrens Foundat | ion | 39-190 | 6775 | Page 6 | | | |
|--|---|-----------------------------|---|--------------|----------------------|--|--|--|
| Part VII-B Statements Regarding Activiti | | 4720 May Be Requ | uired (continued) | | | | | |
| 5 a During the year did the foundation pay or incur at (1) Carry on propaganda, or otherwise attempt to | * | action 4045(e)\2 | Yes X | No | , i | | | |
| (2) Influence the outcome of any specific public | election (see section 495 | i5), or to carry | 0 0 | | 1 | | | |
| on, directly or indirectly, any voter registration drive? | | | | | | | | |
| (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions) | | | | | | | | |
| (5) Provide for any purpose other than religious, educational purposes, or for the prevention of | No | | | | | | | |
| 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)? | | | | | | | | |
| Organizations relying on a current notice regarding | | | | | | | | |
| c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsib | foundation claim exemplifity for the grant? | tion from the | · · · · · · Yes | No | | | | |
| If 'Yes,' attach the statement required by Regulat | tions section 53.4945–5 | (d). | | | 1 | | | |
| 6 a Did the foundation, during the year, receive any to on a personal benefit contract? | | | | | | | | |
| b Did the foundation, during the year, pay premium | ns, directly or indirectly, o | on a personal benefit con | tract? | 6b | X | | | |
| If 'Yes' to 6b, file Form 8870. 7 a At any time during the tax year, was the foundati | on a party to a prohibited | tax shelter transaction? | Yes | No | | | | |
| b If 'Yes,' did the foundation receive any proceeds | | | | 1- 1- | | | | |
| Part VIII Information About Officers, Dand Contractors | irectors, Trustees, | Foundation Manag | jers, Highly Paid E | mployees | , | | | |
| 1 List all officers, directors, trustees, foundation | n managers and their o | compensation (see inst | ructions). | | | | | |
| · · · · · · · · · · · · · · · · · · · | (b) Title, and average | (c)Compensation | (d)Contributions to | (e) Expense | account | | | |
| (a) Name and address | hours per week devoted to position | (If not paid, enter -0-) | employee benefit plans and deferred compensation | | owances | | | |
| Chad Ahrens | | | | | | | | |
| PO Box 284 | Vice President | ^ | | | ^ | | | |
| Grinnell IA 50112 | 2.00 | 0. | 0. | | 0. | | | |
| David Clay PO Box 284 | Inevetment Chair, Director | | | | | | | |
| Grinnell IA 50112 | 10.00 | 0. | 0. | | 0. | | | |
| Susan Witt | | | <u> </u> | | | | | |
| PO Box 284 | Director | | | | | | | |
| Grinnell IA 50112 | 2.00 | 0. | 0. | | 0. | | | |
| See Information about Officers, Directors, Trustees, Etc. | | | | | | | | |
| | | 278 , 925. | 7,410. | | 0 | | | |
| 2 Compensation of five highest-paid employee | s (other than those inc | | | nter 'NONE.' | 0. | | | |
| (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, lowances | | | |
| Michelle Gruhn PO Box 284 | Accounting Manager | | | | | | | |
| Grinnell IA 50112 Melissa Hull | 45.00 | 70,417. | 2,112. | | 0. | | | |
| PO Box 284 Grinnell IA 50112 | Director of Community Relations 45.00 | 68,911. | 1,868. | | 0. | | | |
| | | | | | | | | |
| | | · | | | | | | |
| | | | | | | | | |
| | | | ······································ | | | | | |
| | | | | | | | | |
| Total number of other employees paid over \$50,000 . | | | | h | 4 | | | |
| BAA | TEEA0306 12 | | | Form 990 | -PF (2016) | | | |

| Form 000 PE /2016\ Cl | |
|--|----------------------------|
| Form 990-PF (2016) Claude W. & Dolly Ahrens Foundation 39-1 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued) | 906775 Page 7 d Employees, |
| 3 Five highest-paid independent contractors for professional services (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 | (b) compensation |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | · |
| | |
| | |
| | |
| | |
| Total number of others receiving over \$50,000 for professional services | . None |
| | · I None |
| Part IX-A Summary of Direct Charitable Activities | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | Expenses |
| 1 | |
| | |
| | |
| 2 | |
| | |
| 3 | |
| | - - |
| | |
| 4 | |
| | |
| Part IX-B Summary of Program-Related Investments (see instructions) | |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. | Amount |
| 1 | 7 111 10 111 |
| | |

| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. | Amount |
|---|--------------------|
| 1 | |
| | |
| | |
| 2 | |
| | |
| | |
| All other program-related investments. See instructions | |
| 3 | |
| | |
| | |
| Total. Add lines 1 through 3 | |
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Part XII Qualifying Distributions (see instructions)

| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc — total from Part I, column (d), line 26 | 1 a | 1,193,365. |
|---|--|-----|------------|
| | Program-related investments — total from Part IX-B | 1 b | |
| 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) | 3 a | |
| | Cash distribution test (attach the required schedule) | 3 b | |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 1,193,365. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions) | 5 | 3,679. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 1 189 686 |

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

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Form 990-PF (2016)

Part XIII Undistributed Income (see instructions)

| • | (a) Corpus | (b) Years prior to 2015 | (c) 2015 | (d) 2016 |
|--|---------------------------------------|----------------------------|---------------------------------------|-------------|
| 1 Distributable amount for 2016 from Part XI, line 7 | | | | 629,066. |
| 2 Undistributed income, if any, as of the end of 2016 | | | | 023,000. |
| a Enter amount for 2015 only | | | | |
| b Total for prior years 20 , 20 , 20 | | | · · · · · · · · · · · · · · · · · · · | |
| 3 Excess distributions carryover, if any, to 2016. | | | | |
| a From 2011 611, 725. | | | | |
| b From 2012 544,595. | | | | |
| c From 2013 678,818. | | | | |
| d From 2014 196, 231. | | | • | |
| e From 2015 547, 421. | - | | | |
| f Total of lines 3a through e | 2,578,790. | | | |
| 4 Qualifying distributions for 2016 from Part | 2,370,730. | | | |
| XII, line 4: \$ 1,193,365. | | | | |
| a Applied to 2015, but not more than line 2a | | | | |
| b Applied to undistributed income of prior years (Election required — see instructions) | | ~ = | | |
| c Treated as distributions out of corpus (Election required — see instructions) | | | , | |
| d Applied to 2016 distributable amount | | | | |
| e Remaining amount distributed out of corpus | 1,193,365. | | , | |
| 5 Excess distributions carryover applied to 2016 | | | , | |
| (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: | | , | • | |
| a Corpus Add lines 3f, 4c, and 4e. Subtract line 5 | 3,772,155. | | | |
| 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 | | | - | - |
| d Subtract line 6c from line 6b. Taxable | , | | | . 4 |
| amount - see instructions | · · · · · · · · · · · · · · · · · · · | 0. | | |
| Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount — see instructions | - | | 0. | |
| | * * * | | | |
| f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017 | | | | 629,066. |
| 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 2011 not applied on line 5 or line 7 (see instructions) | 611,725. | | | |
| 9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a | 3,160,430. | | | , , , , |
| 10 Analysis of line 9: | | , | | |
| a Excess from 2012 544,595. | | 1 | | |
| b Excess from 2013 678,818. | | | | ь |
| © Excess from 2014 196, 231. | | | | |
| d Excess from 2015 547, 421. | | | | |
| e Excess from 2016 1,193,365. | | | <u> </u> | |
| | | | | |

| Form 990-PF (2016) Claude W. & Dolly | | | // A | 39-190677 | |
|---|-----------------------|--|---|---------------------------------------|---------------------------------------|
| Part XIV Private Operating Foundat | | | | | N/A |
| 1 a If the foundation has received a ruling or deto is effective for 2016, enter the date of the ruli | ing | | | . <u></u> • | |
| b Check box to indicate whether the foundation | | ng foundation describ | bed in section | 4942(j)(3) or | 4942(j)(5) |
| 2 a Enter the lesser of the adjusted net income from Part I or the minimum | Tax year | | Pnor 3 years | | (e) Total |
| investment return from Part X for | (a) 2016 | (b) 2015 | (c) 2014 | (d) 2013 | · · · · · · · · · · · · · · · · · · · |
| each year listed | <u> </u> | | |] | |
| c Qualifying distributions from Part XII, | | | | | |
| line 4 for each year listed | | | | , , | |
| d Amounts included in line 2c not used directly for active conduct of exempt activities | | | | , , | |
| e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c | | | | , | |
| 3 Complete 3a, b, or c for the alternative test relied upon | | | | | |
| a 'Assets' alternative test — enter- | | | , ' | | |
| (1) Value of all assets | | | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed | | | | | |
| c 'Support' alternative test — enter. | | | | | |
| (1) Total support other than gross | | | | | 1 |
| investment income (interest, dividends, rents, payments on securities loans (section | | | | | |
| 512(a)(5)), or royalties) | } <i>,</i> | / | | <u> </u> | |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) | | | | | |
| (3) Largest amount of support from an exempt organization | | | | | |
| (4) Gross investment income | | | | | |
| Part XV Supplementary Information | (Complete this | part only if the | foundation had | \$5,000 or more | in |
| assets at any time during th | e year – see in | structions.) | | · · · · · · · · · · · · · · · · · · · | |
| Information Regarding Foundation Managa a List any managers of the foundation who have close of any tax year (but only if they have continued to the cont | ve contributed more | than 2% of the total of \$5,000). (See section | contributions receive on 507(d)(2)) | d by the foundation | before the |
| b List any managers of the foundation who ow | n 10% or more of the | stock of a comprate | ion (or an equally lar | ge notion of the own | nership of |
| a partnership or other entity) of which the fou | | | ion (or an equally lai | ge portion of the owi | leratile of |
| 2 Information Regarding Contribution, Gran | at Gift Loan Scho | larehin eta Decare | ame. | | |
| Check here if the foundation only marequests for funds if the foundation makes g | akes contributions to | preselected charitab | ole organizations and | | |
| complete items 2a, b, c, and d | | 4ha | | | |
| a The name, address, and telephone number of | or e-mail address of | the person to whom | applications should | be addressed | |
| b The form in which applications should be sul | omitted and informat | ion and materials the | ey should include | | |
| | | | | | |
| c Any submission deadlines | | | | | |
| d Any restrictions or limitations on awards, suc | ch as by geographica | al areas, charitable fie | elds, kinds of institut | ions, or other factors | · · · · · · · · · · · · · · · · · · · |
| | | | | | 000 PF (0040) |
| BAA | TE | EA0310 12/16/16 | | 1 | Form 990-PF (2016) |

3 Grants and Contributions Paid During the Year or Approved for Future Payment

| Recipient | | If recipient is an individual, show any relationship to | Foundation | Purpose of grant or | Amount |
|-------------------------------|--------------|---|---------------------|------------------------------------|--------------------|
| Name and address (home or b | usiness) | any foundation manager or substantial contributor | status of recipient | contribution | Amount |
| a Paid during the year | 431110307 | Of Substantial Contributor | | | |
| Ahrens Park Foundation | | | i | | |
| PO Box 679 | | | | | |
| Grinnell | IA 50112 | | Non-Profit | Operating Funds, Capital Purchases | 350,739. |
| Greater Poweshiek Community | y Foundation | | | | |
| PO Box 344 | | | | | |
| Grinnell | IA 50112 | | Non-Profit | Eduation Parternship Fund | 5,000. |
| Galaxy | | | |] | |
| PO Box 29 | | | ļ | 1 | |
| Grinnell | IA 50112 | | Non-Profit | Tax Payment - Catch UP | 16,247. |
| Greater Poweshiek Community | y Foundation | | | | |
| PO Box 344 | | |] | | |
| Grinnell | IA 50112 | | Non-Profit | Park Renovation | 15,000. |
| Scholarships | | | | | |
| | | None | | | |
| | | | Collegs | Scholarships | 25,000. |
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| Total | . <i></i> . | · · · · · · · · · · · · · · · · · · · | | 3a | 411,986. |
| b Approved for future payment | | | } | | |
| Scholarships for 2017 | | | | | |
| | | | | | |
| | | None | Colleges | Schoalrships | 25,000. |
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| Total | | | | > 3b | 25,000. |
| RAA | | | 116/16 | 30 | Form 990-PF (2016) |

| art XVI-A Analysis of In- ter gross amounts unless otherw | | | ousiness income | Excluded by | section 512, 513, or 514 | |
|--|---|--|---------------------------------------|--------------------------|--------------------------|--|
| Program service revenue | NO INCIDENT | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | (e) Related or exemy function income (See instructions |
| a | | | | code | | · · · · · · · · · · · · · · · · · · · |
| åb | | | | | | |
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| Ŭ ₿ | | <u> </u> | | | | |
| f | | | | | | |
| g Fees and contracts from gove | ernment agencies | - | | | | |
| Membership dues and assess | _ | | | | | |
| Interest on savings and temporary of | ash investments | | | | | |
| Dividends and interest from s | ecurities | | | | | |
| Net rental income or (loss) from | om real estate [.] | | | | | |
| a Debt-financed property | | | | | | |
| Not debt-financed property . | | | | | | |
| Net rental income or (loss) from per | sonal property | ļ <u>.</u> | | | | |
| Other investment income | | | | | | |
| Gain or (loss) from sales of assets of | - | | | | | |
| Net income or (loss) from spe | | | | | | |
| Gross profit or (loss) from sal | es of inventory | | | ļ . | - 6 | |
| Other revenue | | | | | | |
| Campaign Fee Reve | | 56100 | 5,524. | 41 | 5,524. | |
| DICEE DATTABLE | | 56100 | 78,199. | 41 | 78,199. | |
| · · · · · · · · · · · · · · · · · · · | | | | | | · · · · · · · · · · · · · · · · · · · |
| c | | | | | 1 | |
| c d | | | | | | |
| c d • | | | 02 722 | * | 02 722 | |
| c d | | | 83,723. | * | 83,723. | 167 4 |
| e Subtotal Add columns (b), (d Total. Add line 12, columns |), and (e) (b), (d), and (e) | | 83,723. | | 83,723. 13 | 167,4 |
| c d Subtotal Add columns (b), (d Total. Add line 12, columns e worksheet in line 13 instruction art XVI-B Relationship e | i), and (e) (b), (d), and (e) ns to verify calculation of Activities to the | s.) e Accomplis | hment of Exemp | t Purpos | es | 167,4 |
| Subtotal Add columns (b), (d Total. Add line 12, columns worksheet in line 13 instructio | i), and (e) (b), (d), and (e) | is.) e Accomplis come is reported | hment of Exemp | ot Purpos | ses | he |
| Subtotal Add columns (b), (d Total. Add line 12, columns worksheet in line 13 instruction rt XVI-B Relationship one No. Explain below how ear | i), and (e) (b), (d), and (e) | is.) e Accomplis come is reported | hment of Exemp | ot Purpos | ses | he |
| Subtotal Add columns (b), (d Total. Add line 12, columns worksheet in line 13 instruction rt XVI-B Relationship (de No. Explain below how ear | i), and (e) (b), (d), and (e) | is.) e Accomplis come is reported | hment of Exemp | ot Purpos | ses | he |
| Subtotal Add columns (b), (d Total. Add line 12, columns worksheet in line 13 instruction rt XVI-B Relationship one No. Explain below how ear | i), and (e) (b), (d), and (e) | is.) e Accomplis come is reported | hment of Exemp | ot Purpos | ses | he |
| Subtotal Add columns (b), (d Total. Add line 12, columns worksheet in line 13 instruction rt XVI-B Relationship one No. Explain below how ear | i), and (e) (b), (d), and (e) | is.) e Accomplis come is reported | hment of Exemp | ot Purpos | ses | he |
| Subtotal Add columns (b), (d Total. Add line 12, columns worksheet in line 13 instruction rt XVI-B Relationship (de No. Explain below how ear | i), and (e) (b), (d), and (e) | is.) e Accomplis come is reported | hment of Exemp | ot Purpos | ses | he |
| Subtotal Add columns (b), (d Total. Add line 12, columns worksheet in line 13 instruction rt XVI-B Relationship (de No. Explain below how ear | i), and (e) (b), (d), and (e) | is.) e Accomplis come is reported | hment of Exemp | ot Purpos | ses | he |
| Subtotal Add columns (b), (d Total. Add line 12, columns worksheet in line 13 instruction rt XVI-B Relationship (de No. Explain below how ear | i), and (e) (b), (d), and (e) | is.) e Accomplis come is reported | hment of Exemp | ot Purpos | ses | he |
| Subtotal Add columns (b), (d Total. Add line 12, columns worksheet in line 13 instruction rt XVI-B Relationship one No. Explain below how ear | i), and (e) (b), (d), and (e) | is.) e Accomplis come is reported | hment of Exemp | ot Purpos | ses | he |
| Subtotal Add columns (b), (d Total. Add line 12, columns worksheet in line 13 instruction rt XVI-B Relationship (de No. Explain below how ear | i), and (e) (b), (d), and (e) | is.) e Accomplis come is reported | hment of Exemp | ot Purpos | ses | he |
| Subtotal Add columns (b), (d Total. Add line 12, columns worksheet in line 13 instruction rt XVI-B Relationship (de No. Explain below how ear | i), and (e) (b), (d), and (e) | is.) e Accomplis come is reported | hment of Exemp | ot Purpos | ses | he |
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| Subtotal Add columns (b), (d Total. Add line 12, columns worksheet in line 13 instruction rt XVI-B Relationship one No. Explain below how ear | i), and (e) (b), (d), and (e) | is.) e Accomplis come is reported | hment of Exemp | ot Purpos | ses | he |
| Subtotal Add columns (b), (d Total. Add line 12, columns worksheet in line 13 instruction rt XVI-B Relationship one No. Explain below how ear | i), and (e) (b), (d), and (e) | is.) e Accomplis come is reported | hment of Exemp | ot Purpos | ses | he |
| Subtotal Add columns (b), (d Total. Add line 12, columns worksheet in line 13 instruction rt XVI-B Relationship (de No. Explain below how ear | i), and (e) (b), (d), and (e) | is.) e Accomplis come is reported | hment of Exemp | ot Purpos | ses | he |
| Subtotal Add columns (b), (d Total. Add line 12, columns worksheet in line 13 instruction rt XVI-B Relationship (de No. Explain below how ear | i), and (e) (b), (d), and (e) | is.) e Accomplis come is reported | hment of Exemp | ot Purpos | ses | he |
| Subtotal Add columns (b), (d Total. Add line 12, columns worksheet in line 13 instruction rt XVI-B Relationship (de No. Explain below how ear | i), and (e) (b), (d), and (e) | is.) e Accomplis come is reported | hment of Exemp | ot Purpos | ses | he |
| Subtotal Add columns (b), (d Total. Add line 12, columns worksheet in line 13 instruction rt XVI-B Relationship one No. Explain below how ear | i), and (e) (b), (d), and (e) | is.) e Accomplis come is reported | hment of Exemp | ot Purpos | ses | he |
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| Subtotal Add columns (b), (d Total. Add line 12, columns worksheet in line 13 instruction rt XVI-B Relationship one No. Explain below how ear | i), and (e) (b), (d), and (e) | is.) e Accomplis come is reported | hment of Exemp | ot Purpos | ses | he |
| c d e Subtotal Add columns (b), (d Total. Add line 12, columns e worksheet in line 13 instruction art XVI-B Relationship one No. Explain below how ear | i), and (e) (b), (d), and (e) | is.) e Accomplis come is reported | hment of Exemp | ot Purpos | ses | he |

Form 990-PF (2016) Claude W. & Dolly Ahrens Foundation 39-1906775 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

| | | | | | | i i | | Yes | No |
|----------------------------|--|--|---|-----------------------------|---------------------------------------|--|----------------|------------------|---|
| describe | rganization directly or indir d in section 501(c) of the C o political organizations? | ectly engage in any o ode (other than section | f the following with an on 501(c)(3) organizati | y other org ons) or in s | anızation section 527, | | | 100 | |
| a Transfers | s from the reporting founda | tion to a noncharitabl | e exempt organization | of. | | | | | |
| | 1 | | | | | | 1 a (1) | | X |
| (2) Othe | er assets | | | | | · | 1 a (2) | | X |
| b Other tra | nsactions | | | | | | | | |
| (1) Sale | s of assets to a noncharital | ble exempt organizati | on | | | | 1 b (1) | | X |
| (2) Purc | hases of assets from a nor | ncharitable exempt or | ganization | | | | 1 b (2) | | X |
| | tal of facilities, equipment, o | | | | | , | 1 b (3) | | X |
| (4) Rein | nbursement arrangements | | | | | <i></i> | 1 b (4) | | X |
| (5) Loar | ns or loan guarantees | | • • • • • • • • • • • | | | <i></i> | 1 b (5) | | _X_ |
| (6) Perfe | ormance of services or mer | mbership or fundraisir | ng solicitations | | | | 1 b (6) | | <u>X</u> |
| c Sharing o | of facilities, equipment, mai | iling lists, other assets | s, or paid employees. | | | <i></i> | 1 c | | X |
| the good | swer to any of the above is s, other assets, or services action or sharing arrangen | given by the reporting | g foundation If the for (d) the value of the go | undation re ods, other | ceived less than t | fair market value i es received | n | ements | |
| (d) Ellie ille | (b) ranount involved | (0) Hame of Honoramaph | c exempt organization | (4) | cocription of transfer. | , dansactions, and si | aring arrain | gernents | <u>, </u> |
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| described b If 'Yes,' o | undation directly or indirectly of indirectly in section 501(c) of the Complete the following sche | ode (other than section | lated to, one or more ton 501(c)(3)) or in sec | ax-exempt tion 527? | organizations | | . XYes | | No |
| (a) | Name of organization | (b) | Type of organization | | (c) D | escription of relati | onship | | |
| <u>Ahrens Pa</u> | ark Foundation | Private | Operating Found | lation G | rantee, Son | <u>ne Shared B</u> | oard M | <u>lembe</u> | ers |
| | | | | | | ····- | | | |
| | | <u> </u> | | | | | | | |
| | ****** | | | | | | | | |
| Under p correct, | enalties of perjury, I declare that I had and complete Declaration of prepar | ave examined this return, increir (other than taxpayer) is b | cluding accompanying schedulased on all information of wh | | | of my knowledge and be | May the I | RS discu | , 1 |
| l | ture of afficer or trustee | .,,,,, | Date | Title | | | (see instr | uctions)? Yes | No |
| Paid | Print/Type preparer's name Non_Paid Preparer | 1 ' | arer's signature | | Date | Check If self-employed | PTIN | | |
| Ргерагег | Firm's name | | | | Firm | n's EIN | | | |
| Use Only | Firm's address | | <u> </u> | _ | | | ·- | | |
| BAA | <u> </u> | · <u> </u> | | _ | - LPn | one no | ≒. Form 990 | | 2016) |
| w/ 1/7 | | | | | | | 1.01111 221 | J-FF (2 | 2010) |

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

OMB No 1545-0047

2016

Employer identification number

| Claude W. & Dolly Ahrens Found | dation | 39-1906775 |
|---|---|--|
| Organization type (check one): | | |
| Filers of: | Section: | |
| Form 990 or 990-EZ | 501(c)() (enter number) organiza | tion |
| | 4947(a)(1) nonexempt charitable trust no | ot treated as a private foundation |
| | 527 political organization | |
| Form 990-PF | X 501(c)(3) exempt private foundation | |
| | 4947(a)(1) nonexempt charitable trust tre | eated as a private foundation |
| | 501(c)(3) taxable private foundation | · |
| Check if your organization is covered by the Gene | eral Rule or a Special Rule. | |
| Note. Only a section 501(c)(7), (8), or (10) organiz | zation can check boxes for both the General F | Rule and a Special Rule See instructions |
| General Rule X For an organization filing Form 990, 990-EZ, or property) from any one contributor. Complete | or 990-PF that received, during the year, contr Parts I and II. See instructions for determining | ibutions totaling \$5,000 or more (in money or a contributor's total contributions |
| Special Rules | | |
| For an organization described in section 501(d) under sections 509(a)(1) and 170(b)(1)(A)(vi), received from any one contributor, during the Form 990, Part VIII, line 1h, or (ii) Form 990-E | that checked Schedule A (Form 990 or 990-Eyear, total contributions of the greater of (1) \$ | Z), Part II, line 13, 16a, or 16b, and that |
| For an organization described in section 501(organization during the year, total contributions of more that purposes, or for the prevention of cruelty to ch | c)(7), (8), or (10) filing Form 990 or 990-EZ than \$1,000 <i>exclusively</i> for religious, charitable, hildren or animals. Complete Parts I, II, and III | scientific, literary, or educational |
| For an organization described in section 501(during the year, contributions exclusively for respectively. If this box is checked, enter here the translation charitable, etc., purpose Don't complete any it received nonexclusively religious, charitable. | eligious, charitable, etc., purposes, but no suc total contributions that were received during th of the parts unless the General Rule applies t | h contributions totaled more than e year for an exclusively religious, o this organization because |
| Caution. An organization that isn't covered by the 990-PF), but it must answer 'No' on Part IV, line 2 Part I, line 2, to certify that it doesn't meet the filin | 2, of its Form 990; or check the box on line H of | of its Form 990-EZ or on its Form 990-PF. |

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

| | B (Form 990, 990-EZ, or 990-PF) (2016) | Page | 1 of 1 of Part I |
|---------------|---|-------------------------------|--|
| Name of org | | | r identification number |
| | W. & Dolly Ahrens Foundation | | 906775 |
| Part I | Contributors (see instructions). Use duplicate copies of Part I if additional space | is needed | |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | David & Diana Clay | | Person X Payroll |
| | 11029 East Cinder Coneail | \$ <u>_10.855</u> . | Noncash |
| | ScottsdaleAZ_85262 | | (Complete Part II for noncash contributions.) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Oncash Complete Part II for noncash contributions.) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Complete Part II for noncash contributions) |
| BAA | TEEA0702 08/09/16 | Schedule B (Form 9 | 90, 990-EZ, or 990-PF) (2016) |

Form 990-PF, Page 1, Part I, Line 11 Line 11 Stmt

| Other income: | Rev/Exp Book | Net Inv Inc | Adj Net Inc |
|---------------------|--------------|--------------|-------------|
| Campaign Fee Revnue | 5,524. | | 0. |
| CSS Revenue | 78,199. | | 0. |
| Total | 83,723. | | 0. |

Form 990-PF, Page 1, Part I, Line 23 Line 23 Stmt

| Other expenses: | Rev/Exp Book | Net Inv Inc | Adj Net Inc | Charity Disb |
|--------------------------|--------------|-------------|-------------|--------------|
| Bank/Online Charges | 776. | | | 776. |
| Dues & Subscriptions | 8,287. | | | 8,287. |
| Equipment Rent | 35,220. | | | 35,220. |
| Insurance Expense | 10,971. | | | 10,971. |
| Program Expenses | 5,129. | | | 5,129. |
| Licenses & Permits | 54. | | | 54. |
| Marketing | 13,801. | | | 13,801. |
| Meals | 244. | | | 244. |
| Minor Equipment | 3,097. | | | 3,097. |
| Miscellaneous Expense | 2,566. | | | 2,566. |
| Office Supplies | 4,096. | | | 4,096. |
| On-Site Meeting Expenses | 3,119. | | | 3,119. |
| Press Releases | 3,000. | | | 3,000. |
| Professional Development | 730. | | | 730. |
| Special Gifts | 340. | | | 340. |
| Sponsorships | 11,250. | | | 11,250. |
| Finance Charge | 113. | | | 113. |
| Software Costs | 29,434. | | | 29,434. |
| Postage | 383. | | | 383. |

Total 132,610. 132,610.

Form 990-PF, Page 6, Part VIII, Line 1 Information about Officers, Directors, Trustees, Etc.

| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|--|---|---|---|---------------------------------------|
| Person X Business. Julie Gosselink | | | | |
| PO Box 284 | President & CEO | | | |
| Grinnell IA 50112 Person. X Business . | _50.00 | 150,220. | 3,993. | 0. |
| Shannon Fitzgerald | | | | |
| PO Box 284 | Treasurer, Secretary, & CFO | | | |
| Grinnell IA 50112 | 50.00 | 128,705. | 3,417. | 0. |

Form 990-PF, Page 6, Part VIII, Line 1 Information about Officers, Directors, Trustees, Etc. Continued

| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|-------------------------|---|---|---|--|
|-------------------------|---|---|---|--|

Total

278,925.

7,410.

0.

Form 990-PF, Page 1, Part I Line 16a - Legal Fees

| Name of Provider | Type of Service Provided | Amount Paid Per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|---------------------|-----------------------------|-----------------------------|-----------------------------|---------------------------|---|
| Nymaster Goode P.C. | Advisory | 563. | | | 563. |

Total

563.

563.

Form 990-PF, Page 2, Part II, Line 10b L-10b Stmt

| End o | End of Year | | |
|---------------|--|--|--|
| Book Value | Fair Market Value | | |
| 1,725,020. | 3,637,384. | | |
| 2,444,252. | 2,727,490. | | |
| 2,121,416. | 3,797,889. | | |
| 2,252,702. | 3,180,933. | | |
| 982. | 982. | | |
| | Book Value 1,725,020. 2,444,252. 2,121,416. 2,252,702. | | |

Total

8,544,372. 13,344,678.

Form 990-PF, Page 2, Part II, Line 13 L-13 Stmt

| | End of | End of Year | | |
|--------------------------------|---------------|----------------------|--|--|
| Line 13 - Investments - Other: | Book Value | Fair Market Value | | |
| Strand Theater | 100,000. | 100,000. | | |
| Mayflower Investment | 50,000. | 50,000. | | |

Total

150,000.

150,000.

Form 990-PF, Page 2, Part II, Line 15 Other Assets Stmt

| | Beginning | End of | Year |
|-------------------------|--------------------|---------------|----------------------|
| Line 15 - Other Assets: | Year Book Value | Book Value | Fair Market Value |
| PSF Balances | 4,752. | 5,646. | 5,646. |
| Total | 4,752. | 5,646. | 5,646. |