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DLN: 93491321060510

2019

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

Open to Public Inspection

		ndar year 2019, or tax year beginning 01-01-20	19 , ar	nd en	ding 12-31-		
		undation A GOOD TESTAMENTARY TRUST				entification numbe	r
					42-6453227		
	ber and L3 W CI	d street (or P.O. box number if mail is not delivered to street address) HERRY	Room/suite		<b>B</b> Telephone nu	mber (see instructior	ns)
					(515) 275-2427	,	
		n, state or province, country, and ZIP or foreign postal code 50212			<b>C</b> If exemption	application is pending	g, check here
i Ch	eck al	ll that apply: $\Box$ Initial return $\Box$ Initial return of a	former public charity		<b>D 1.</b> Foreign or	ganizations, check he	re
		☐ Final return ☐ Amended return				ganizations meeting	
		Address change Name change			·	k here and attach cor	
<b>I</b> Ch	eck ty	ablape of organization: $ abla$ Section 501(c)(3) exempt private f	oundation			ındation status was t n 507(b)(1)(A), checl	
	Section	n 4947(a)(1) nonexempt charitable trust 🔲 Other taxable	private foundation				
of '	year (f	xet value of all assets at end from Part II, col. (c),  ▶\$ 13,436,202  J Accounting method:  □ Other (specify) (Part I, column (d) must	✓ Cash ☐ Accru	al		ation is in a 60-month n 507(b)(1)(B), checl	
Pa	rt I	Analysis of Revenue and Expenses (The total	(-) Davison and	Π			(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(a) Revenue and expenses per books	(b) I	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)					
	2	Check ► ☑ if the foundation is <b>not</b> required to attach					
	3	Sch. B Interest on savings and temporary cash investments	212,163		212,163	212,163	
	4	Dividends and interest from securities	171,103		171,103	171,103	
	5a	Gross rents					
	b	Net rental income or (loss)					
KIE	6a	Net gain or (loss) from sale of assets not on line 10	31,232				
Revenue	ь 7	Gross sales price for all assets on line 6a 1,849,948 Capital gain net income (from Part IV, line 2)			31,232		
	8	Net short-term capital gain			·		
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less: Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)	1,356		1,356	1,356	
	12	Total. Add lines 1 through 11	415,854		415,854	384,622	
	13	Compensation of officers, directors, trustees, etc.	20,100		10,050	5,025	5,02
_	14	Other employee salaries and wages					
Ses	15 16a	Pension plans, employee benefits					
=	b	Accounting fees (attach schedule)	<b>9</b> 6,875		1,000		
Ľ		Other professional fees (attach schedule)	0,073		1,000		
e 	с 17	Interest					
<u> </u>	18		<b>4</b> ,365		3,365		
<u>₹</u>	19	Taxes (attach schedule) (see instructions)  Depreciation (attach schedule) and depletion	11,503	_			
Ē	20	Occupancy					
AC	21	Travel, conferences, and meetings					
<u> </u>	22	Printing and publications					
Operating and Administrative Expenses	23	Other expenses (attach schedule)	24,416		24,182		
	24	Total operating and administrative expenses.					
j G		Add lines 13 through 23	65,756		38,597	5,025	5,02
5	25	Contributions, gifts, grants paid	666,559				666,55
	26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	722 245		20 507	E 03E	671 50
	27	Subtract line 26 from line 12:	732,315		38,597	5,025	671,58
	a	Excess of revenue over expenses and					
	1.	disbursements	-316,461				
	b	Net investment income (if negative, enter -0-)  Adjusted net income (if negative, enter -0-)			377,257	_	
	С	Adjusted not moone (it negative, enter -0-)				379,597	

Attached schedules and amounts in the description column

Receivables due from officers, directors, trustees, and other

Less: allowance for doubtful accounts ▶

Investments—mortgage loans . . . .

Land, buildings, and equipment: basis

instructions. Also, see page 1, item I)

and complete lines 24, 25, 29 and 30.

Net assets without donor restrictions . . .

Net assets with donor restrictions . . .

and complete lines 26 through 30.

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

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize) -

Other assets (describe > .

Other liabilities (describe ▶\_

Grants payable

Prepaid expenses and deferred charges . . . .

Investments—other (attach schedule) . . . .

Total assets (to be completed by all filers—see the

disqualified persons (attach schedule) (see instructions) . . . . .

Other notes and loans receivable (attach schedule) ▶

Investments—U.S. and state government obligations (attach schedule)

Investments—corporate stock (attach schedule) . . . . . . .

Investments—land, buildings, and equipment: basis ▶ Less: accumulated depreciation (attach schedule) ▶

Less: accumulated depreciation (attach schedule) ▶

Foundations that follow FASB ASC 958, check here ▶

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule). . . . .

Foundations that do not follow FASB ASC 958, check here 🕨 🗹

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 29 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

**Analysis of Changes in Net Assets or Fund Balances** 

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

Beginning of year

4,168,827

5,445,815

13,060

10,432,804

6,469,801

3,963,003

10.432.804

10,432,804

Assets	
Ass	

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**Balance Sheets** 

Part II

5

6

7

8

9 10a

b

C 11

12

13 14

15

16

17 18

19

20

21

22

23

24

25

28

30

Part III

2

3

Liabilities

**Fund Balances** 

ŏ 26

Assets 27

Net 29 Page 2

7,959,703

4,223,249

263,060

13,436,202

End of year

4,459,806

4,403,287

263,060

10,116,343

6,469,801

3,646,542

10.116.343

10,116,343

1

2

3

4

5

6

10,432,804

10,116,343

-316,461

	e the kind(s) of property sold (e.g., arehouse; or common stock, 200 sha		How acquired P—Purchase D—Donation	Date acquired (mo., day, yr.)	Date sold (mo., day, yr.)
1aSee Additional Data Tabl	e				
b					
d					
e					
	(f)		(g)	(	h)
(e) Gross sales price	Depreciation allowed		other basis	,	r (loss)
<u> </u>	(or allowable)	plus expe	ense of sale	(e) plus (f	) minus (g)
a See Additional Data Tabl	e				
b					
C					
d					
e					
Complete only for assets	showing gain in column (h) and ow	ned by the foundation o	on 12/31/69	(	I)
<b>(i)</b> F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	( <b>k)</b> of col. (i) . (j), if any	col. (k), but not	h) gain minus less than -0-) <b>or</b> om col.(h))
<b>a</b> See Additional Data Tabl		0,0,00,	(3)),	,	
b					
d					
e					
		If gain, also enter in Pa	art I, line 7		
2 Capital gain net income	or (net capital loss)	If (loss), enter -0- in P		2	31,232
·	gain or (loss) as defined in sections rt I, line 8, column (c) (see instructi	ons). If (loss), enter -0	}	3	
Part V Qualification l	Jnder Section 4940(e) for Re	educed Tax on Net	Investment In	come	
(For optional use by domestic p	rivate foundations subject to the secand this part blank.	ction 4940(a) tax on ne	t investment incom	ne.)	es 🗸 No
If "Yes," the foundation does no	e section 4942 tax on the distributa ot qualify under section 4940(e). Do	not complete this part.			<u> </u>
	nount in each column for each year;	see instructions before	making any entrie		
(a) Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitabl	e-use assets	<b>(d)</b> Distribution rati (col. (b) divided by c	
2018	679,387		13,271,342		0.051192
2017	643,104		13,203,853		0.048706
2016	649,584		13,120,549		0.049509
2015	494,722		11,934,704		0.041452
2014	520,387		10,720,565	1	0.048541
2 Total of line 1, column (	'		2		0.239400
number of years the four	o for the 5-year base period—divide ndation has been in existence if less	than 5 years . ´.	<u>3</u>		0.047880
	ncharitable-use assets for 2019 fron	•			13,199,137
<b>5</b> Multiply line 4 by line 3			<u>5</u>		631,975
	ent income (1% of Part I, line 27b)				3,773
					635,748
8 Enter qualifying distributi	ions from Part XII, line 4 ,		8		671,584
	eater than line 7, check the box in Pa	art VI, line 1b, and com	plete that part usin	ig a 1% tax rate. Se	e the Part VI
instructions.				Fo	orm <b>990-PF</b> (2019)

Pai	Statements R	egarding	Activities for Which	Form 4/20 May Be	<b>Requirea</b> (continuea)			
5a	During the year did the found	dation pay o	r incur any amount to:				Yes	No
	(1) Carry on propaganda, or	otherwise a	ttempt to influence legisl	ation (section 4945(e))?	☐ Yes 🗸	No		
	(2) Influence the outcome of	any specific	public election (see sect	tion 4955); or to carry				
	on, directly or indirectly,	any voter re	egistration drive?		· · 🗌 Yes 🗸	No		
	(3) Provide a grant to an ind	ividual for tı	avel, study, or other sim	ilar purposes?	☐ Yes ✓	No		
	(4) Provide a grant to an org	anization ot	her than a charitable, etc	, organization described	1			
	in section 4945(d)(4)(A)?				· · · Pes 🗸	No		
	(5) Provide for any purpose		-	* * * * * * * * * * * * * * * * * * * *				
	educational purposes, or		•		I YES VI	No		
b	If any answer is "Yes" to 5a(							
	Regulations section 53.4945				_	5b		
	Organizations relying on a cu							
С	If the answer is "Yes" to ques			•				
	tax because it maintained ex				· · L Yes L	No		
_	If "Yes," attach the statemen	-	=					
6a	Did the foundation, during th							
	a personal benefit contract?.				LI TES LY	No ch		NI -
D	Did the foundation, during th		premiums, directly or ind	ilrectly, on a personal be	nefit contract?	6b		No
7a	If "Yes" to 6b, file Form 8870		foundation a party to a r	robibited tay chalter tran	acaction?			
	At any time during the tax year.  If "Yes", did the foundation re				∟ Yes 🖭	No 7b		
8	Is the foundation subject to t		•			/ 5		
	excess parachute payment de							
					Y <sub>es</sub> Inagers, Highly Paid Er	No —		
Par	rt VIIII and Contractor		ers, Directors, Trust	tees, Foundation Ma	mayers, migniy Palu Ei	iipioyees	'	
1	List all officers, directors,	trustaas fo	undation managers ar	nd their compensation	See instructions			
-	List an officers, directors,		<b>b)</b> Title, and average	(c) Compensation (If	(d) Contributions to	( ) 5		
	(a) Name and address	`	hours per week	not paid, enter	employee benefit plans and	(e) Exper		
	NAC E NEDDE	TD116	devoted to position	-0-)	deferred compensation			
	GLAS E NEBBE V CHERRY	TRUS 5.00	IEE	4,900	0	1		0
	N. IA 50212							
.AND	ALL C REUTTER	TRUS	TEE	5,400	0	1		0
	VESTWOOD BLVD	5.00						
	IE, IA 50036	TRUS	TCC	4.000	0			
	MALLICOAT SE 2ND ST	5.00	166	4,900	<u> </u>	1		0
	EN, IA 50212							
L TR	ELOAR	TRUS	TEE	4,900	0			0
	V DIVISION ST EN, IA 50212	5.00						
2	Compensation of five high	est-paid en	nplovees (other than t	l hose included on line 1	  -see instructions). If no	 ne, enter "	NONE.	**
		рана			(d) Contributions to	,		
(a) [	Name and address of each em	ployee paid	(b) Title, and average hours per week	(c) Compensation	employee benefit	(e) Expen		
	more than \$50,000		devoted to position	(c) compensation	plans and deferred compensation	other al	lowance	es
IONE					compensation			
ION	<u>-</u>							
					+			
ota	I number of other employees p	azid over &E	L					
old	i namber of other employees p	Jaiu Over \$5	0,000			- 00	0 DE /	2010)

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional service	ces (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		•
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rel organizations and other beneficiaries served, conferences convened, research papers produ	evant statistical information such as the numbe uced, etc.	r of Expenses
1	,	
2		_
3		
4		
Part IX-B Summary of Program-Related Investments (see	instructions)	
Describe the two largest program-related investments made by the foundation during t		Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		<b>•</b>
Iotal. Add lines 1 through 3	<del> </del>	Form 900 PE (2010)

3

4

5

6

7

1a

1b

2

3a 3b

4

5

656,184

656.184

656.184

671,584

671.584

3.773

667.811

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Distributable amount before adjustments. Subtract line 2c from line 1. . . . . . . . . . . . . . . .

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

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

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

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

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

3

4 5

6

1

2

3

4

5

b

Part XII

e Excess from 2019.

Undistributed Income (see instructions)

Part XIII

Page **9** 

		<b>(a)</b> Corpus	(b) Years prior to 2018	<b>(c)</b> 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7				656,184
2	Undistributed income, if any, as of the end of 2019:				
а	Enter amount for 2018 only				
b	Total for prior years: 20, 20, 20				
3	Excess distributions carryover, if any, to 2019:				
а	From 2014				
b	From 2015				
С	From 2016				
d	From 2017				
	From 2018				
	Total of lines 3a through e	21,078			
4	Qualifying distributions for 2019 from Part				
	XII, line 4: ► \$671,584				
а	Applied to 2018, but not more than line 2a				
b	Applied to undistributed income of prior years (Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2019 distributable amount				656,184
е	Remaining amount distributed out of corpus	15,400			
5	Excess distributions carryover applied to 2019.			-	
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as				

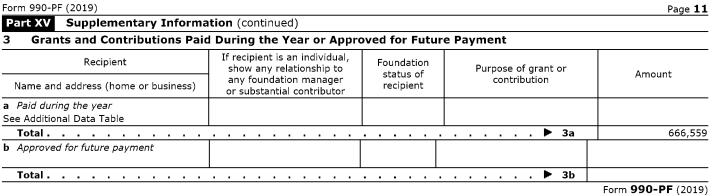
	required—see instructions)		
d	Applied to 2019 distributable amount		656,184
е	Remaining amount distributed out of corpus	15,400	
5	Excess distributions carryover applied to 2019.		
	(If an amount appears in column (d), the same amount must be shown in column (a).)		
6	Enter the net total of each column as indicated below:		
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	36,478	
b	Prior years' undistributed income. Subtract line 4b from line 2b		
c	Enter the amount of prior years' undistributed		

С	Treated as distributions out of corpus (Election required—see instructions)		
d	Applied to 2019 distributable amount.		656,184
е	Remaining amount distributed out of corpus	15,400	
5	Excess distributions carryover applied to 2019.		
	(If an amount appears in column (d), the same amount must be shown in column (a).)		
6	Enter the net total of each column as indicated below:		
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	36,478	
b	Prior years' undistributed income. Subtract line 4b from line 2b		
С	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 —see instructions		
е	Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions		
f	Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020		0
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by		

indicated below:			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	36,478		
<b>b</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 —see instructions			
e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions			
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020			0
<b>7</b> 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)			
<b>8</b> Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions)			

a	—see instructions			
е	Undistributed income for 2018. Subtract line			
	4a from line 2a. Taxable amount—see			
	instructions			
f	Undistributed income for 2019. Subtract			
	lines 4d and 5 from line 1. This amount must			0
_	be distributed in 2020			
7	Amounts treated as distributions out of			
	corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(q)(3) (Election may			
	be required - see instructions)			
8	Excess distributions carryover from 2014 not			
	applied on line 5 or line 7 (see instructions)			
9	Excess distributions carryover to 2020.			
	Subtract lines 7 and 8 from line 6a	36,478		
10	Analysis of line 9:			
а	Excess from 2015			
b	Excess from 2016	_		
С	Excess from 2017			
d	Excess from 2018 21,078	3		

	Private Operating Found	ations (see mstr	uccions and Part v	/11-A, question 9)		
1a	If the foundation has received a ruling or det foundation, and the ruling is effective for 20					
b	Check box to indicate whether the organizati	on is a private opera	ating foundation des	scribed in section $\Box$	] 4942(j)(3) or □	] 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(a) Tatal
	income from Part I or the minimum	(a) 2019	<b>(b)</b> 2018	(c) 2017	(d) 2016	(e) Total
	investment return from Part X for each year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
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					
С	"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					
D) =	Supplementary Information			foundation had	\$5,000 or more	in
	assets at any time during the		ructions.)			
1 a	Information Regarding Foundation Mana List any managers of the foundation who hav		than 2% of the tota	Lontributions receiv	ved by the foundatio	n
_	before the close of any tax year (but only if					••
	NONE					
b	List any managers of the foundation who own ownership of a partnership or other entity) of				arge portion of the	
	NONE		_			
2	Information Regarding Contribution, Gra	ant, Gift, Loan, Scl	holarship, etc., Pro	ograms:		
	Check here ▶ ☐ if the foundation only mak- unsolicited requests for funds. If the foundat other conditions, complete items 2a, b, c, ar	tion makes gifts, gra	ants, etc. to individu			
а	The name, address, and telephone number of	or e-mail address of	the person to whom	n applications should	be addressed:	
	DOUG NEBBE 713 W CHERRY OGDEN, IA 50212 (515) 275-2427					
b	The form in which applications should be sub	omitted and informa	tion and materials th	hey should include:		
c	Any submission deadlines:					
	NONE					
d	Any restrictions or limitations on awards, suc factors:	ch as by geographic	al areas, charitable f	fields, kinds of instit	utions, or other	
	PRIORITY IS GIVEN TO SOLICITORS FROM O	TENTRAL TOWA				



	g Activities				
Enter gross amounts unless otherwise indicated.		usiness income	Excluded by section		(e) Related or exempt
1 Program service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	function income (See instructions.)
a					
b					
c					
d e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
<b>3</b> Interest on savings and temporary cash investments			14	242.462	
4 Dividends and interest from securities			14	212,163 171,103	
5 Net rental income or (loss) from real estate:				•	
a Debt-financed property					
<b>b</b> Not debt-financed property					
6 Net rental income or (loss) from personal property 7 Other investment income.			15	1,356	
8 Gain or (loss) from sales of assets other than			13	1,550	
inventory					31,232
9 Net income or (loss) from special events:					
<ul><li>10 Gross profit or (loss) from sales of inventory</li><li>11 Other revenue: a</li></ul>					
b					
с					
d					
e					
<b>12</b> Subtotal. Add columns (b), (d), and (e). <b>. 13 Total.</b> Add line 12, columns (b), (d), and (e). <b>.</b>				384,622	31,232 415,854
(See worksheet in line 13 instructions to verify calcu			1	3	415,654
Part XVI-B Relationship of Activities to the	ne Accomplish	iment of Exem	pt Purposes		
<b>Line No.</b> Explain below how each activity for which the accomplishment of the foundation's e instructions.)					

Part XVII	Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations	
Did the same	-in-time discrete and in-the control in the control of the fellowing with the order of the control of the contr	Т

	art xvr	Exempt Organi	zations							
1	Did the o	organization directly or in tr than section 501(c)(3)	directly engage i organizations) o	n any of the r in section	e following with any 527, relating to po	other organization	n described in secti s?	on 501	Yes	No
а	Transfers	s from the reporting foun	dation to a nonc	haritable ex	empt organization	of:				
	<b>(1)</b> Cas	h						. 1a(1)		No
	(2) Oth	er assets						. 1a(2)		No
b	Other tra	ansactions:								
		es of assets to a nonchar	•	-				1b(1)		No
		chases of assets from a r						1b(2)		No
		ital of facilities, equipmen	•					1b(3)		No
		mbursement arrangemer						. 1b(4)		No
		ns or loan guarantees. ormance of services or m						. 1b(5)		No
		of facilities, equipment, r						. 10(6)		No No
	_	swer to any of the above	- ·	•						NO
	of the go	ods, other assets, or ser	vices given by th	e reporting	foundation. If the	foundation receive	d less than fair mar	ket value		
	in any tra	ansaction or sharing arra	ngement, show i	n column (d	<b>d)</b> the value of the	goods, other asse	ts, or services recei	ved.		
(a)	Line No.	(b) Amount involved	(c) Name of none	haritable exe	mpt organization	(d) Description of	transfers, transactions	and sharing arra	naemen:	ts
(4)	Eirie No.	(b) / imount involved	(c) Name of Hom	enantable exe	impe organizacion	(a) Description of	transfers, transactions	, and sharing are	ngemen	
2-	T- N 6			Ll		L	·			
Za		undation directly or indire	•	<i>'</i>	•			es 🗹 No		
		d in section 501(c) (othe		1(0)(3)) or	in section 527?			es 🖭 No		
D	ir res,	complete the following s  (a) Name of organization		1 (	<b>b)</b> Type of organizatio	n I	(c) Description	n of relationship		
		(a) Hame or organization	211		by Type or organization		(c) Bescription	rorrelationship		
	of	der penalties of perjury, my knowledge and belief	, it is true, corre							
Si.	gn  <sup>wh</sup>	ich preparer has any kno	owiedge.		1			May the IRS d		I
	ere L	*****			2020-11-05	*****		return	scuss th	iis
116						— <b>)</b> ——		with the prepa below	rer show	vn
	'	Signature of officer or t	rustee		Date	Title		(see instr.)	Yes 🗆	] No
		Drint/Type pressure	name   name	narer's Ci-	nature	D-t-		DTIN		
		Print/Type preparer's	maine   Pre	eparer's Sigi	nature	Date	Check if self-	PTIN		
		CURTOTORUES					employed ▶ □	P0107	1941	
Pa	nid	CHRISTOPHER JACOBSEN				2020-11-09				
Pr	epare		 KEL & ASSOCIAT	FS PC		1				
	e Onl	I II II I I I I I I I I I I I I I I I						Firm's EIN ▶42	-10172	.39
		Firm's address ▶ 81	.7 KEELER ST							
		ВС	OONE, IA 50036					Phone no. (515	) 432-8	3636
			,							

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (d) (b) (c) How acquired (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) Date acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D-Donation CONNELLSVILLE PA BOND Ρ 2015-06-17 2019-08-15 FED HOME LOAN BANK BOND Ρ 2017-04-04 2019-06-26 FLORIDA STATE BRD GOV BOND Р 2015-06-15 2019-07-05 GENUINE PARTS CO Ρ 2015-08-03 2019-04-09 HOME DEPOT Ρ 2016-03-09 2019-10-11 Ρ ISHARES CORE S&P 500 2015-06-17 2019-09-13 Ρ 2019-09-05 MERCER COUNTY NJ BOND 2015-06-19 Р 2019-08-06 PFIZER INC 2016-04-22 PROCTER & GAMBLE CO Ρ 2017-03-01 2019-01-18 PUTNAM ULTRA SHORT DURATION Ρ 2015-06-01 2019-05-20 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 150,000 166,478 -16.478400,000 400,000 300,000 343,884 -43,884 22,791 17,755 5,036 23,423 3,674 19,749 98,093 45,075 53,018 220,000 247,423 -27,423 73,632 65,703 7,929 45,656 41,620 4,036 450,000 450,000 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col. (h) gain minus col. (k), but not less than -0-) or (i) F.M.V. as of 12/31/69 Adjusted basis Excess of col. (i) **(I)** Losses (from col.(h)) (j) as of 12/31/69 (k) over col. (j), if any -16,478-43,8845,036 19,749 53,018 -27,423 7,929 4,036

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (b) (c) (d) (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) How acquired Date acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D—Donation TRAVELERS COS INC 2015-06-17 2019-10-11 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss)

(0) 01000 00100 price	(f) (or allowable)		(h) (e) plus (f) minus (g)		
53,675		37,104	16,571		
form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I					
Complete only for assets show	Gains (Col. (h) gain minus				
(i) F.M.V. as of 12/31/69	Adjusted basis <b>(j)</b> as of 12/31/69	Excess of col. (i) (k) over col. (j), if any	col. (k), but not less than -0-) <b>or</b> (I) Losses (from col.(h))		

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 status of contribution

Purpose of grant or contribution

recipient

▶ 3a

666,559

any foundation manager

or substantial contributor

Name and address (home or business)

OGDEN, IA 50212

a Paid during the year			
ACCESS ASSAULT CARE 1525 AIRPORT RD AMES, IA 50014	EXEMPT	CHARITABLE	4,000
ADAPTIVE SPORTS IOWA 1421 S BELL AVE 104	EXEMPT	CHARITABLE	3,000

ADAPTIVE SPORTS IOWA 1421 S BELL AVE 104 AMES, IA 50010	EXEMPT	CHARITABLE	3,000
BATTIN HERITAGE ASSOCIATION PO BOX 459	EXEMPT	CHARITABLE	4,647

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 status of contribution

Recipient

Recipient

If recipient is an individual, show any relationship to status of contribution

recipient

666,559

▶ 3a

any foundation manager

Total .

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
BOONE COUNTY AG - EXTENSION 1327 SE MARSHALL ST BOONE, IA 50036		EXEMPT	CHARITABLE	5,654
BOONE COUNTY COMMUNITY SERVICES 106 S MARSHALL ST STE A BOONE, IA 50036		EXEMPT	CHARITABLE	13,500
BOONE COUNTY HOSPITAL 1014 UNION ST BOONE, IA 50036		EXEMPT	CHARITABLE	61,415

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

BOONE COUNTY HOSPITAL	EXEMPT	CHARITABLE	60,000
FOUNDATION 1014 UNION ST			
BOONE, IA 50036			

DNE, IA 50036				
DNE COUNTY SHERIFF'S OFFICE 9 W MAMIE EISENHOWER DNE, IA 50036		PUBLIC	CHARITABLE	
· · · · · · · · · · · · · · · · · · ·	·	· · · · · · · · · · · · · · · · · · ·		

BOONE COUNTY SHERIFF'S OFFICE 1019 W MAMIE EISENHOWER BOONE, IA 50036	PUBLIC	CHARITABLE	12,730
BOONE IOWA WREATHS ACROSS AMERICA	EXEMPT	CHARITABLE	4,000

BOONE, IA 50036			
BOONE IOWA WREATHS ACROSS AMERICA 1315 MOINGONA RD BOONE IA 50036	EXEMPT	CHARITABLE	4,000

BOONE IOWA WREATHS ACROSS	EXEMPT	CHARITABLE	4,00
AMERICA			
1315 MOINGONA RD			
BOONE, IA 50036			

Total	 	▶ 3a	666,559
BOONE, IA 50036			
1315 MOINGONA RD			

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			
BOONE PIONEER CITIZENS 1112 STORY ST	EXEMPT	CHARITABLE	4,156

BOONE, IA 50036			
BOONE SCHOOL DISTRICT500 7TH ST BOONE, IA 50036	PUBLIC	CHARITABLE	5,000
CAMP EIDECAMD HANTESA	EVEMPT	CHARITARIE	10.000

BOONE SCHOOL DISTRICT500 7TH ST BOONE, IA 50036	PUBLIC	CHARITABLE	5,000
CAMP FIRECAMP HANTESA 1450 ORIOLE RD BOONE, IA 50036	EXEMPT	CHARITABLE	10,000

CAMP FIRECAMP HANTESA 1450 ORIOLE RD BOONE, IA 50036	EXEMPT	CHARITABLE	10,000
Total	 	▶ 3a	666,559

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 husiness)

Hame and dadress (nome or business)	or substantial contributor			
a Paid during the year				
CAMP HERTKO HOLLOW INC		EXEMPT	CHARITARIE	5.000

101 LOCUST ST DES MOINES, IA 50309	EXEMPT	CHARITABLE	5,000
CITY OF BOXHOLM104 ELM ST	PUBLIC	CHARITABLE	22,387

CITY OF BOXHOLM104 ELM ST BOXHOLM, IA 50040	PUBLIC	CHARITABLE	22,387
CITY OF OGDEN513 W WALNUT	PUBLIC	CHARITABLE	20,700

BOXHOLM, IA 50040	PUBLIC	CHARITABLE	22,387
CITY OF OGDEN513 W WALNUT	PUBLIC	CHARITABLE	20,700

BOXITOEIT, IX SOUTO			
CITY OF OGDEN513 W WALNUT OGDEN, IA 50212	PUBLIC	CHARITABLE	20,700

OGDEN, IA 50212	1 05210	OTH WATER	20,700
Total	 	▶ 3a	666,559

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

or substantial contributor.

Name and address (home or business)

BOONE, IA 50036 Total .

	or substantial contributor			
a Paid during the year				
COMMUNITY UNITED METHODIST CHURCH 337 SW 2ND ST OGDEN, IA 50212		EXEMPT	CHARITABLE	21,000
FRIENDS OF THE LEDGES 103 S FREMONT ST		EXEMPT	CHARITABLE	10,000

recipient

▶ 3a

FRIENDS OF THE LEDGES 103 S FREMONT ST BOONE, IA 50036	EXEMPT	CHARITABLE	10,

FRIENDS OF THE LEDGES 103 S FREMONT ST BOONE, IA 50036	EXEMPT	CHARITABLE	10,000
GENESIS DEVELOPMENT927 8TH ST	EXEMPT	CHARITABLE	13,445

FRIENDS OF THE LEDGES	EXEMPT	CHARITABLE	10,0
103 S FREMONT ST			
BOONE, IA 50036			

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business)

l	Name and address (nome or business)	or substantial contributor	·	
I	a Paid during the year			
Г				

LUTD DEN A CDECOCCE LINUTON AND			
HABITAT FOR HUMANITY720 STORY ST BOONE, IA 50036	EXEMPT	CHARITABLE	10,000

HIDDEN ACRES3837 UNION AVE DAYTON, IA 50530	EXEMPT	CHARITABLE	

Total

DAYTON, IA 50530	EXEMP	CHARITABLE	5,50
HIRTA TRANSIT2824 104TH ST	EXEMPT	CHARITABLE	58.70

DATTON, IA 30330			
HIRTA TRANSIT2824 104TH ST	EXEMPT	CHARITABLE	58,792
LIDDANIDALE TA EGGGG			i

IRTA TRANSIT2824 104TH ST	EXEMPT	CHARITABLE	58,79
PRANDALE TA 50322			

RBANDALE, IA 50322	IN THE WISH LOCAL TO THE ST		CI II (I CI II CELL	1 30,7 5
	RBANDALE, IA 50322			

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

recipient

▶ 3a

666,559

	or substantial contributor			
a Paid during the year				
IMPACT COMMUNITY ACTION PARTNERSHIP 606 GREENE ST BOONE, IA 50036		EXEMPT	CHARITABLE	21,000
			_	

BOONE, IA SUUSO			
IOWA ARBORETUM1875 PEACH AVE MADRID, IA 50156	EXEMPT	CHARITABLE	
IOWA RAILROAD HISTORICAL SOCIETY	EXEMPT	CHARITABLE	

any foundation manager

or substantial contributor

Name and address (home or business)

Total .

IOWA ARBORETUM1875 PEACH AVE MADRID, IA 50156	EXEMPT	CHARITABLE	4,250
IOWA RAILROAD HISTORICAL SOCIETY 225 10TH ST	EXEMPT	CHARITABLE	20,000
BOONE IN E0026			

MADRID, IA 50156				
IOWA RAILROAD HISTORICAL S 225 10TH ST BOONE, IA 50036	SOCIETY	EXEMPT	CHARITABLE	20,00

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

219 6TH ST	a Paid during the year			
AMES, IA 50010		EXEMPT	CHARITABLE	5,000

AMES, 1A 50010			
OGDEN COMMUNITY SCHOOLS 732 WEST DIVISION ST OGDEN, IA 50212	PUBLIC	CHARITABLE	144,000

732 WEST DIVISION ST OGDEN, IA 50212	POBLIC	CHARITABLE	144,000
OGDEN LIONS CLUB241 W WALNUT ST	EXEMPT	CHARITABLE	6,383

732 WEST DIVISION ST OGDEN, IA 50212			
OGDEN LIONS CLUB241 W WALNUT ST	EXEMPT	CHARITABLE	6,38

OGDEN, IA 50212			
OGDEN LIONS CLUB241 W WALNUT ST OGDEN, IA 50212	EXEMPT	CHARITABLE	6,383

OGDEN LIONS CLUB241 W WALNUT ST	EXEMPT	CHARITABLE	6,383
OGDEN, IA 50212			

Total .

666,559

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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

	or substantial contributor			
a Paid during the year				
OGDEN MUSIC BOOSTERS		EXEMPT	CHARITABLE	1,500

OGDEN, IA 50212			
OGDEN SCHOLARSHIP FOUNDATION 512 SE 2ND ST	EXEMPT	CHARITABLE	2,
OCDEN IN FORM			

OGDEN SCHOLARSHIP FOUNDATION 512 SE 2ND ST OGDEN, IA 50212	EXEMPT	CHARITABLE	2,000
QUESTERS 12471240 JADE PLACE	EXEMPT	CHARITABLE	1,500

512 SE 2ND ST OGDEN, IA 50212			
QUESTERS 12471240 JADE PLACE OGDEN, IA 50212	EXEMPT	CHARITABLE	1,500

OGDEN, IA 50212			
QUESTERS 12471240 JADE PLACE OGDEN, IA 50212	EXEMPT	CHARITABLE	1,500

666,559

■ 3a

QUESTERS 12471240 JADE PLACE	EXEMPT	CHARITABLE	1,50
OGDEN, IA 50212			

Total .

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

	or substantial contributor			
a Paid during the year				
SALVATION ARMY503 BENTON ST BOONE, IA 50036		EXEMPT	CHARITABLE	30,000
STAN FRIESEN SENIOR TRIP		EXEMPT	CHARITABLE	30,000

STAN FRIESEN SENIOR TRIP 732 W DIVISION ST OGDEN, IA 50212	EXEMPT	CHARITABLE	30,0
YMCA OF GREATER DES MOINES	EXEMPT	CHARITABLE	30,0

Total .

OGDEN, IA 50212			
YMCA OF GREATER DES MOINES 1192 166TH DR BOONE, IA 50036	EXEMPT	CHARITABLE	30,000

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 status of contribution

Amount contribution

raciniant

666,559

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
YOUTH & SHELTER SERVICES		EXEMPT	CHARITABLE	16,000

YOUTH & SHELTER SERVICES
420 KELLOGG AVE
AMES, IA 50010

EXEMPT CHARITABLE

Total.

any foundation manager

efile GRAPHIC print - DO NO	T PROCESS	As Filed D	ata -		DLN: 93491321060510	
TY 2019 Accounting Fees Schedule						
	Name:	LEONARD	A GOOD TESTAM	ENTARY TRUST		
	EIN: 42-6453227					
		TZ-0-332		+		
Category	Am	ount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
ACCOUNTING FEES - OP		6,875	1,000			

efile GRAPHIC	print - DO NOT PROCESS	As Filed Data -	DLN: 9349132106051	LO

# **TY 2019 Investments Corporate Bonds Schedule**

Name: LEONARD A GOOD TESTAMENTARY TRUST

FTN: 42-6453227

Investments Corporate Bonds Schedule  Name of Bond	End of Year Book	End of Year Fair
	Value	Market Value
BRIDGEPORT CT BOND - ACQ 6/18/15 6.5	117,037	102,676
CHESAPEAKE VA WTR BOND - ACQ 6/19/15	228,556	203,704
CLARK CNTY NV BOND - ACQ 11/18/16 6.	175,986	157,847
COCOA FL WTR & SWR BOND - ACQ 6/20/1	121,362	104,368
COLORADO ST BLDG BOND - ACQ 7/16/15	295,636	263,268
CONNELLSVILLE PA BOND - ACQ 6/17/15		
CORPUS CHRISTI TX BOND - ACQ 7/15/15	343,531	358,669
FED HOME LN BANK - ACQ 4/4/17		
FED HOME LOAN BANK 7/9/19 1.5%	197,650	199,301
FEDERAL HOME LOAN BANKS BOND - ACQ 5	274,104	270,008
FLORIDA ST BRD GOV BOND - ACQ 6/15/1		
FOUNTAIN VY CA BOND - ACQ 8/24/15 3.	249,547	267,785
LEE CO AL BOND - ACQ 7/21/15 5.25%	134,561	121,057
MERCER CNTY NJ BOND - ACQ 6/19/15 6.		
METROPOLITAN ST COLLEGE BOND - ACQ 7	167,341	152,616
NEW YORK BUILD AMERICA BOND - ACQ 11	120,000	120,437
NEW YORK ST MUN BOND - ACQ 6/19/15 6	184,829	185,506
NORTH TEXAS BOND - 10/13/17 8.910%	221,226	221,289
NORTHERN IL UNIV BOND - ACQ 6/21/16	355,678	354,494
OCEANSIDE CA BOND - ACQ 8/14/15 3.5%	160,002	167,592

**Investments Corporate Bonds Schedule** Name of Bond

OHIO ST WTR DEV BOND - ACQ 6/11/15 6 PEORIA IL BOND - ACQ 6/17/15 6.0%

PORT ST LUCIE BOND - ACQ 6/12/15 7.1

ST CHARLES CNTY MO BOND - ACQ 6/12/1

WESTERN MUN WTR DIST BOND - ACO 6/11

VERNON CA BOND - ACO 1/19/17

Value	Market Value
111,967	101,7
180,449	160,0

End of Year Book

153,607

138,740

230,023

241,455

**End of Year Fair** 

101,777

160,000

152,379

122,791

219,542

## **TY 2019 Investments Corporate Stock Schedule**

Name: LEONARD A GOOD TESTAMENTARY TRUST

**EIN:** 42-6453227

**Investments Corporation Stock Schedule** 

Investments Corporation Stock Schedule  Name of Stock	End of Year Book Value	End of Year Fair Market Value
3M CO 250 SH - ACQ 6/17/15	38,770	44,105
ALLIANT ENERGY 4,380 SH - ACQ 6/17/1	254,609	479,347
ALTRIA GROUP 1,000 SH - ACQ 4/25/16	61,514	49,910
AMERICAN FD EURO FND 6,465 SH	282,561	358,569
AT&T INC 1,300 SH - ACQ 1/8/19	40,737	50,804
AT&T INC 2,000 SH - ACQ 8/24/15	64,417	78,160
AT&T INC 500 SH - ACQ 4/22/16	19,372	19,540
BLACKROCK INC 400 SH - ACQ 8/13/15	134,672	201,080
BOEING 750 SH - ACQ 5/16/16	100,479	244,320
CAPITAL WORLD GR & IN FD 6,778	288,907	353,903
CARDINAL HEALTH INC 1,000 SH - ACQ 1	78,788	50,580
CHEVRON CORP 500 SH - ACQ 6/17/15	48,045	60,255
CISCO SYSTEMS 1,500 SH - ACQ 4/20/17	48,720	71,940
CLOROX 297 SH	45,823	45,601
CONOCOPHILLIPS 3,000 SH - ACQ VARIOU	163,006	195,090
CONSTELLATION BRANDS INC 200 SH - AC	28,790	37,950
EXELON CORP 3,000 SH - ACQ 7/1/16	104,035	136,770
EXXONMOBILE 275 SH - ACQ 6/17/15	22,652	19,190
GENUINE PARTS CO 1,000 SH - ACQ 8/3/	71,019	84,984
HOME DEPOT 100 SH - ACQ 3/9/16	21,608	21,838
HOME DEPOT 500 SH - ACQ 6/17/15	56,035	109,190
ISHARES TR CORE S&P 500 1,351 SH - A	304,732	436,697
ISHARES TR RUSSELL 2000 920 SH - ACQ	115,212	152,416
ISHARES TR RUSSELL MIDCAP 3,920 SH -	167,737	233,710
JOHNSON & JOHNSON 850 SH - ACQ VARIO	63,251	123,990
JP MORGAN CHASE 650 SH - ACQ 6/17/15	44,246	90,610
JP MORGAN CHASE 900 SH - ACQ 8/11/16	59,455	125,460
KINDER MO 4,000 SH ACQ 7/28/15	108,714	84,680
OGDEN TELEPHONE CO 600 SHARES (D) -	180,000	2,380,654
PFIZER 2,000 SH - ACQ 4/22/16		

Name of Stock

**Investments Corporation Stock Schedule** 

Name of Stock	End of Year Book Value	End of Year Fair Market Value
PROCTER & GAMBLE 100 SH - ACQ 6/17/1		
PROCTER & GAMBLE 400 SH - ACQ 3/1/17		
PUTNAM SHORT DUR FND 55,903 SH	562,380	562,380
ROYAL BANK CANADA 700 SH - ACQ 4/17		
ROYAL BANK CANADA 700 SH 4-20-17	49,938	55,440
SCHLUMBERGER LTD 350 SH - ACQ 6/17/1	29,505	14,070
T ROWE PRICE OVER FD 29,795 SH	252,948	333,411
THORNBURG INV INC BUILDER FND 13,326	250,000	301,039
TRAVELERS COS INC 375 SH - ACQ 6/17/		
TRUIST CP 1,000 SH - ACQ 8/25/15	36,087	56,320
UNITED TECH CORP 250 SH - ACQ 6/17/1	27,340	37,440
VERIZON COMM INC 450 SH - ACQ 6/17/1	21,168	27,630
WELLS FARGO & CO 1,350 SH - ACQ 6/17	76,194	72,630
WEYERHAEUSER CO 2,800 SH - ACQ 9/26/	84,116	84,560
WILLIAMS SONOMA 1,000 SH - ACQ 5/31/	52,224	73,440

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TY 2019 Investments - Other Schedule						

250,000

13,060

250,000

13,060

Name: LEONARD A GOOD TESTAMENTARY TRUST

**EIN:** 42-6453227

ANNUITY - UNITED LIFE INS

TEXAS GAS RIGHTS (D) - ACQ 2/1/90

e End of Year Fair Market Value
<u>ا</u>

AT COST

AT COST

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DL	N: 93491321060510			
TY 2019 Other Expenses Schedule							
Name:	LEONARD A GO	OD TESTAMENTA	RY TRUST				
EIN:	<b>EIN:</b> 42-6453227						
Other Expenses Schedule							
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
EXPENSES							
ROYALTY EXPENSE - INV	329	329					
OFFICE EXPENSE - OP	234						
INVESTMENT FEES - INV	23,853	23,853					

Description

efile GRAPHIC print - DO NOT PROCESS

Name: LEONARD A GOOD TESTAMENTARY TRUST

**EIN:** 42-6453227

OIL ROYALTIES

Other Income Schedule

As Filed Data -

Revenue And

1,356

**Expenses Per Books** 

Net Investment Income

1,356

DLN: 93491321060510

Adjusted Net Income

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DL	N: 93491321060510		
TY 2019 Taxes Schedule						
Name: LEONARD A GOOD TESTAMENTARY TRUST						
<b>EIN:</b> 42-6453227						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
TAXES: CO - INV	71	71				
TAXES: FOREIGN - INV	3,294	3,294				
TAXES: PRIOR YEAR - OP	2,000					
TAXES: CURRENT YEAR - OP	9,000					

# Leonard A. Good Trust

### **TRUSTEES**

J. Dale Burman, Chairman Douglas E. Nebbe, Secretary Jean Mallicoat, Treasurer Randall C. Reutter

## **APPLICATION FOR GRANT**

We do hereby submit the following information in support of our request for a grant from the Leonard A. Good Trust:

1.	Name of Organization:	
2.	Address:	
3.	Email address of contact	
4.	Identification Number:	
5.	Tax Exempt Status:	[Enclose one copy of IRS 501(c)3 letter]
6.	Amount Requested:	
7.	How funds are to be used:	
8.	Where funds are to be used:	
9.	description of the project for v sources of funding, and a dollar	brief statement of the organization's history and objectives and a which the grant is being requested. State a total cost of the project, other ar amount requested from the Leonard A. Good Trust. Please include a have received from vendor/suppliers to provide information for the dollar
10.	If the grant is awarded, you w	ill be requested to furnish a copy of the purchase invoices.
11.	Required Documentation:	Original plus four copies of signed Application: 5 TOTAL Original plus four copies of Attachments (Item 9 above): 5 TOTAL
	Date:	Signature:  (Applicant representing the organization)
		Title:  (Corporate Officer, School Superintendent, City Mayor or Clerk)

Address and mail all correspondence to: Leonard A. Good Trust, P.O. Box 36, Ogden, Iowa 50212 Questions? Email: lagoodtrust@netins.net