efile GRAPHIC print - DO NOT PROCESS As Filed Data -

DLN: 93491051003038

2017

OMB No 1545-0052

Return of Private Foundation

Department of the Treasury Internal Revenue Service

Form 990-PF

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 www.irs.gov/form990pf.

Open to Public

							Inspection
For	caler	ndar year 2017, or tax year beginning 01-01-20)17 , ar	nd end	ing 12-31-	2017	
		indation INDATION FOR AGRICULTURAL			A Employer id	entification numbe	r
	VANCE		_		42-1183067		
		l street (or P O box number if mail is not delivered to street address) 134TH AVE	Room/suite			mber (see instructior	ns)
City	or town	, state or province, country, and ZIP or foreign postal code			(515) 290-6999	1	
		50244			C If exemption	application is pending	g, check here
G Cł	neck al	l that apply \qed Initial return \qed Initial return of a	former public charity		D 1. Foreign or	ganızatıons, check he	re 📘 🗍
		Final return Amended return				ganizations meeting k here and attach coi	
		Address change Name change			•		· -
		pe of organization Section 501(c)(3) exempt private				ındatıon status was t n 507(b)(1)(A), chec	
			e private foundation				
of '		rom Part II, col (c),	Cash Accrube on cash basis	ıal		ition is in a 60-month n 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and				(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)	expenses per books	(b) Ne	et investment income	(c) Adjusted net income	for charitable purposes
	1	Contributions, gifts, grants, etc , received (attach	166,800	ı			(cash basis only)
	2	schedule) Check if the foundation is not required to attach					
		Sch B					
	3	Interest on savings and temporary cash investments Dividends and interest from securities	261		261	261	
	4 5a	Gross rents					
	b	Net rental income or (loss)					
e	6a	Net gain or (loss) from sale of assets not on line 10					
Revenue	b	Gross sales price for all assets on line 6a					
Re	7	Capital gain net income (from Part IV, line 2)					
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances 355,430					
	b	Less Cost of goods sold 249,450	J				
	С	Gross profit or (loss) (attach schedule)	105,980			105,980	
	11	Other income (attach schedule)	66,309			58,269	
	12	Total. Add lines 1 through 11	339,350		261	164,510	
	13	Compensation of officers, directors, trustees, etc Other employee salaries and wages	16,867			16,867	
۰.۸	14 15	Other employee salaries and wages					
Se	16a	Legal fees (attach schedule)	400			400	
<u>B</u>	ь	Accounting fees (attach schedule)	4,884		1,000	3,884	
Ě	c	Other professional fees (attach schedule)	_				
and Administrative Expenses	17	Interest					
tra	18	Taxes (attach schedule) (see instructions)					
E .	19	Depreciation (attach schedule) and depletion					
≣	20	Occupancy					
δ	21	Travel, conferences, and meetings	3,797	'		3,797	
an	22	Printing and publications	1,914			1,914	
Шğ	23	Other expenses (attach schedule)	78,221			78,221	
Operating	24	Total operating and administrative expenses.					
<u>ಹ</u>	35	Add lines 13 through 23	106,083	<u> </u>	1,000	105,083	106 900
_	25	Contributions, gifts, grants paid	196,800	1			196,800
	26	Total expenses and disbursements. Add lines 24 and 25	302,883		1,000	105,083	196,800
	27	Subtract line 26 from line 12	36.467				
	а	Excess of revenue over expenses and disbursements	36,467				
	ь	Net investment income (If negative, enter -0-)			0		
	С	Adjusted net income(If negative, enter -0-)				59,427	
							

ře	Lt 111	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	29,687	30,477	
	2	Savings and temporary cash investments	140,357	187,076	
.5	3	Accounts receivable ►			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less allowance for doubtful accounts ▶			
	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U S and state government obligations (attach schedule)			
	ь	Investments—corporate stock (attach schedule)	153,365	156,044	
	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)			
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	323,409	373,597	0
	17	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ıab	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe)			
	23	Total liabilities(add lines 17 through 22)		0	
Balances		Foundations that follow SFAS 117, check here ▶ □ and complete lines 24 through 26 and lines 30 and 31.			
anc	24	Unrestricted			
3a k	25	Temporarily restricted			
Fund E	26	Permanently restricted			
or Fu		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			

323,409

323,409

373,597

373,597

373,597

1

2

3

4

5

6

323,409

36,467

13,721

373,597

373,597 Form **990-PF** (2017)

Net Assets

2

3

4

27 28

29

30

31 Part III Capital stock, trust principal, or current funds

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Analysis of Changes in Net Assets or Fund Balances

7 Add lines 5 and 6

instructions

6 Enter 1% of net investment income (1% of Part I, line 27b) . . .

1a	2-story brick warel	(a) ne kınd(s) of property sold (e g , re house, or common stock, 200 shs	al estate, MLC Co)	(b) How acquir P—Purchas D—Donatio	se	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
La							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale		Gain o	h) r (loss)) mınus (g)
a							
b							
d e							
-	Complete only for assets	I showing gain in column (h) and ow	ned by the foundation	on 12/31/69		,	I)
		(j)	<u> </u>	(k)		Gains (Col (h) gain minus
	(i) Adjusted basis F M V as of 12/31/69 as of 12/31/69		Excess	of col (ı) l (j), ıf any		col (k), but not less than -0-) or Losses (from col (h))	
a							
b							
С							
d							
е							
2	Capital gain net income o	or (net capital loss)	If gain, also enter in F If (loss), enter -0- in I		}	2	
3	Net short-term capital ga	ain or (loss) as defined in sections 1	1222(5) and (6)				
	If gain, also enter in Part	t I, line 8, column (c) (see instruction	ons) If (loss), enter -0)-	- 1		
	ın Part I, line 8				- }	3	
Pari	AV Qualification III	nder Section 4940(e) for Re	duced Tay on Not	Investmen	t Ind	como	
		ivate foundations subject to the sec					
רטו טן	odonal use by domestic pri	ivate foundations subject to the sec	.tion 4940(a) tax on ne	et investment i	ricom	e)	
f sect	ion 4940(d)(2) applies, lea	ave this part blank					
		section 4942 tax on the distributal qualify under section 4940(e) Do			eriod?	·	es 🗹 No
		ount in each column for each year,			ntries	5	
	(a) se period years Calendar (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	ole-use assets		(d) Distribution rat (col (b) divided by c	
,	2016	216,000		414,903		(30. (2) airiada by c	0 52060
	2015	213,150		369,878			0 57627
	2014	210,950		365,851			0 57660
	2013	173,700		349,347			0 49721
	2012	257,547		305,320			0 84353
2	Total of line 1, column (d))			2		3 014220
		for the 5-year base period—divide t		, or by the	2		0.603944
		dation has been in existence if less t charitable-use assets for 2017 from		+	<u>3</u>		<u>0 602844</u> 386,994
-	Lincer the het value of hon	Charitable-use assets for 2017 [[Off	iraica, iiie 3		-		300,334

196,800 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 Form **990-PF** (2017)

233,297

233,297

5

6 7

8

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?.

Form 990-PF (2017)				Page 7
Part VIIII Information About Contractors	Officers, Directors, Trust	tees, Foundation Ma	nnagers, Highly Paid Er	nployees,
List all officers, directors, trustee	os foundation managors ar	ad their compensation	(coo instructions)	
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans and deferred	Expense account, (e) other allowances
See Additional Data Table	(b) devoted to position	,	compensation	
2 Compensation of five highest-pai	d employees (other than t	hose included on line		ne, enter "NONE."
(a) Name and address of each employee pa more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
NONE			(u) compensation	
Total number of other employees paid ove	er \$50,000			
3 Five highest-paid independent co (a) Name and address of each person			ons). If none, enter "NON be of service	E". (c) Compensation
VONE	r paid more than \$50,000	(0) 19	e of service	(c) compensation
		-		
		-		
[otal number of others receiving over \$50				
Part IX-A Summary of Direct C ust the foundation's four largest direct charitable		ude relevant statistical inform	nation such as the number of	
organizations and other beneficiaries served, conf 1 SCHOLARSHIPS AND GRANTS (WHICH	ferences convened, research paper	s produced, etc		Expenses 0
2	TOO NOT HAVE SIGNIFICANT	ONGOING INVOLVENEN	1)	
3				
4				
·				
Darley D. Communication of December 1	. Balatad Tarrataranta	(
Part IX-B Summary of Program Describe the two largest program-related inve	n-Related Investments estments made by the foundation d	· · · · · · · · · · · · · · · · · · ·	and 2	Amount
1				
2				
-				
All other program-related investments	See instructions			
3				
Fotal. Add lines 1 through 3 .				

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

1a

1b

2

3a 3h

4

5

196,800

196.800

196.800

Form 990-PF (2017)

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

income Enter 1% of Part I. line 27b (see instructions).

1

2

3

4

5

Page 9

19,350

19,350

Form 990-PF (2017)

Form 990-PF (20	017)
Part XIII	Undis

P	Part XIIII Undistributed Income (see instru			
L	Distributable amount for 2017 from Part XI, line 7			
2	Undistributed income, if any, as of the end of 2017			

1	Distributable amount for 2017 from Part XI, line 7
2	Undistributed income, if any, as of the end of 2017
а	Enter amount for 2016 only
b	Total for prior years 20

242.303 156,256 (a)

Corpus

981.195

177.450

1,158,645

242.303

916,342

156.256 192,671

194.710

195.255

177.450

(b)

Years prior to 2016

(c)

2016

- Excess distributions carryover, if any, to 2017 192,671 194.710
- From 2012. **b** From 2013. . . . c From 2014. . d From 2015. . . .

- e From 2016.
- f Total of lines 3a through e.
- 4 Qualifying distributions for 2017 from Part

d Applied to 2017 distributable amount. . . . e Remaining amount distributed out of corpus

5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2018.

10 Analysis of line 9

a Excess from 2013. . .

c Excess from 2015. . . .

d Excess from 2016. . .

e Excess from 2017. . .

b Excess from 2014. .

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018 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 2012 not

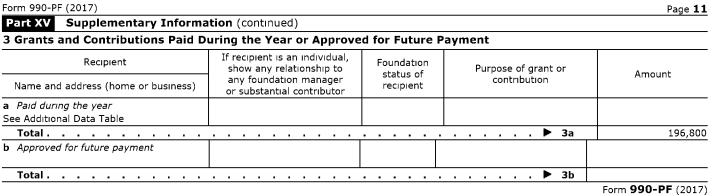
indicated below:

- 195,255 XII, line 4 🕨 \$
- a Applied to 2016, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions).

same amount must be shown in column (a))

c Treated as distributions out of corpus (Election required—see instructions).

P	Part XIV Private Operating Found	dations (see instr	uctions and Part '	VII-A, question 9)		
.a	If the foundation has received a ruling or defoundation, and the ruling is effective for 20			erating		
b	Check box to indicate whether the organizat	tion is a private oper	atıng foundatıon de	scribed in section $ \Box $	$\boxed{4942({ t j})(3)}$ or $\boxed{}$] 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Iotai
	year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
a	line 4 for each year listed			+		
u	directly for active conduct of exempt activities					
e	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
:	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c	"Support" alternative test—enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in					
	section 4942(j)(3)(B)(III) (3) Largest amount of support					
	from an exempt organization					
	(4) Gross investment income Supplementary Information	/Campulata thia			d #E 000 au man	_ :
Pa	assets at any time during th			organization na	u \$5,000 or mor	e III
	Information Regarding Foundation Man	nagers:				
а	List any managers of the foundation who ha					n
h	before the close of any tax year (but only if List any managers of the foundation who ow	r tney nave contribut yn 10% or more of th	red more than \$5,00 ne stock of a corpora	oution (See section 507 Section (or an equally l	r(d)(Z)) arge portion of the	
_	ownership of a partnership or other entity)	of which the foundat	tion has a 10% or g	reater interest	ange portion of the	
	Information Regarding Contribution, Gr	rant, Gift, Loan, Sc	holarship, etc., Pr	ograms:		
	Check here ▶ ☐ If the foundation only mal	kes contributions to	procelected charitab	de organizations and	does not assent	
	unsolicited requests for funds. If the foundation other conditions, complete items 2a, b, c, a	ation makes gifts, gr				nder
a	The name, address, and telephone number	or e-mail address of	the person to whor	n applications should	l be addressed	
	WINNER'S CIRCLE SCHOLARSHIP 30805 595TH AVE CAMBRIDGE, IA 50046					
_	(515) 383-4386					
b	The form in which applications should be su APPLICATION FORM AVAILABLE FROM DR			they should include		
С	Any submission deadlines JUNE 1					
d	Any restrictions or limitations on awards, su factors	uch as by geographic	cal areas, charitable	fields, kinds of instit	utions, or other	
	AWARDED TO RECIPIENTS WHO ARE PURSI		STUDY RELATED TO	THE ANIMAL INDUS	STRY AT ANY TWO YE	EAR OR FOUR YEAR



Enter gross amounts unless otherwise indicated		Unrelated bu	siness income	Excluded by section	(e)	
		(a)	(b)	(c)	(d)	Related or exempt function income (See instructions
-	n service revenue	Business code	Amount	Exclusion code	Amount	(See Instructions
	and contracts from government agencies					
Membe	rship dues and assessments					
	est on savings and temporary cash			14	261	
	nds and interest from securities.				201	
	ntal income or (loss) from real estate					
	financed property					
	ebt-financed property ental income or (loss) from personal property					
	nvestment income					
	or (loss) from sales of assets other than					
	tory					
	ome or (loss) from special events profit or (loss) from sales of inventory			1	33,876	105,98
	revenue					103,50
a _{MEMB}	ERSHIP DUES					7,55
	REVENUE					49
c						
d						
d e					34,137	114,02
d e Subtot Total.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)			13	34,137	114,020 148,157
d e Subtot Total. (See w	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul	ations)				
d e Subtot Total. (See w	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul I-B Relationship of Activities to th	ations) e Accomplishi	ment of Exem	pt Purposes		148,157
d e Subtot Total. (See w	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ations) e Accomplishi income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	148,157
d e Subtot Total. (See w art XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul EB Relationship of Activities to th Explain below how each activity for which	ations) e Accomplishi income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	148,157
d e Subtot Total. (See w art XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's exinstructions)	ations) e Accomplishi income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	148,157
d e Subtot Total. (See w art XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's exinstructions)	ations) e Accomplishi income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	148,15
d e Subtot Total. (See w art XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's exinstructions)	ations) e Accomplishi income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	148,15
d e Subtot Total. (See w Irt XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's exinstructions)	ations) e Accomplishi income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	148,15
d e Subtot Total. (See w Irt XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's exinstructions)	ations) e Accomplishi income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	148,15
d e Subtot Total. (See w Irt XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's exinstructions)	ations) e Accomplishi income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	148,15
d e Subtot Total. (See w art XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's exinstructions)	ations) e Accomplishi income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	148,15
d e Subtot Total. (See w Irt XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's exinstructions)	ations) e Accomplishi income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	148,15
d e Subtot Total. (See w Irt XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's exinstructions)	ations) e Accomplishi income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	148,15
d e Subtot Total. (See w art XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's exinstructions)	ations) e Accomplishi income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	148,15
d e Subtot Total. (See w art XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's exinstructions)	ations) e Accomplishi income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	148,15
d e Subtot Total. (See w art XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's exinstructions)	ations) e Accomplishi income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	148,15
d e Subtot Total. (See w art XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's exinstructions)	ations) e Accomplishi income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	148,15
d e Subtot Total. (See w art XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's exinstructions)	ations) e Accomplishi income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	148,15
d e Subtot Total. (See w art XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's exinstructions)	ations) e Accomplishi income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	148,15
d e Subtot Total. (See w art XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's exinstructions)	ations) e Accomplishi income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	148,15
d e Subtot Total. (See w art XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's exinstructions)	ations) e Accomplishi income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	148,157
d e Subtot Total. (See w art XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's exinstructions)	ations) e Accomplishi income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	148,157

orm 99	0-PF (2	2017)							Pa	ge 13
Part	XVII	Information Reg		ansfers To a	nd Transactio	ns and Relat	ionships With Nonchar	itable		
		ianization directly or ind Code (other than section					ition described in section 501 al organizations?		Yes	No
a Tran	nsfers f	rom the reporting found	lation to a no	ncharitable exe	mpt organization	of				
(1)	Cash.							1a(1)		No
(2)	Other	assets						1a(2)		No
		sactions								
		of assets to a noncharit	•	-				1b(1)		No
		ases of assets from a no						1b(2)	+	No
		l of facilities, equipment	•					1b(3)		No No
		oursement arrangements or loan guarantees.						1b(4) 1b(5)		No
٠.		nance of services or me						1b(6)		No
٠,		facilities, equipment, m	•	-				1c		No
of th	ne good ny tran	ls, other assets, or serv	ices given by igement, show	the reporting f	oundation If the) the value of the	foundation rece goods, other as	always show the fair market ived less than fair market val isets, or services received of transfers, transactions, and sh	ue	ingemer	nts
desc	cribed i	dation directly or indirect in section 501(c) of the complete the following scheme of organization	Code (other t hedule	han section 50		tion 527?		Yes	V	No
Sign	of my which		ıt ıs true, cor				nying schedules and stateme er than taxpayer) is based o May retu	the IRS di	rmatio	n of
Here	 ▶ −	ignature of officer or tru	ustee		Date	Title	with belo	the prepa	_	
Paid Pren:	arer	Print/Type preparer's in JEFFREY F STRAWHACKER CPA	4	Preparer's Sign		Date	Check if self- employed ▶ □	P00034	4782	
cp	ui Ci	IFirm's name Timm	ins lacohsen	& Strawhacker	I I P		1			

Firm's EIN ▶42-0721983 Use Only Firm's address ► 10550 New York Ave Suite 200 Phone no (515) 270-8080 Des Moines, IA 503223775

Form **990-PF** (2017)

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation JACK BAIR 0 Director 2 00 4462 NE 150TH AVE ELKHART, IA 50073 STEVE WELDON 0 Treasurer 4 00 1440 NW 134TH AVE SLATER, IA 50244 **ROB BOHNSACK** 0 Director 2 00 2063 VERMONT AVE WILTON, IA 52778 ISAIAH SPATH 0 Director 2 00 1120 110TH STREET HAMPTON, IA 50441 HAROLD HODSON 0 Director 2 00 3207 NE RENAISSANCE DR ANKENY, IA 50021 PAUL FLINT 0 President 4 00 632 230TH ST ALEXANDER, IA 50420 LINDA WELDON 16,867 Secretary 20 00 1440 NW 134TH AVE SLATER, IA 50244 GARY VANAERNAM ۵ Director 1 00 2810 280TH STREET EXIRA, IA 50076 MARK KAHLER 0 Director 2 00 502 4TH ST CAMBRIDGE, IA 50046 TIM MESSENGER Vice President 0 2 00 3190 240TH ST AINSWORTH, IA 52201 TAYLOR SCHMINKE 0 Director 2 00 6641 24TH AVE VAN HORNE, IA 52346 ANDREW LAUVER Director 0 2 00 2061 310TH STREET ROCKWELL CITY, IA 50579 MIKE DORAN Director 0 2 00 3116 EVERGREEN ROAD AMES, IA 50014

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year **EDAN LAMBERTORANGE CITY** NONE N/A **SCHOLARSHIP** 10,000 ORANGE CITY, IA 51041 LIANINIALI DA CELCUMNIED NONE BI/A CCHOLARCHER C 250

SUMNER, IA 50674	NONE	IN/A	SCHOLARSHIP	6,250
IZAK CHRISTENSENRICEVILLE RICEVILLE, IA 50466	NONE	N/A	SCHOLARSHIP	6,250
LEXI DELANEYDEWITT DEWITT, IA 52742	NONE	N/A	SCHOLARSHIP	6,000
ALLISON BASTIANNEW ULM	NONE	N/A	SCHOLARSHIP	5,000

NEW ULM, MN 56073

Total . 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year KENNEDY COREPLEASANTVILLE NONE N/A **SCHOLARSHIP** 5,000 PLEASANTVILLE, IA 50025 N/A 5 000 DILEY STEPENWASHINGTON NONE SCHOLARSHID

WASHINGTON, IA 52353	THORE .	1477	SOTO BAROTIA	3,000
KOLTON GREINERKEOTA KEOTA, IA 52248	NONE	N/A	SCHOLARSHIP	5,000
PEYTON SCHMITTNICHOLS NICHOLS, IA 52766	NONE	N/A	SCHOLARSHIP	3,000

N/A

SCHOLARSHIP

3,000

196,800

NONE

JESSICA BIGELOWURBANDALE

URBANDALE, IA 50322

Total.

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year WESLEY REEVERGLIDDEN NONE N/A **SCHOLARSHIP** 3,000 GLIDDEN, IA 51443 3,000 CODY LONGCRESTON NONE N/A **SCHOLARSHIP**

N/A	SCHOLARSHIP	3,000
N/A	SCHOLARSHIP	3,000
	N/A	N/A SCHOLARSHIP

MACY EVANSCRESTON CRESTON, IA 50801	NONE	N/A	SCHOLARSHIP	3,000
ERIN CHALUPAKEOTA KEOTA, IA 52248	NONE	N/A	SCHOLARSHIP	2,500

MACY EVANSCRESTON CRESTON, IA 50801	NONE	N/A	SCHOLARSHIP	3,1
ERIN CHALUPAKEOTA	NONE	N/A	SCHOLARSHIP	2,!

CRESTON, IA 50801				
ERIN CHALUPAKEOTA KEOTA, IA 52248	NONE	N/A	SCHOLARSHIP	2,50

ERIN CHALUPAKEOTA NONE N/A SCHOLARSHIP SCHOLARSHIP	2,5

KEOTA, IA 52248	110112	1477	2,333
Total			 196,800

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment					
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)		<u> </u>			
a Paid during the year					
KELSEY PRETZCOLUMBUS JUNCTION COLUMBUS JUNCTION, IA 52738	NONE	N/A	SCHOLARSHIP	2,000	
EMILY COOKHUBBARD HUBBARD, IA 50122	NONE	N/A	SCHOLARSHIP	2,000	
ELIZABETH MOOREWHAT CHEER WHAT CHEER, IA 50268	NONE	N/A	SCHOLARSHIP	2,000	
OLIVIA WATTONVILLEHUXLEY HUXLEY, IA 50124	NONE	N/A	SCHOLARSHIP	2,000	

•				
ELIZABETH MOOREWHAT CHEER WHAT CHEER, IA 50268	NONE	N/A	SCHOLARSHIP	2,000
OLIVIA WATTONVILLEHUXLEY HUXLEY, IA 50124	NONE	N/A	SCHOLARSHIP	2,000
LABAME DOVERNICOLLIMBUG TUNICTION	NONE	N1 / A	CCUOL ADCUED	2.00

OLIVIA WATTONVILLEHUXLEY HUXLEY, IA 50124	NONE	N/A	SCHOLARSHIP	2,00
LARAME BOYSENCOLUMBUS JUNCTION	NONE	N/A	SCHOLARSHIP	2,00

HUXLEY, IA 50124				
LARAME BOYSENCOLUMBUS JUNCTION COLUMBUS JUNCTION, IA 52738	NONE	N/A	SCHOLARSHIP	

ı	HUXLET, IA 30124				
1	LARAME BOYSENCOLUMBUS JUNCTION COLUMBUS JUNCTION, IA 52738	NONE	N/A	SCHOLARSHIP	2

196,800 За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year JILL BERKLANDSIBLEY NONE N/A **SCHOLARSHIP** 2,000 SIBLEY, IA 51249 KASSI RICEPARKERSBURG NONE N/A SCHOLARSHIP 2,000

PARKERSBURG, IA 50665		·		·
MADISON FITZGERALDLIME SPRINGS LIME SPRINGS, IA 52155	NONE	N/A	SCHOLARSHIP	2,000
JACOB STERLEROLAND ROLAND, IA 50236	NONE	N/A	SCHOLARSHIP	2,000
SPENSER BECKERKEOTA KEOTA, IA 52248	NONE	N/A	SCHOLARSHIP	1,500

Total.

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ZACH BOBBWEVER NONE N/A **SCHOLARSHIP** 1,500 WEVER, IA 52658 NONE N/A **SCHOLARSHIP** 1,500 TYLER TRIGGSMOUNT AYR MOUNT AVE TA 50854

MOONT ATK, IA 30834				
HALLE JO JOHNSONLELAND LELAND, IA 50453	NONE	N/A	SCHOLARSHIP	1,500
LILIAN SWANSONGALT GALT, IA 50101	NONE	N/A	SCHOLARSHIP	1,500
OLIVIA BISBEESTACYVILLE	NONE	N/A	SCHOLARSHIP	1,000

196,800 Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year COLE SPAINCASTALIA NONE N/A **SCHOLARSHIP** 1,000 CASTALIA, IA 52133 CONNER HEMESATHOSSIAN NONE N/A **SCHOLARSHIP** 1,000 OSSIAN, IA 52161

AMANDA ANDERSONALGONA ALGONA, IA 50511	NONE	N/A	SCHOLARSHIP	1,000
ROBERT JACK CARTERWASHINGTON WASHINGTON, IA 52353	NONE	N/A	SCHOLARSHIP	1,500
BLAIR BENNISDELMAR	NONE	N/A	SCHOLARSHIP	1,500

ROBERT JACK CARTERWASHINGTON WASHINGTON, IA 52353	NONE	N/A	SCHOLARSHIP	1,50
BLAIR BENNISDELMAR DELMAR, IA 52037	NONE	N/A	SCHOLARSHIP	1,50

WASHINGTON, IA 52353		1.4/1.		-
BLAIR BENNISDELMAR DELMAR, IA 52037	NONE	N/A	SCHOLARSHIP	1

BLAIR BENNISDELMAR DELMAR, IA 52037	NONE	N/A	SCHOLARSHIP	1,50
Total				196,800

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ALISON BUELTELESTHERVILLE NONE N/A **SCHOLARSHIP** 1,000 ESTHERVILLE, IA 51334

AUBREE BENKENBUCKINGHAM BUCKINGHAM, IA 50612	NONE	N/A	SCHOLARSHIP	1,000
KENDALL DAVISMOULTON MOULTON, IA 52572	NONE	N/A	SCHOLARSHIP	1,000
CLAYTON POOTSHUXLEY HUXLEY, IA 50124	NONE	N/A	SCHOLARSHIP	1,000
JAKE HLASTRAER	NONE	N/A	SCHOLARSHIP	1,000

TRAER, IA 50675 Total.

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ERICA BAIERADEL NONE N/A **SCHOLARSHIP** 1,000 ADEL, IA 50003 KOURTNEY GRIMMAUDUBON NONE N/A SCHOLARSHIP 1,000 AUDUBON, IA 50025 NONE l n/a SCHOLARSHIP 1.000 CAROLYN TRUMMCASCADE

CASCADE, IA 52033	None	1477	SOTTOE WOTTE	1,000
DANNIELLE MCCORKELADAIR ADAIR, IA 50002	NONE	N/A	SCHOLARSHIP	1,000
EMILY CAMPBELLHAMLIN HAMLIN, IA 50117	NONE	N/A	SCHOLARSHIP	1,000

Total.

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year LEONARD SAWYER PHILLIPSKNOXVILLE NONE N/A **SCHOLARSHIP** 1,000 KNOXVILLE, IA 50138 **BROOKE SIERENKEOTA** NONE N/A SCHOLARSHIP 1,000 KEOTA, IA 52248

LANDON FOSTERGUTHRIE CENTER GUTHRIE CENTER, IA 50115	NONE	N/A	SCHOLARSHIP	1,000
SIERRA MILLERBOXHOLM BOXHOLM, IA 50040	NONE	N/A	SCHOLARSHIP	1,000
MARY VON RENTZELLEARLHAM	NONE	N/A	SCHOLARSHIP	1.000

11/ /~

EARLHAM, IA 50072

196,800 Total . За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ANTONIA WALLINNEW MARKET NONE N/A **SCHOLARSHIP** 500 NEW MARKET, IA 51646 KALE BOYSENMORNING SUN NONE N/A SCHOLARSHIP 500 MORNING SUN. IA 52640

KIMBERLY DORNBIERGARNER GARNER, IA 50438	NONE	N/A	SCHOLARSHIP	500
MCKENZIE FECKERSSHELL ROCK SHELL ROCK, IA 50670	NONE	N/A	SCHOLARSHIP	500
WYATT WESTFALLLONE TREE LONE TREE, IA 52755	NONE	N/A	SCHOLARSHIP	500

Total . 3a 196,800

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year LEVI COLLINSKNOXVILLE NONE N/A **SCHOLARSHIP** 500 KNOXVILLE, IA 50138 BENJAMIN KELLYDALLAS CENTER NONE N/A **SCHOLARSHIP** 500 DALLAS CENTER, IA 50063 l n/a SCHOLARSHIP MARIA GEISLERCEDAR FALLS NONE 2,000 00 nn

CEDAR FALLS, IA 50613				_,
JACOB BOMBEIDELTA DELTA, IA 52550	NONE	N/A	SCHOLARSHIP	1,000
DAYTON BRUGMANPETERSON	NONE	N/A	SCHOLARSHIP	1,000

PETERSON, IA 51047

Total. 196,800

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year AMANDA BRYANCOUNCIL BLUFFS NONE N/A **SCHOLARSHIP** 1,000 COUNCIL BLUFFS, IA 51503 KATELYN COLLINSADEL NONE N/A **SCHOLARSHIP** 1,000

ADEL, IA 50003				
ANDREW DORNBIERGARNER GARNER, IA 50438	NONE	N/A	SCHOLARSHIP	1,000
CHANDLER JAHNERHARVEY HARVEY, IA 50119	NONE	N/A	SCHOLARSHIP	1,000
MACY JANGGENGHELL BOOK	NONE	NI/A	SCHOLARCHID	1 000

NONE N/A SCHOLARSHIP

1,000

MACY JANSSENSHELL ROCK SHELL ROCK, IA 50670

196,800 Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year WIL MAREKRIVERSIDE NONE N/A SCHOLARSHIP 1,000 RIVERSIDE, IA 52327 MEGAN NEMECFAIRFAX NONE N/A **SCHOLARSHIP** 1,000 FAIRFAX, IA 52228 EMMA OLSONGRAND MOUND NONE N/A SCHOLARSHIP 1,000 GRAND MOUND, IA 52751 **BRYCE ROBISONWINFIELD** NONE N/A SCHOLARSHIP 1,000 WINFIELD, IA 52659 1,000 PAYTON SASHLAPORTE CITY NONE N/A **SCHOLARSHIP**

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year TYLER SAUNDERSMANILLA NONE N/A **SCHOLARSHIP** 1,000 MANILLA, IA 51454 NONE N/A **SCHOLARSHIP** 1,000 RACHEL SCHMITTHAWKEYE HAWKEYE, IA 52147 oo 00

ALYSSA SCHOLZMUSCATINE MUSCATINE, IA 52761	NONE	N/A	SCHOLARSHIP	1,000
ELIZABETH SMITHDECORAH DECORAH, IA 52101	NONE	N/A	SCHOLARSHIP	1,000
JAY STOWATERALGONA	NONE	N/A	SCHOLARSHIP	1,000

ALGONA, IA 50511

Total .

196,800 За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year REBECCA STROTHMANNEW LONDON NONE N/A **SCHOLARSHIP** 1,000 NEW LONDON, IA 52645 NONE N/A SCHOLARSHIP 1,000 WILLIAM SWENKATIFFIN TIFFIN, IA 52340

MCKENZIE VON RENTZELLEARLHAM EARLHAM, IA 50072	NONE	N/A	SCHOLARSHIP	1,000
MEGAN WARINMALOY MALOY, IA 50836	NONE	N/A	SCHOLARSHIP	1,000
MARA WEISAFTON	NONE	N/A	SCHOLARSHIP	1,000

MEGAN WARINMALOY MALOY, IA 50836	NONE	N/A	SCHOLARSHIP	1,00
MARA WEISAFTON AFTON,IA 50830	NONE	N/A	SCHOLARSHIP	1,00

Total. 196,800

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year LOGAN ZAABELKELLOGG NONE N/A **SCHOLARSHIP** 1,000 KELLOGG, IA 50135 NONE N/A **SCHOLARSHIP** 1,000 SPENCER ARNOLDRIVERSIDE RIVERSIDE IA 52327

KIVEKSIDE, IA 32327				
REBECCA FRANTZWELLMAN WELLMAN, IA 52356	NONE	N/A	SCHOLARSHIP	1,000
MARTA GRANTPRESTON PRESTON, IA 52069	NONE	N/A	SCHOLARSHIP	1,000
MADELYNN GREENSTATE CENTER	NONE	N/A	SCHOLARSHIP	1,000

STATE CENTER, IA 50247

Total . За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ABBY HOCKEMEYERHOLLAND NONE N/A **SCHOLARSHIP** 1,000 HOLLAND, IA 50642 NONE N/A **SCHOLARSHIP** 1,000 SARAH HOCKEMEYERHOLLAND HOLLAND TA 50642

HOLLAND, IA 30042				
JOHN KRALLWEST BRANCH WEST BRANCH, IA 52358	NONE	N/A	SCHOLARSHIP	1,000
KALEB MILLERLACONA LACONA, IA 50139	NONE	N/A	SCHOLARSHIP	1,000
GRETA SCHMIDTIOWA CITY	NONE	N/A	SCHOLARSHIP	1.000

IOWA CITY, IA 52240

За

196,800 Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ADDISON CROW SCHRADERMARION NONE N/A **SCHOLARSHIP** 1,000 MARION, IA 52302 1,000 BRIANA VER STEEGHOSKALOOSA NONE N/A **SCHOLARSHIP** OSKALOOSA, IA 52577 KELLI WICKSROCKFORD NONE N/A SCHOLARSHIP 1,000 ROCKFORD, IA 50468 IA STATE MEAT JUDGING TEAMAMES NONE N/A AWARD 8,000 AMES, IA 50011

N/A

AWARD

1,000

196,800

NONE

PAYTON VOGELHARTLEY

Total

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year HANNAH MITCHELLLENEX NONE N/A AWARD 500 LENEX, IA 50851 CHESNEY STEENHOEKMAXWELL NONE N/A AWARD 1,000

MAXWELL, IA 50161				
SARA SULLIVANDUNLAP DUNLAP, IA 51529	NONE	N/A	AWARD	1,000
HUNTER LOCKPACKWOOD PACKWOOD, IA 52580	NONE	N/A	AWARD	500
· · · · · · · · · · · · · · · · · · ·		l		

PACKWOOD, IA 52580	NONE	N/A	AWARD	50
KELSEY PRETZCOLUMBUS JUNCTION COLUMBUS JUNCTION, IA 52738	NONE	N/A	AWARD	1,00

000 Total. 196,800

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SPENCER MAUSSGRINNELL NONE N/A AWARD 500 GRINNELL, IA 50112 NONE NI/A AWARD. 1 000 MIA DECUTELLE DI AINE

BELLE PLAINE, IA 52208	NONE	IN/A	AWARD	1,000
JACK OPHEIMHUMBOLDT HUMBOLDT, IA 50548	NONE	N/A	AWARD	500
SHAE LYNN BECKERKEOTA KEOTA, IA 52248	NONE	N/A	AWARD	600
REESE JAMISONWOODWARD	NONE	N/A	AWARD	400

NONE N/A AWARD

REESE JAMISONWOODWARD WOODWARD, IA 50276

196,800 Total . За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ALEXIS VROEGHOSKALOOSA NONE N/A AWARD 600 OSKALOOSA, IA 52577 TYLER FRASHERANAMOSA NONE l N/A SCHOLARSHIP 400

ANAMOSA, IA 52205				
BELLA OPHEIMHUMBOLDT HUMBOLDT, IA 50548	NONE	N/A	AWARD	1,000
TREY LETTOWWOODWARD WOODWARD, IA 50276	NONE	N/A	AWARD	750
DREW JACOBSONOSCEOLA	NONE	N/A	AWARD	500

OSCEOLA, IA 50213

Total.

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year MCKENNA BRINNINGKEOTA NONE N/A AWARD 1,000 KEOTA, IA 52248

TYLER FRASHERANAMOSA ANAMOSA, IA 52205	NONE	N/A	AWARD	750
JUSTIN RUPNOWNEMAHA NEMAHA, IA 50567	NONE	N/A	AWARD	500
KALE BOYSENMORNING SUN MORNING SUN, IA 52640	NONE	N/A	AWARD	1,000

NEMAHA,IA 50567				
KALE BOYSENMORNING SUN MORNING SUN, IA 52640	NONE	N/A	AWARD	
BRIDGETT HOLCOMBWINTERSET	NONE	N/A	AWARD	

KALE BOYSENMORNING SUN MORNING SUN, IA 52640	NONE	N/A	AWARD	1,0
BRIDGETT HOLCOMBWINTERSET WINTERSET, IA 50273	NONE	N/A	AWARD	5

				105.000
BRIDGETT HOLCOMBWINTERSET WINTERSET, IA 50273	NONE	N/A	AWARD	500
·				

WINTERSET, IA 50273	NONE	IN/A	AWAILD	,
Total				196,800

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year TREY LETTOWWOODWARD NONE N/A AWARD 1,000 WOODWARD, IA 50276 DREW JACOBSONOSCEOLA NONE N/A **AWARD** 500

OSCEOLA, IA 50213				
LEVI HICKADEL ADEL, IA 50003	NONE	N/A	AWARD	250
MELANIE LANEELKADER ELKADER, IA 52043	NONE	N/A	AWARD	250
MYA GARMANALGONA	NONE	N/A	AWARD	250

ADEL, IA 50003				
MELANIE LANEELKADER ELKADER, IA 52043	NONE	N/A	AWARD	2
MYA GARMANALGONA	NONE	N/A	AWARD	2

ALGUNA, IA SUSII

Total .

3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SHAE LYNN BECKERKEOTA NONE N/A AWARD 250 KEOTA, IA 52248

DREW JACOBSONOSCEOLA OSCEOLA, IA 50213	NONE	N/A	AWARD	250
MAXWELL LODGEWEST BRANCH WEST BRANCH, IA 52358	NONE	N/A	AWARD	250
SAGE BECKERKEOTA KEOTA, IA 52248	NONE	N/A	AWARD	250

WEST BRANCH, IA 52358				
SAGE BECKERKEOTA KEOTA, IA 52248	NONE	N/A	AWARD	250
KALE BOYSENMORNING SUN MORNING SUN, IA 52640	NONE	N/A	AWARD	250

KALE BOYSENMORNING SUN NONE N/A AWARD	
MORNING SUN, IA 52640 NONE N/A AWARD	2!

T-4-1	-			106.000
KALE BOYSENMORNING SUN MORNING SUN, IA 52640	NONE	N/A	AWARD	2
REOTA, IA 52246				

Total . 196,800 За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NATHAN LAUTERBACHVAN METER NONE N/A AWARD 250 VAN METER, IA 50261 JUSTIN RUPNOWNEMAHA NONE N/A AWARD 250

NEMAHA, IA 50567		, ,		
LUKE GREINERKEOTA KEOTA, IA 52248	NONE	N/A	AWARD	250
BRIDGET CARSONNEWTON NEWTON, IA 50208	NONE	N/A	AWARD	250
<u> </u>		I	I	

N/A

AWARD

1,000

196,800

NONE

BLAKE FRACHTCHARLES CITY

CHARLES CITY, IA 50616

Total.

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year MORGAN VANDER HEIDENWHEATLAND NONE N/A AWARD 500 WHEATLAND, IA 52777 ___

STATE CENTER, IA 50247	NONE	N/A	AWARD	500
COLBY TOOLMONROE MONROE, IA 50170	NONE	N/A	AWARD	500
KYLEE SILLIMANFREMONT FREMONT, IA 52561	NONE	N/A	AWARD	500

MONROE, IA 50170		'',''		_
KYLEE SILLIMANFREMONT FREMONT, IA 52561	NONE	N/A	AWARD	5
SAVANNAH KEITZERMEDIAPOLIS	NONE	N/A	AWARD	2

ı	KYLEE SILLIMANFREMONT FREMONT, IA 52561	NONE	N/A	AWARD	50
	SAVANNAH KEITZERMEDIAPOLIS MEDIAPOLIS, IA 52637	NONE	N/A	AWARD	2!

SAVANNAH KEITZERMEDIAPOLIS NONE N/A AWARD 250 MEDIAPOLIS, IA 52637	FREMONT, IA 52561				
		NONE	N/A	AWARD	250

MEDIAPOLIS, IA 52637	NONE	IN/A	AWARD	2:
Total				196,800

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year LOGAN SIERENKEOTA NONE N/A AWARD 500 KEOTA, IA 52248 NONE NI/A AW/ARD 500 TRAVIS MICKELSONANDOVER

ANDOVER, IA 52701	NONE	IN/A	AWARD	300
MAX GIBSONELGIN ELGIN, IA 52141	NONE	N/A	AWARD	500
RACHEL KENNYSCHALLER SCHALLER, IA 51053	NONE	N/A	AWARD	500
NICK OLDENBURGERPARKERSBURG	NONE	N/A	AWARD	250

196,800

PARKERSBURG, IA 50665

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year KIERSTEN JASSGARNER NONE N/A AWARD 1,000 GARNER, IA 50438 CENDRA SEBOLTSEYMOUR NONE N/A **AWARD** 500

SEYMOUR, IA 52590				
JAKE HLASTRAER TRAER, IA 50675	NONE	N/A	AWARD	250
WILL RUPNOWNEMAHA NEMAHA, IA 50567	NONE	N/A	AWARD	1,000
B 44 TO 14 DO TET D 44 W 44 TO 14	NONE			=00

,				
WILL RUPNOWNEMAHA NEMAHA, IA 50567	NONE	N/A	AWARD	1,000
DALTON POTTEBAUMALTON ALTON, IA 51003	NONE	N/A	AWARD	500
Total				196,800

3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year JUSTIN SWANTONGOOSE LAKE NONE N/A AWARD 250 GOOSE LAKE, IA 52750 TYLER FRASHERANAMOSA NONE N/A AWARD 1.000

ANAMOSA, IA 52205		,		
TYLER TRIGGSMOUNT AYER MOUNT AYER, IA 50854	NONE	N/A	AWARD	500
MACY MAREKRIVERSIDE RIVERSIDE, IA 52327	NONE	N/A	AWARD	500

HOOM MER, IN SOOS				
MACY MAREKRIVERSIDE RIVERSIDE, IA 52327	NONE	N/A	AWARD	5
MARTA GRANTPRESTON	NONE	N/A	AWARD	3

RIVERSIDE, IA 52327	NONE	IN/A	AWARD	
MARTA GRANTPRESTON PRESTON, IA 52069	NONE	N/A	AWARD	

RIVERSIDE, IA 52327				
MARTA GRANTPRESTON PRESTON, IA 52069	NONE	N/A	AWARD	300

T-1-1		•		100.000
MARTA GRANTPRESTON PRESTON, IA 52069	NONE	N/A	AWARD	
,				

PRESTON, IA 52069	NONE	N/A	AWARD	30
Total				196,800

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

a Paid during the year				
LAURA YODERKALONA KALONA, IA 52247	NONE	N/A	AWARD	

200

800

NONE BI / A AMARDO

or substantial contributor

MORNING SUN, IA 52640	NONE	IN/A	AWARD	
Total			· · · · · · · ·	196,800

efile GRAPHIC print - DO NOT F	ROCESS	As Filed D	ata -			DLN: 93491051003038	
TY 2017 Accounting Fo	es Sch	edule					
	Name:	IOWA FO	UNDA	ATION FOR AG	GRICULTURAL		
ADVANCEMENT							
EIN: 42-1183067							
Softv	vare ID:	1700503	8				
Software \	Version:	2017v2.2	2				
Accounting Fees Schedule							
Category	Amo	ount	Net	Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
		4,884		1,000	3,8	84 0	

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DLN	N: 93491051003038
TY 2017 Legal Fees Schedu	ule			_
Nai	me: IOWA FOUN	DATION FOR AGR	ICULTURAL	
	ADVANCEMENT			
EIN: 42-1183067				
Software	ID: 17005038			
Software Versi	on: 2017v2.2			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
	400	0	400	0

efile GRAPHIC print - DO NOT PROCESS	PHIC print - DO NOT PROCESS As Filed Data -					
TY 2017 Other Expenses Sche	dule					
Name:	IOWA FOUNDAT	TION FOR AGRIC	ULTURAL			
	ADVANCEMENT					
EIN:	42-1183067					
Software ID:	: 17005038					
Software Version:	2017v2.2					
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
AWARDS & PLAQUES	338		338			
BANK FEES	184		184			
CONTRACT SERVICES	14,849		14,849			
DONATIONS	750		750			
FACILITIES & EQUIPMENT	1,035		1,035			

210

1,409

4,874

4,747

1,518

210

1,409

4,874

4,747

1,518

INSURANCE

MARKETING

OTHER

MEALS & HOTEL

OFFICE SUPPLIES

 Description
 Revenue and Expenses per Books
 Net Investment Income
 Adjusted Net Income
 Disbursements for Charitable Purposes

 PHOTOGRAPHY AND BANNERS
 383
 383

Other Expenses Schedule

Special Event Expenses

STATE FAIR TICKETS

TELEPHONE

WEBSITE

SPECIAL EVENT EXPENSES

PICNIC EXPENSES	16,813	16,813	
POSTAGE	2,699	2,699	
RENTAL, BACKDROP, & CARPET	1,746	1,746	

24,393

1,074

389

810

24,393

1,074

389

810

erile GRAPHIC Print - DO NOT PROCESS	AS FIIEU Data -	DLN: 93491051003038
TY 2017 Other Income Schedul	е	

Name: IOWA FOUNDATION FOR AGRICULTURAL

ADVANCEMENT

EIN: 42-1183067

Software ID: 17005038

Software Version: 2017v2.2

Other Income Schedule

other Income Schedule							
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income				
Income From Special Events	58,269		58,269				
MEMBERSHIP DUES	7,550						
MISC REVENUE	490						

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491051003038			
TY 2017 Sales Of Inventory So	chedule					
Name:	IOWA FOUNDA	ATION FOR AGRICULTUR	RAL			
	ADVANCEMENT					
EIN:	EIN: 42-1183067					
Software ID:	17005038					
Software Version:	2017v2.2					
		+				
Category	Gross Sales	Cost of Goods Sold	Net (Gross Sales Minus Cost of Goods Sold)			
SALE OF CHAMPIONS PROCEEDS	355,430	249,450	105,980			

efile GRAPHIC print - [OO NOT PROCESS	As Filed Data -				DLN: 93491051003038	
Schedule B		Schedu	ule of Contributo	ors		OMB No 1545-0047	
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Information a	► Attach to Form 990, 990-EZ, or 990-PF formation about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990					
Name of the organization o					Employer id	lentification number	
ADVANCEMENT Organization type (che	ook one)				42-1183067		
Organization type (che	eck one)						
Filers of:	Section:						
Form 990 or 990-EZ	☐ 501(c)() (enter number) o	organization				
	☐ 4947(a)(1) nonexempt char	ritable trust not treated a	ıs a prıvate founda	tion		
	☐ 527 politi	ical organization					
Form 990-PF	5 01(c)(3)	exempt private fo	undation				
4947(a)(1) nonexempt charitable trust treated as a private foundation							
501(c)(3) taxable private foundation							
			PF that received, during complete Parts I and II S				
Special Rules							
under sections 5 received from ar	509(a)(1) and 170(b)	(1)(A)(vi), that che luring the year, tota	g Form 990 or 990-EZ th cked Schedule A (Form al contributions of the gro plete Parts I and II	990 or 990-EZ), P	art II, line 13,	16a, or 16b, and that	
during the year,	total contributions o	f more than \$1,000	or (10) filing Form 990 of the control of the contr	s, charitable, scien			
during the year, If this box is che purpose Don't o	contributions exclus cked, enter here the complete any of the p	sively for religious, total contributions parts unless the G o	or (10) filing Form 990 or charitable, etc., purpose is that were received duri eneral Rule applies to the or more during the year	s, but no such con ng the year for an nis organization be	ntributions tota exclusively re ecause it recei	aled more than \$1,000 eligious, charitable, etc , ived <i>nonexclusively</i>	
990-EZ, or 990-PF), but	it must answer "No	o" on Part IV, line 2	ile and/or the Special Ru t, of its Form 990, or che at it doesn't meet the filin	ck the box on line	H of its		
For Paperwork Reduction A for Form 990, 990-EZ, or 99		tructions	Cat No 30613X	Schedu	ıle B (Form 990	, 990-EZ, or 990-PF) (2017)	

Name of organization IOWA FOUNDATION FOR AGRICULTURAL ADVANCEMENT		42-1183067	Employer identification number 42-1183067	
Part I	Contributors (See instructions) Use duplicate copies of Part I if ad-	ditional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
1	CARGILL INCORPORATED		Person 🗸	
	PO BOX 9300	\$ 6,500	Payroll	
	MINNEAPOLIS, MN55440		(Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
<u>2</u>	IOWA SELECT FARMS		Person 🗸	
-	811 SOUTH OAK STREET	 \$ 16,000	Payroll	
	IOWA FALLS, IA 50126		(Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
<u>3</u>	DODEST W. CCULLITY DE TO		Person	
	ROBERT W SCHLUTZ RE TR PO BOX 269	 \$ 25,000	Payroll Noncash	
	COLUMBUS JUNCTION, IA52738		(Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
4	SINCLAIR TRACTOR		Person	
4	1407 200TH AVENUE	 \$ 10,000	Payroll	
	SIGOURNEY, IA52591	3 10,000	Noncash	
			(Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
<u>5</u>	IOWA CORN GROWERS ASSOCIATION		Person Payroll	
	5505 88TH ST 100	\$ 25,000	Noncash	
	JOHNSTON, IA50131		(Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
<u>6</u>	TOWA PURENCED CHANG COUNCY		Person	
-	IOWA PUREBRED SWINE COUNCIL 1636 NW 114TH ST	 \$ 5,500	Payroll	
	CLIVE, IA50325		Noncash	
	·		(Complete Part II for noncash contributions)	

Schedule B (Form 9	990, 990-EZ, or 990-PF) (2017)		Page 4	
Name of organization ADVANCEMENT			Employer identification number 42-1183067	
than \$1, organiza the year	000 for the year from any one contributo	r. Complete columns (a) throu of exclusively religious, charit ctions.) ► \$	d in section 501(c)(7), (8), or (10) that total more ugh (e) and the following line entry. For table, etc., contributions of \$1,000 or less for	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	Transferee's name, address, and	(e) Transfer of gift ZIP 4 R	delationship of transferor to transferee	
(a)	(b) Durnoso of gift	(a) Hea of gift	(d) Description of how gift is hold	
No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	(e) Transfer of gift Transferee's name, address, and ZIP 4 Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	(e) Transfer of gift Transferee's name, address, and ZIP 4 Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	Transferee's name, address, and	(e) Transfer of gift ZIP 4 R	delationship of transferor to transferee	

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)