2949124405020

Form **990-PF**Department of the Treasury Internal Revenue Service

C&E 927

EXTENDED TO NOVEMBER 15, 2018 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.

▶ Go to www irs gov/Form990PF for instructions and the latest information.

OMB No 1545-0052 2017

For	calen	dar year 2017 or tax year beginning JUL	17, 2017	, and ending	DEC 31, 2017	<u></u> _
Nai	me of	foundation			A Employer identification	number
V	'AN	DE BRAKE FAMILY FOUNDAT	'ION		82-3734862	2
		nd street (or P O box number if mail is not delivered to street		Room/suite	B Telephone number	<u>-</u>
P	.0	. BOX 978			712-332-23	884
		own, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is p	pending check here
		BOJI, IA 51355				
G (	Check	all that apply:	Initial return of a fo	rmer public charity	D 1 Foreign organization	s, check here
		Final return	Amended return		2 Foreign organizations me check here and attach co	eeting the 85% test,
	hack	type of organization: X Section 501(c)(3) ex	Name change		1	· -
Ϊ	_	· F===-	Other taxable private founda	tion OY	E If private foundation sta under section 507(b)(1	
I Fa			ng method: X Cash	Accrual	F If the foundation is in a	
		Part II, col. (c), line 16)	ther (specify)	— <del>—</del>	under section 507(b)(1	
_	\$	198,227. (Part I, colun	nn (d) must be on cash basis	3)		
Pa	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	199,234.		N/A	
	2	Check If the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments		<del> </del>		
	4	Dividends and interest from securities				
	1	Gross rents		··		
	-	Net rental income or (loss)  Net gain or (loss) from sale of assets not on line 10				
Revenue	b	Gross sales price for all assets on line to assets on line to				
eve	7	Capital gain net income (from Part IV, line 2)		0.		
ď	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
		Less Cost of goods sold				
	11	Gross profit or (loss) Other income				_
	12	Total Add lines 1 through 11	199,234.	0.		
	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
	14	Other employee salaries and wages	1			
10	15	Pension plans, employee benefits				
1Se:	16a	Legal fees	180			
cber	₽	Accounting fees Other professional fees   SFP 0 4 2018	101			
e Ë	ξç	Pension plans, employee benefits  Legal fees  Accounting fees Other professional fees Interest Taxes Depreciation and depletion Occupancy Travel, conferences, and meetings Printing and publications Other expenses  Total operating and administrative expenses Add lines 13 through 23 Contributions, gifts, grants paid	当			
ativ	पित	Taxes				
istra	19	Taxes  Depreciation and depletion OGDEN, III				
E.	20	Occupancy				
PΑ	2,1	Travel, conferences, and meetings				
and	:22	Printing and publications				
Бu	23	Other expenses				
rat	:24	Total operating and administrative		0		
ŏ	25	expenses Add lines 13 through 23	0.	0.		0.
_	25 26	Contributions, gifts, grants paid  Total expenses and disbursements				0.
	20	Add lines 24 and 25	0.	0.		0.
	27	Subtract line 26 from line 12				1
		Excess of revenue over expenses and disbursements	199,234.			
	b	Net investment income (if negative, enter -0-)		0.		
	C	Adjusted net income (if negative, enter -0-)			N/A	

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1	O.
2	Enter amount from Part I, line 27a	2	199,234.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	199,234.
5	Decreases not included in line 2 (itemize) ▶	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	199,234.

	the kind(s) of property sold (for exarehouse; or common stock, 200 st		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	( <b>d)</b> Date sold (mo , day, yr )
<u>a</u>					<del></del>
b NO	NE	<u> </u>			
c d			_		
<u> </u>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal		(h) Gain or (loss) ((e) plus (f) minus (	
)					
: 					
Complete only for assets showing	ng gain in column (h) and owned by	y the foundation on 12/31/69	,	(I) Gains (Col (h) gain	minus
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i over col. (j), if any	,	ol (k), but not less than Losses (from col ()	ו -0-) <b>or</b> ו(ני)
	<u> </u>				
Capital gain net income or (net ca	apital loss) $\begin{cases} & \text{If gain, also entity} \\ & \text{If (loss), enter} \end{cases}$	er in Part I, line 7 0- in Part I, line 7	} 2		
Net short-term capital gain or (los if gain, also enter in Part I, line 8,	ss) as defined in sections 1222(5) a				
If (loss), enter -0- in Part I, line 8			ʃ   3		
)ad \/   Oualitiaatiaa U					
art v   Quaimication U	Inder Section 4940(e) fo	r Reduced Tax on N	let Investment In	come	
	Inder Section 4940(e) for e foundations subject to the section		<del></del>	come	N/A
or optional use by domestic private	e foundations subject to the section		<del></del>	come	N/A
or optional use by domestic private	e foundations subject to the section		<del></del>	come	
or optional use by domestic private section 4940(d)(2) applies, leave the as the foundation liable for the sect	e foundations subject to the section his part blank tion 4942 tax on the distributable a	n 4940(a) tax on net investme mount of any year in the base	nt income )	come	N/A
or optional use by domestic private section 4940(d)(2) applies, leave the as the foundation liable for the sect Yes," the foundation doesn't qualif	e foundations subject to the section his part blank tion 4942 tax on the distributable a fy under section 4940(e). Do not co	n 4940(a) tax on net investme mount of any year in the base complete this part.	nt income ) e period?	come	
or optional use by domestic private section 4940(d)(2) applies, leave the as the foundation liable for the sectives," the foundation doesn't qualification the appropriate amount in e	e foundations subject to the section his part blank tion 4942 tax on the distributable a	n 4940(a) tax on net investme mount of any year in the base complete this part.	nt income ) e period? ny entries.		Yes
or optional use by domestic private section 4940(d)(2) applies, leave the set the foundation liable for the sections, the foundation doesn't qualify.  Enter the appropriate amount in a cap and the cap appropriate amount in a cap and a c	e foundations subject to the section his part blank tion 4942 tax on the distributable a fy under section 4940(e). Do not co each column for each year; see the	n 4940(a) tax on net investment mount of any year in the base complete this part.  Instructions before making a	nt income ) e period?	Distrib	
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or optional use by domestic private section 4940(d)(2) applies, leave the as the foundation liable for the section 4940(d)(2) applies, leave the asthe foundation doesn't qualify. The foundation doesn't qualify are period years.  Calendar year (or tax year beginning 2016 2015 2014 2013 2012  Total of line 1, column (d) Average distribution ratio for the state foundation has been in exister the net value of noncharitab Multiply line 4 by line 3  Enter 1% of net investment income Add lines 5 and 6	e foundations subject to the section his part blank tion 4942 tax on the distributable a fy under section 4940(e). Do not coeach column for each year; see the (b) Adjusted qualifying displaying the field of the section of the secti	mount of any year in the base omplete this part. Instructions before making a stributions  Net value of the following a stributions.	nt income ) e period? ny entries. (c) if noncharitable-use asset	2 3 4 5 6 7	Yes (d)
or optional use by domestic private section 4940(d)(2) applies, leave the as the foundation liable for the section 4940(d)(2) applies, leave the as the foundation liable for the section 4940(d)(2) applies, leave the as the foundation doesn't qualify and the foundation doesn't qualify as period years are calendar year (or tax year beginning 2016 2015 2014 2013 2012  Total of line 1, column (d) Average distribution ratio for the state foundation has been in exister the foundation has been in exister the net value of noncharitaby Multiply line 4 by line 3  Enter 1% of net investment income Add lines 5 and 6  Enter qualifying distributions from	e foundations subject to the section his part blank tion 4942 tax on the distributable a fy under section 4940(e). Do not coeach column for each year; see the (b) Adjusted qualifying displaying the field of the section of the secti	mount of any year in the base omplete this part. Instructions before making a stributions  Net value of the following of the line 2 by 5 0, or by the next, line 5	nt income ) e period? ny entries. (c) if noncharitable-use asset	2 3 4 5 6	Yes (d)

	990-PF (2017) VANDE BRAKE FAMILY FOUNDATION 82-373 art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	1862 instr	ıctio	Page 4	
	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.		101.0		
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here			0.	
-	of Part I, line 27b				
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).				
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			0.	
	Add lines 1 and 2			0.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			0.	
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-			0.	
6	Credits/Payments*				
a	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 0.				
b	Exempt foreign organizations - tax withheld at source 6b 0.				
C	Tax paid with application for extension of time to file (Form 8868)  6c  0 •				
d	Backup withholding erroneously withheld 6d 0 •				
	Total credits and payments. Add lines 6a through 6d			<u> </u>	
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			0.	
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		_	<u>0.</u>	
	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 2018 estimated tax				
	rt VII-A Statements Regarding Activities	Т	Yes	No	
١a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	1a	163	X	
h	any political campaign?  Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		X	
U	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or	10			
	distributed by the foundation in connection with the activities				
	Did the foundation file Form 1120-POL for this year?	1c		Х	
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	-10	-		
u	(1) On the foundation.  \$\Bigs \text{0.} (2) On foundation managers. \$\Bigs \text{0.}			1	
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
·	managers. ►\$ 0.				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X	
	If "Yes," attach a detailed description of the activities.				
3	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		X	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		<u> </u>	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		<u>X</u>	
	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			{	
	By language in the governing instrument, or	'			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law				
_	remain in the governing instrument?	6_	X	<del> </del>	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	<b> -</b>	
_	Constitution of the format of				
Вa	Enter the states to which the foundation reports or with which it is registered. See instructions.	1			
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				
D	of each state as required by General Instruction G2 If "No," attach explanation	8b	х		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	30		<del> </del>	_
J	year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV	9		X	2
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses STMT 2	10	Х		
10		rm <b>99</b> 0		(2017)	

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Pa	art VII-A Statements Regarding Activities (continued)			
	•		Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		x
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	<u> </u>		
12	If "Yes," attach statement. See instructions	12		х
12		13	Х	
13		13		L,
	Website address ► N/A  The books are in care of ► HANCOCK & DANA, P.C. Telephone no. ► 402 - 3	01 1	065	
14				
	Located at ► 12829 WEST DODGE ROAD, SUITE 100, OMAHA, NE ZIP+4 ►	08134		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		▶	. —
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A_	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,		Yes	
	securities, or other financial account in a foreign country?	16	L	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
Б,	foreign country ► art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			l
_ F 6			Voc	Nia
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
18	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?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available		l	
	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.)		1	İ
t	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	-	ļ
	Organizations relying on a current notice regarding disaster assistance, check here			
C	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 2017?	1c		Х
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	a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2017? Yes X No			
	If "Yes," list the years >			
t	b Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
C	c If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here	1	1	
	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
3a		İ		
	during the year?			
t	b If "Yes," did it have excess business holdings in 2017 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 2017 ) $N/A$	<u>3</u> b	ļ	
48	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
Ł	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	1		
	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4 <u>b</u>		X
		Form <b>99</b> 0	0-PF	(2017)

Form 990 PF (2017) VANDE BRAKE FAMILY FOUND Part VII-B   Statements Regarding Activities for Which F	ATION	Poguirod /	82-37348	62	Page 6
	orm 4/20 May be r	required (contin	ued)	Ye	Sal Nia
5a During the year, did the foundation pay or incur any amount to.	10.151.330	Г <del></del> ]	- February	_   Y E	s No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	• • •		es X No		
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	- · · · · · · · · · · · · · · · ·			
any voter registration drive?	,		es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes'		Y6	es X No		]
(4) Provide a grant to an organization other than a charitable, etc., organization	1 described in section	<u></u>	<b>₩</b>		
4945(d)(4)(A)? See instructions			es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or to		es X No		
the prevention of cruelty to children or animals?			es 🗘 No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		n Regulations	NT / N	5 h	}
section 53.4945 or in a current notice regarding disaster assistance? See instru			N/A	5b	<del></del>
Organizations relying on a current notice regarding disaster assistance, check h		nad			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr					
expenditure responsibility for the grant?	14	/A Ye	es No		
If "Yes," attach the statement required by Regulations section 53 4945-5(d).			į		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	bay preimums on	[	<del>[</del> V]		
a personal benefit contract?		Y6	es X No	0.	
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6Ь	X_
If "Yes" to 6b, file Form 8870.	halta atuan aasta a O		<b>.</b>		ļ
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	es X No	_	<del></del>
b If "Yes," did the foundation receive any proceeds or have any net income attributed Part VIII Information About Officers, Directors, Truste		nagara Uighli		7b	
Part VIII Information About Officers, Directors, Trusto Paid Employees, and Contractors	es, roundation wa	nagers, nigni	y		
1 List all officers, directors, trustees, and foundation managers and the	neir compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) E	xpense unt, other
(a) Name and address	hòurs per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	accou	unt, other wances
NORLYN VANDE BRAKE	DIRECTOR/PRES				
PO BOX 978					
OKOBOJI, IA 51355	0.00	0.	0.		0.
	DIRECTOR/VICE		<del></del>	T	
PO BOX 978			_		
OKOBOJI, IA 51355	0.00	0.	0.	[	0.
	DIRECTOR/TREA				
105 PRAIRIE VIEW LANE					
ORANGE CITY, IA 51041	0.00	0.	0.	1	.0.
	DIRECTOR/SECR				
105 MARTIN DRIVE, N.E.					
ORANGE CITY, IA 51041	0.00	0.	0.		0.
2 Compensation of five highest-paid employees (other than those inc					
(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	accou	xpense unt, other wances
NONE	devoted to position		compensation	uno	wanees
HOND					
				<del> </del>	
				}	
	<del></del>				
Total number of other employees paid over \$50,000		<del></del>	Earm	990-P	<b>PF</b> (2017)
			FUITI	~~~r	· (2011)

P	Part X Minimum Investment Return (All domestic foundations must complete this part Foreign	foundations, see	instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a		1a	99,617.
b		1b	
C		1c	
d	Total (add lines 1a, b, and c)	1d	99,617.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	0.	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	99,617.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,494.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	98,123.
6	Minimum investment return Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	2,258.
L P	Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundation foreign organizations, check here and do not complete this part.)	ns and certain	
1	Minimum investment return from Part X, line 6	1	2,258.
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,258.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	2,258.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	2,258.
[P	Part XII Qualifying Distributions (see instructions)  Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a		1a	0.
b		1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а		3a	
b		3b_	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	0.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	Income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	0.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the founda 4940(e) reduction of tax in those years	tion qualifies for the	section

	(a)	(b)	(c)	(d)
1 Distributable amount for 2017 from Part XI,	Corpus	Years prior to 2016	2016	2017
line 7			Ì	2,258.
2 Undistributed income, if any, as of the end of 2017				2,250.
a Enter amount for 2016 only			0.	
<b>b</b> Total for prior years:				
b rotation prior years		0.		
3 Excess distributions carryover, if any, to 2017.				
a From 2012				
<b>b</b> From 2013				
c From 2014				
· · · · · · · · · · · · · · · · · · ·				
d From 2015				
e From 2016	0.			
f Total of lines 3a through e	0.			<del> </del>
4 Qualifying distributions for 2017 from				
Part XII, line 4 ► \$0 .				
a Applied to 2016, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior		_		
years (Election required - see instructions)		0.		<del></del>
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2017 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below.				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
<b>b</b> Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2016. Subtract line				
4a from line 2a Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2018				2,258.
7 Amounts treated as distributions out of				27350
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	0.			
may be required - see instructions)				
8 Excess distributions carryover from 2012	0.			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2018	0			
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9.				
a Excess from 2013				
b Excess from 2014				
c Excess from 2015				
d Excess from 2016		i i		

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e Excess from 2017

Form 990-PF (2017) VANDE E Part XIV Private Operating F	RAKE FAMILY	FOUNDATIO	N (II.A. guestion 9)		7348.62 Page 1
	<del></del>			N/A	/
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective fo		•	<b>▶</b>	7	0.40(.)(5)
<b>b</b> Check box to indicate whether the found		ng foundation described		4942(j)(3) or4	942(j)(5) T
2 a Enter the lesser of the adjusted net	Tax year	(h) 2016	Prior 3 years	(4)(2014	- (a) Tatal
income from Part I or the minimum	(a) 2017	<b>(b)</b> 2016	(c) 2015	(d) 2014	(e) Total
investment return from Part X for					
each year listed				_/	ļ ————
<b>b</b> 85% of line 2a				,4	
c Qualifying distributions from Part XII,					
line 4 for each year listed	<u> </u>		<del>                                     </del>		
<b>d</b> Amounts included in line 2c not					
used directly for active conduct of					
exempt activities	<u> </u>	<u> </u>			
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c		<u> </u>	/		
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>b</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)					
(2) Support from general public	7				
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 Info	rmation (Comple	ete this part only	if the foundation	n had \$5,000 or m	ore in assets
at any time during t					
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh	-	than 2% of the total co	ntributions received by t	he foundation before the clo	ose of any tax
year (but only if they have contributed n					,
NONE					
<b>b</b> List any managers of the foundation wh	o own 10% or more of the	ne stock of a corporation	(or an equally large poi	rtion of the ownership of a p	partnership or
other entity) of which the foundation ha					
NONE					
2 Information Regarding Contribut	ion, Grant, Gift, Loan	, Scholarship, etc., F	rograms:		
Check here <b>X</b> If the foundation of	nly makes contributions	to preselected charitabl	e organizations and does	s not accept unsolicited req	uests for funds If
the foundation makes gifts, grants, etc.,	to individuals or organiz	ations under other cond	itions, complete items 2	a, b, c, and d.	
a The name, address, and telephone num	ber or email address of t	he person to whom app	ications should be addr	essed	
<b>b</b> The form in which applications should be	e submitted and informa	ition and materials they	should include		
c Any submission deadlines:					
d Any contrictions or limitations are series	n push no hy no	al arana sharitable field	kinde of institutions	ur other factors	
<b>d</b> Any restrictions or limitations on award	s, such as by geographic	ai areas, charnable nelo	s, killus of institutions, C	ii oulei lactors	

**▶** 3b

Total

Part XVI-A	Analysis of Income-Producing Activities

nter gross amounts unless otherwise indicated.	Unrelated b	usiness income		by section 512, 513, or 514	(e)
· .	(a) Business	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue	code		Code		
a					· <del>-</del>
b					<del></del>
<u> </u>					
d			-		
e	_				<del></del>
	-				
g Fees and contracts from government agencies	-		-		<del></del>
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments  4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:	<del></del>				<del></del>
• •					
a Debt-financed property					<del></del>
b Not debt-financed property					<del></del>
6 Net rental income or (loss) from personal property					
7 Other investment income			-   -		<del></del>
3 Gain or (loss) from sales of assets other	<u> </u>				
than inventory					
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
b	- <del>    -</del>			··	··
	l l				
d	1 1				
е				•	
2 Subtotal. Add columns (b), (d), and (e)			).	0.	C
3 Total Add line 12, columns (b), (d), and (e)					C
See worksheet in line 13 instructions to verify calculations.)	1				
Part XVI-B Relationship of Activities					

TE NO	the foundation's exempt purposes (other than by providing funds for such purposes).
-+	
_	

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Pa	rt XVII			sfers to a	ind Transa	ctions a	ınd Relatioı	nships With None	charitable	)	
_	Did the oi	rganization directly or indir		of the follows	a with any othe	or organizativ	on decembed in a	control FO1(a)	T T	Yes	No
		in section 501(c)(3) organ						section 50 f(c)		163	140
		from the reporting founda				janizations.					
	(1) Cash		tion to a noncharita	bic exempt or	gamzation of				1a(1)		х
	(1) Odsii (2) Othe								1a(1)	<b></b>	X
		rsactions'							12(2)		
-	_	s of assets to a noncharital	ble exempt organizat	tion					1b(1)		х
	` '	hases of assets from a nor							1b(2)		X
		al of facilities, equipment,	•	<b>J</b>					1b(3)		X
		bursement arrangements							1b(4)		X
	(5) Loan	s or loan guarantees							1b(5)		Х
	(6) Perfo	ormance of services or me	mbership or fundrais	sing solicitatio	ons				1b(6)		Х
C	Sharing o	of facilities, equipment, mai	ılıng lists, other asse	ts, or paid em	ployees				1c		X
d	If the ans	wer to any of the above is	"Yes," complete the f	following sche	edule. Column (	b) should al	ways show the fa	air market value of the go	ods, other ass	sets,	
	or service	es given by the reporting fo	oundation If the four	ndation receiv	ed less than fai	r market valı	ue in any transac	tion or sharing arrangem	nent, show in		
	<del></del> `-	d) the value of the goods,									
(a) Lii	ne no	(b) Amount involved	(c) Name of		e exempt organ	ızatıon	(d) Descrip	otion of transfers, transaction	s, and sharing ar	rangeme	nts
				N/A							
-				· · · · · · · · · · · · · · · · · · ·			<del> </del>				
	-						<del>-  </del>				
				<del></del>			<del>-  </del>				
			<u> </u>								
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		- · · · · · · · · · · · · · · · · · · ·	<del></del>		<del></del>						
				<del></del>			<del></del>	<del> </del>			
		ndation directly or indirect			or more tax-ex	empt organi	izations describe	d	□ Vaa	TV.	No
		501(c) (other than section		CHON 5277					Yes		טאו ב
b If "Yes," complete the following schedule  (a) Name of organization				(b) Type of o	rganization	T	(c) Description of relationship				
		N/A	amedion		(5) 1) po o. o	gamzation	<del>                                     </del>	(b) Booth prior of for			
		11/21					-				
		<del></del>									
					-						
		r penalties of perjury, I declare telef, it is true, forrect, and com	that I have examined this	s return, includin	ng accompanying	schedules and	statements, and to	the best of my knowledge	May the IRS	discuss	this
Sig	Jn J				ı n	1 1		CTOR/PRESIC		2 See in	er str
He	<b> </b>	Muly KV	and 150	de	8	121/1	8 ENT		X Yes		No
	Sig	nature of officer of trustee		I D	Date /	<del></del>	Title	Chook Life I	OTINI OTINI		
		Print/Type preparer's na	me	Preparer's s	igurature )	1	Date	Check if   F	PTIN		
Pai	id	DICHADD HOMAN		1 8	elt	1	5/22/1	- l ' ' l	חחחחם כ	201	
	eparer	RICHARD HOMAN			7 10 110			Firm's EIN ► 47	P00086		
	e Only	Firm's name ► HANCOCK & DANA PC						THINISEIN F4/	0/100	U J	
	J	Firm's address ▶ 12	829 WEST	DODGE	ROAD #	100	· · · · · ·		<del>_</del>		
			AHA, NE 6		" .	- <del></del>		Phone no. 402	-391-1	065	
					-				Form <b>99</b> 6		(2017)

# Schedule B

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

Department of the Treasury Internal Revenue Service

## Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Name of the organization Employer identification number VANDE BRAKE FAMILY FOUNDATION 82-3734862 Organization type (check one) Filers of: Section: 501(c)( Form 990 or 990 EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule X For an organization filing Form 990, 990 EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

Employer identification number

### VANDE BRAKE FAMILY FOUNDATION

82-3734862

Part I	Contributors (see instructions) Use duplicate copies of Part I	if additional space is needed	2 3/34002
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	NORLYN VANDE BRAKE P.O. BOX 978 OKOBOJI , IA 51355	\$\$	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

#### VANDE BRAKE FAMILY FOUNDATION

82-3734862

Part II	Noncash Property (see instructions) Use duplicate copies of Part I	I if additional space is needed	3/34002
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	6,715 SHARES BANK OF AMERICA (BAC)	ss	12/27/17
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		s	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

ANDE BRAKE FAMILY FOUNDATION  Exclusively feligious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious charitable, etc., contributions of \$1,000 or less for the year. (Enter this info once).  Substituting the proof of the year of the year. (Enter this info once). Substituting the year of the year. (Enter this info once). Substituting the year of the year. (Enter this info once). Substituting the year of the year. (Enter this info once). Substituting the year of year. (b) Purpose of gift. (c) Use of gift. (d) Description of how gift.)	e than \$1,000 fo					
the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info once).  Use duplicate copies of Part III if additional space is needed.  (b) Purpose of gift.  (c) Use of gift.  (d) Description of how gift.						
n) No. Irom (b) Purpose of gift (c) Use of gift (d) Description of how gi	ft is held					
rart I	ft is held					
(e) Transfer of gift	(d) Description of how gift is held					
Transferee's name, address, and ZIP + 4 Relationship of transferor to transference	eree					
a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gi	ft is held					
Part I						
(e) Transfer of gift						
Transferee's name, address, and ZIP + 4 Relationship of transferor to transfer	Relationship of transferor to transferee					
a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gi	ft is held					
(e) Transfer of gift						
Transferee's name, address, and ZIP + 4 Relationship of transferor to transfer	eree					
n) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gi	ft is held					
(e) Transfer of gift  Transferee's name, address, and ZIP + 4  Relationship of transferor to transfer	eree					
Transfered and Cos, and Zir 7 7 netationship of transferor to transfer						

FORM 990-PF	OTHER	STATEMENT			
DESCRIPTION		VALUATION METHOD	BOOK VALUE	FAIR MARKE' VALUE	т
		COST	199,234.	198,2	27.
TOTAL TO FORM 990-PF,	PART II, LINE 1	3	199,234.	198,227.	
FORM 990-PF	LIST OF SUBSTAN PART VII-	TIAL CONTRIE A, LINE 10	BUTORS	STATEMENT	2
NAME OF CONTRIBUTOR	A	DDRESS			
NORLYN VANDE BRAKE		.O. BOX 978 KOBOJI, IA 5	51355		