# Form **990-PF**

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990PF for instructions and the latest information. Department of the Treasury Internal Revenue Service

|         | of foundation  |                               | , and ending                            | A Employer identification  | n number                                     |
|---------|--|-------------------------------|---|--|--|
|         | RED D. RUBLE FAMILY CHARITABLE   |                               |   | 87.00  |  |
| FOU     | NDATION  |                               |   | 45-2153676   |  |
| Numbe   | and street (or P.O. box number if mail is not delivered to street as                                     | ddress)                       | Room/suite                              | B Telephone number   |  |
| 754     | 342ND ST   |                               |   | 641-357-2700   |  |
| City or | town, state or province, country, and ZIP or foreign po  | ostal code                    |   | C If exemption application is  | pending, check here                          |
|         | LONTOWN, IA 50444-7511   |                               |   | Paramatan Marana da Marana |  |
|         | ck all that apply: Initial return  | Initial return of a for       | rmer public charity                     | D 1. Foreign organizatio   | ns, check here                               |
| u one   | Final return   | Amended return                |   | The spot was seed in   | 24 12/15/25                                  |
|         | Address change   | Name change                   |   | <ol><li>Foreign organizations n<br/>check here and attach</li></ol>  | neeting the 85% test,<br>computation         |
| H Che   | ck type of organization: X Section 501(c)(3) ex  |                               | 377-3013-801                            | E If private foundation s  | tatus was terminated                         |
|         |  | Other taxable private foundat | tion                                    | under section 507(b)(  | 1)(A), check here                            |
|         | market value of all assets at end of year J Accounti   |                               | Accrual                                 | F If the foundation is in  | a 60-month termination                       |
|         | <u> </u>   | ther (specify)                |   |  | 1)(B), check here                            |
| ▶\$     | 1,265,693. (Part I, colun  | nn (d), must be on cash basis | s.)                                     |  |  |
| Pari    | Analysis of Revenue and Expenses   | (a) Revenue and               | (b) Net investment                      | (c) Adjusted net   | (d) Disbursements<br>for charitable purposes |
|         | (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) | expenses per books            | income                                  | income   | (cash basis only)                            |
| $\neg$  | 1 Contributions, gifts, grants, etc., received   | 60,000.                       |   | N/A  |  |
|         | 2 Check if the founcation is not required to attach Sch. 8   |                               |   |  |  |
|         | Interest on savings and lemporary cash investments   |                               |   |  |  |
|         | 4 Dividends and interest from securities   | 1,482.                        | 1,482                                   |  | STATEMENT 1                                  |
|         | 5a Gross rents   |                               |   | Section and an appropriate and |  |
|         | b Net rental income or (loss)  |                               |   |  |  |
|         | 6a Net gain or (loss) from sale of assets not on line 10   | 1,812.                        |   |  |  |
|         | . Gross sales price for all 22 251   |                               |   |  |  |
| evenue  | b assets on line 6a  |                               | 1,812                                   |  |  |
| ~       | 8 Net short-term capital gain  |                               |   |  |  |
|         | 9 Income modifications   |                               |   |  |  |
|         | Gross sales less returns 0 a and allowances  |                               |   |  |  |
|         | b Less: Cost of goods sold   |                               |   |  |  |
|         | c Gross profit or (loss)   |                               |   |  |  |
| - 1     | 1 Other income   |                               |   |  |  |
| 0.0     | 2 Total. Add lines 1 through 11  | 63,294.                       | 3,294                                   |  |  |
| -       | 3 Compensation of officers, directors, trustees, etc.  | 0.                            | 0                                       |  | 0  |
|         | 4 Other employee salaries and wages  |                               |   | 5.22   |  |
| 4       | 5 Pension plans, employee benefits   |                               |   |  |  |
| 70.5    | 6a Legal fees  |                               | (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) |  |  |
| seuses  | b Accounting fees STMT 2   | 1,136.                        | 568                                     | •  | 568  |
|         | c Other professional fees STMT 3   | 1,263.                        | 1,263                                   | -  | 0  |
| e<br>E  | 7 Interest   |                               |   |  |  |
| ativ    | 8 Taxes STMT 4   | 20.                           | 0                                       |  | 0  |
| str     | 9 Depreciation and depletion   |                               |   |  |  |
|         | 20 Occupancy   |                               |   |  |  |
| d d     | 21 Travel, conferences, and meetings   |                               |   |  | 7  |
| p.      | 22 Printing and publications   |                               |   |  |  |
| g ar    | 23 Other expenses  |                               |   |  |  |
| Ē.      | 24 Total operating and administrative  |                               |   |  | 02   |
| era     | expenses. Add lines 13 through 23  | 2,419.                        | 1,831                                   | •  | 568  |
| Ö,      | 25 Contributions, gifts, grants paid   | 5,000.                        |   |  | 5,000  |
|         | 26 Total expenses and disbursements.   |                               |   |  | 9 <u>2</u> 5 30,880                          |
|         | Add lines 24 and 25  | 7,419.                        | 1,831                                   |  | 5,568  |
| -       | 27 Subtract line 26 from line 12:  | 27                            |   |  |  |
|         | Excess of revenue over expenses and disbursements  | 55,875.                       |   |  |  |
|         | b Net investment income (if negative, enter -0-)   |                               | 1,463                                   |  |  |
|         | c Adjusted net income (if negative, enter -0-)   |                               |   | N/A  |  |

|                  | No unostan | Attached schedules and amounts in the description   | Beginning of year   | Ena oi                                       | -   |
|------------------|------------|---|---|--|---|
| Pa               | ırt I      | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. | (a) Book Value  | (b) Book Value                               | (c) Fair Market Value   |
| T                | 1          | Cash - non-interest-bearing   | 9,354.  | 63,198.                                      | 63,198.   |
|                  |            | Savings and temporary cash investments  | 1,550.  | 1,288.                                       | 1,288.  |
|                  | -          | Accounts receivable   |   |  |   |
|                  |            | Less; allowance for doubtful accounts   |   |  |   |
|                  |            |   |   |  |   |
|                  |            | Pledges receivable ►  Less; allowance for doubtful accounts ►   |   | STANDAR AND STREET, STANDARD OF THE STANDARD | **************************************  |
|                  |            | 있다. 2011년 1월 2015년 1일   |   |  |   |
|                  | 5          | Grants receivable   |   |  |   |
|                  | 6          | Receivables due from officers, directors, trustees, and other   |   |  |   |
|                  |            | disqualified persons  |   |  |   |
|                  | 7          | Other notes and loans receivable  |   |  |   |
|                  |            | Less: allowance for doubtful accounts   |   |  |   |
| ts               | 8          | Inventories for sale or use   |   |  |   |
| Assets           | 9          | Prepaid expenses and deferred charges   |   |  |   |
| Ä                | 10a        | Investments - U.S. and state government obligations   |   |  |   |
|                  | b          | Investments - corporate slock   |   |  |   |
|                  | C          | Investments - corporate bonds   |   |  |   |
|                  | 11         | Investments - land, buildings, and equipment: basis   |   |  | The same of the same of the same  |
|                  |            | Less: accumulated depreciation  |   |  |   |
|                  | 12         | Investments - mortgage loans  |   |  | 1 001 007   |
|                  | 13         | Investments - other STMT 5  | 876,161.  | 878,454.                                     | 1,201,207.  |
|                  |            | Land, buildings, and equipment; basis   |   |  |   |
|                  |            | Less: accumulated depreciation  |   |  |   |
|                  | 15         | Other assets (describe  | With the second |  |   |
|                  | 100        | Total assets (to be completed by all filers - see the   |   |  |   |
|                  | 10         | instructions. Also, see page 1, item I)   | 887,065.  | 942,940.                                     | 1,265,693.  |
| _                | 17         | Accounts payable and accrued expenses   |   |  |   |
|                  | 18         | Grants payable  |   |  |   |
|                  |            | Deferred revenue  |   |  |   |
| es               | 19         | Loans from officers, directors, trustees, and other disqualified persons  |   |  |   |
| Liabilities      | 0.000      |   |   |  |   |
| <u>.</u>         |            | Mortgages and other notes payable  Other liabilities (describe  |   |  |   |
| _                | 22         | Other liabilities (describe   |   |  |   |
|                  |            | T. J.   | 0.  | 0.   |   |
| _                | 23         | Total liabilities (add lines 17 through 22)   |   |  |   |
|                  |            | Foundations that follow FASB ASC 958, check here  |   |  |   |
| es               |            | and complete lines 24, 25, 29, and 30.  |   |  |   |
| alances          |            | Net assets without donor restrictions   |   |  |   |
| 3ak              |            | Net assets with donor restrictions  |   |  |   |
| Jd E             |            | Foundations that do not follow FASB ASC 958, check here   |   |  |   |
| Assets or Fund B |            | and complete lines 26 through 30.   | 0.  | 0.   |   |
| ō                | 26         | Capital slock, trust principal, or current funds  |   | 0.   |   |
| ets              | 27         | Paid-in or capital surplus, or land, bldg., and equipment fund  | 225 245   | 942,940.                                     |   |
| 55               | 28         | Retained earnings, accumulated income, endowment, or other funds  | 887,065.  | 942,940.                                     | THE RESIDENCE OF THE PROPERTY |
| Net /            | 29         | Total net assets or fund balances   | 887,005.  | 312,310.                                     |   |
| Ž                |            |   | 007 055   | 942,940.                                     |   |
| _                | 30         |   |   | 342,340.                                     |   |
| F                | art        | III Analysis of Changes in Net Assets or Fund B   | Balances  |  |   |
| _                | 77.00      |   |   |  |   |
| 1                | Tota       | al net assets or fund balances at beginning of year - Part II, column (a), lin                                  | e 29  | 100  | 887,065.  |
|                  | (mı        | ist agree with end-of-year figure reported on prior year's return)  |   |  | 55.035  |
| 2                | Ent        | er amount from Part I, line 27a   |   | 2  | 0   |
| 3                | Oth        | er increases not included in line 2 (itemize)   |   | 3  | 0.40 0.40   |
| 4                |            | l lines 1, 2, and 3   |   | 4  |   |
| 5                | Dec        | reases not included in line 2 (itemize)   |   | 5  | 212 212   |
| 6                | Tot        | al net assets or fund balances at end of year (line 4 minus line 5) - Part II,                                  | column (b), line 29   | 6  |   |
| -                | : 01       |   | XC-20   |  | Form <b>990-PF</b> (2020)   |

45-2153676

| Part IV   Capital Gains a       | nd Losses for Tax on In   | vestment Income                                 |  |   |                                  |
|---------------------------------|---|---|--|---|----------------------------------|
| (a) List and describe t         | (a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) |   | (b) How acquired<br>P - Purchase<br>D - Donation | (c) Date acquired (mo., day, yr.)               | (d) Date sold<br>(mo., day, yr.) |
| a PUBLICLY TRADED SECURITIES P  |   |   |  |   |                                  |
| b CAPITAL GAINS DIVIDEN         | 0.00  |   |  |   |                                  |
| C                               |   | *   |  |   |                                  |
| d                               |   |   |  |   |                                  |
| e                               |   |   |  |   |                                  |
| (e) Gross sales price           | (f) Depreciation allowed<br>(or allowable)  | (g) Cost or other basis<br>plus expense of sale |  | (h) Gain or (loss<br>((e) plus (f) minus        | (g))                             |
| a 21,338.                       |   | 20,   | 439.   |   | 899.                             |
| b 913.                          |   |   |  |   | 913.                             |
| c                               |   |   |  |   |                                  |
| d                               |   |   |  |   |                                  |
| e                               |   |   |  |   |                                  |
| Complete only for assets showin | g gain in column (h) and owned by   | the foundation on 12/31/69.                     |  | (I) Gains (Col. (h) gain                        | minus                            |
| (i) FMV as of 12/31/69          | (j) Adjusted basis<br>as of 12/31/69  | (k) Excess of col. (i)<br>over col. (j), if any |  | col. (k), but not less tha<br>Losses (from col. | n -0-) <b>or</b><br>(h))         |
| 70.00                           |   |   |  |   | 899.                             |
| <u>a</u>                        |   |   |  |   | 913.                             |
| b                               |   |   |  |   |                                  |
| C                               |   |   |  |   |                                  |
| d<br>e                          |   |   |  |   | 1/3/                             |
| Part I, line 8                  | nder Section 4940(e) for<br>ON 4940(e) REPEALED (   | Reduced Tax on Ne                               | t Investment I                                   | COMPLETE.                                       |                                  |
| (a)                             | (b)<br>Reserved   |   | (c)<br>Reserved                                  | R   | (d)<br>eserved                   |
| Reserved                        | nesciveu  |   | 1,000,100  |   |                                  |
| Reserved                        |   |   |  |   |                                  |
| 2 Reserved                      |   | 1995-62   |  | 2   |                                  |
| Z Neserveu                      |   |   |  |   |                                  |
| 3 Reserved                      |   |   |  | 3   |                                  |
| 4 Reserved                      |   |   |  | 4   |                                  |
| 5 Reserved                      |   |   |  | 5   |                                  |
|                                 |   |   |  |   |                                  |
| 6 Reserved                      |   |   |  |   |                                  |
|                                 |   |   |  |   |                                  |
| 7 Reserved 8 Reserved           |   |   |  | 6   | Form <b>990-PF</b> (2020         |

|      | JERRED D. RUBLE FAMILY CHARITABLE  | 5-21536               | 76      | i e      | lace 4 |
|------|--|-----------------------|---------|----------|--------|
|      |  |                       |         | P        | age 4  |
|      | tVI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see in  | Jacobie               |         |          |        |
| 1a   | Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.  |                       |         |          |        |
|      | Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)  | 1                     |         | - STANKE | 20.    |
| b    | Keserve0   |                       |         |          |        |
|      | All other domestic foundations enter 1.39% of line 27b. Exempt foreign organizations, enter 4%   |                       |         |          |        |
|      | of Part I, line 12, col. (b)   | 2                     |         |          | 0.     |
|      | Tax under section 511 (domestic section 4947(a)(1) tradis and taxable localizations only, section 511  | 3                     |         |          | 20.    |
| 3    | Add lines 1 and 2  | 4                     |         |          | 0.     |
| 4    | Subtitle A (income) tax (unitestic section 4947 (a)(1) trusts and taxable foundations only, others, others, others,  | 5                     |         |          | 20.    |
|      | lax based on investment income. Subtract line 4 from line 3. if 26/0 of 1635, office 5   |                       |         |          |        |
|      | Credits/Payments:  |                       |         |          |        |
|      | 2020 estimated tax payments and 2019 overpayment credited to 2020  |                       |         |          |        |
|      | Exempt foreign organizations - tax withheld at source  |                       |         |          |        |
|      | Tax paid with application for extension of time to file (Form 8888)  |                       |         |          |        |
|      | Backup withholding erroneously withheld  | 7                     |         |          | 0.     |
| 7    | Total credits and payments. And lines of unrugin ou  | 8                     |         |          | 0.     |
| 8    | Enter any penalty for underpayment of estimated tax. Check here  | 9                     |         |          | 20.    |
| 9    | 1ax que, il the total of thes 5 and 6 is more than the 7, enter amount of 6  | 10                    |         |          |        |
|      | Overpayment. If the 7 is more than the total of the 50 and 0, enter the amount overpara  | 11                    |         |          |        |
| 11   | Enter the amount of line to to be. Greated to 2021 estimated tax   | 11 ]                  |         |          |        |
| Pa   | rt VII-A Statements Regarding Activities   |                       |         | Yes      | No     |
| 1a   | During the lax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in   |                       | 1a      |          | Х      |
|      | 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  | in                    | 7.00    |          | Х      |
| b    | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes: occ the instruction of the description of the activities and conject of any materials published or        | **************        |         |          |        |
|      | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or   |                       |         |          |        |
|      | distributed by the foundation in connection with the activities.   |                       | 1c      |          | Х      |
|      | Did the foundation file Form 1120-POL for this year?   | ************          |         |          |        |
| d    | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:   |                       |         |          |        |
|      | (1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0. Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation                 |                       |         |          |        |
| е    |  |                       |         |          |        |
| 0.40 | managers. ► \$0.  Has the foundation engaged in any activities that have not previously been reported to the IRS?  |                       | 2       |          | х      |
| 2    |  |                       |         |          |        |
|      | If "Yes," attach a detailed description of the activities.  Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or                |                       |         |          |        |
| 3    | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes   |                       | 3       |          | х      |
| 20   | Did the foundation have unrelated business gross income of \$1,000 or more during the year?  | ASSESSED AND ASSESSED | 4a      |          | X      |
| 4a   | If "Yes," has it filed a tax return on Form 990-T for this year?   | N/A                   | 4b      |          |        |
| D    | Was there a liquidation, termination, dissolution, or substantial contraction during the year?   |                       | 5       | 8-2606   | Х      |
| 5    | If "Yes," attach the statement required by General Instruction T.  |                       |         |          |        |
| •    | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:  |                       |         |          |        |
| 6    | By language in the governing instrument, or  |                       |         |          |        |
|      | <ul> <li>By tanguage in the governing instrument, or</li> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state la</li> </ul> | .w                    |         |          |        |
|      | remain in the governing instrument?  |                       | 6       | Х        |        |
| 4    | 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  | 20.02.02.25.27.00     | 7       | Х        |        |
| 7    | Did the following the act least \$5,000 in assets at any time during the year.   | ATTOMICS              |         |          |        |
| 0    | Enter the states to which the foundation reports or with which it is registered. See instructions.   |                       |         |          |        |
| ба   | IA   |                       |         |          |        |
|      | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)  |                       |         |          |        |
| b    | of each state as required by General Instruction G? If "No," attach explanation  |                       | 8b      | Х        |        |
| _    | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calend  | dar                   |         |          |        |
| 9    | year 2020 or the tax year beginning in 2020? See the instructions for Part XIV. If "Yes," complete Part XIV  |                       | 9       |          | х      |
|      | the standard contributors during the tay year? A "Year" estand a cohedula listing their names and addresses  |                       | . 10    |          | Х      |
| 10   | DIG any persons become substantial contributors during the tax year? If Yes, attach a schedule learning tree research  |                       | Form 99 | 0-PF     | (2020  |

| Pa  | ort VII-A Statements Regarding Activities (continued)  | Teconomics |            |              |
|-----|--|------------|------------|--------------|
|     |  |            | 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  |            |            | X            |
| 12  | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?   |            |            | 223          |
|     | If "Yes," attach statement. See instructions   | 12         | 100        | х_           |
| 13  | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  | 13         | Х          |              |
|     | Website address ► SEE FOOTNOTES  | 7700       |            | -            |
| 14  | The books are in care of NATHAN RUBLE  Telephone no. 641-357   | 2700       |            | -            |
|     | Located at ► 754 342ND STREET, HANLONTOWN, IA ZIP+4 ► 504  |            | _          | $\Box$       |
| 15  | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here  | N,         |            |              |
|     | and enter the amount of tax-exempt interest received or accrued during the year  | IN A       | Yes        | No           |
| 16  | At any time during calendar year 2020, did the foundation have an interest in or a signature or other authority over a bank,   | 16         | 103        | X            |
|     | securities, or other financial account in a foreign country?   | 10         |            |              |
|     | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the   |            |            |              |
| Da  | foreign country  art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required   |            |            | Emily to the |
| 1 6 | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  |            | Yes        | No           |
| 1.  | During the year, did the foundation (either directly or indirectly):   |            |            |              |
| 18  | (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?   | W 155      |            |              |
|     | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes X No   |            |            |              |
|     | (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  |            |            |              |
|     | for the benefit or use of a disqualified person)?  |            |            |              |
|     | (6) Agree to pay money or property to a government official? (Exception. Check "No"  | 40.00      |            |              |
|     | 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.)   |            |            |              |
| 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   |            |            | Mark Street  |
|     | section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions  | 1b         | ACTION NO. |              |
|     | Organizations relying on a current notice regarding disaster assistance, check here  |            |            |              |
| 0   | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected  |            |            | х            |
|     | before the first day of the tax year beginning in 2020?  | 1c         |            |              |
| 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)):  |            |            |              |
| ć   | a At the end of tax year 2020, did the foundation have any undistributed income (Part XIII, lines  6d and 6e) for tax year(s) hearinging before 2020?  Yes X No  |            |            |              |
|     | ou and de) for tax year(3) beginning botors 2020.  |            |            |              |
|     | If "Yes," list the years \( \bigcup_{ \text{in}} \), \(  \text{years} \), \(  \text{years} \), \(  \text{years} \)  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 |            |            |              |
| 1   | valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach  |            |            |              |
|     | statement - see instructions.)   | 2b         |            |              |
| ,   | c If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.  |            |            |              |
|     |  |            |            |              |
| 3:  | a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time  |            |            |              |
|     | during the year?   |            |            | 440          |
| 1   | b If "Yes," did it have excess business holdings in 2020 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 Form 4720,  |            | . AA       |              |
|     | Schedule C. to determine if the foundation had excess business holdings in 2020.)  | 3b         | -          | 177          |
| 4:  | a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?  | 4a         |            | Х            |
| 1   | b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that   |            |            | x            |
|     | had not been removed from jeopardy before the first day of the tax year beginning in 2020?   | 4b         | 0-DE       | (2020)       |
|     | la de la companya de   | JIIII 39   | O-LL       | (2020)       |

| EILEEN L. RUBLE DIRECTOR 754 342ND STREET   | Form 990-PF (2020) FOUNDATION   |  |                  | 45 2153676                             |               | F                | Page 6          |
|---|---|--|------------------|--|---------------|------------------|-----------------|
| (1) Carry on propagation, or cherewise attempt to influence begination (section 4845(c))? (2) Influence the outcome of any specific public election (see section 4855); or to sury on, directly or indirectly, any voter registration drive? (3) Provide a grant to an annihilated for travel, study, or other similar purposes? (3) Provide a grant to an annihilated for travel, study, or other similar purposes? (3) Provide a grant to an annihilated for travel, study, or other similar purposes? (3) Provide a grant to an annihilated for travel, study, or other similar purposes? (3) Provide for any purpose where them religious, charitable, side-relific, literary, or educational purposes, or for the prevention of creative to any of the Interactions and the study of the Interaction Study, or other study, or other study of the Interaction Study, or other study of the Interaction Study of Interaction Study                               | Part VII-B   Statements Regarding Activities for Which F                            | orm 4720 May Be R  | equired (continu | ied)                                   |               |                  |                 |
| (a) Influence the outpone of any specific public election (see section 4895); or to carry on, directly or indirectly, any voter registration driver.  (b) Procede a grant to an individual for travel, study, or other similar purposes?  (c) Procede a grant to an organization other than a charibble, ist, organization described in section  (d) Procede for any purpose other than religious, charibble, solemith, listrary, or soluciational purposes, or for the prevention of cruelity to differ or any range of the transactions and the continuation of travels to differ or any range of the transactions and the continuation of travels to differ or any range of the transactions and the continuation of travels to differ or any range of the transactions and the continuation of travels to differ or any range of the transactions and the continuation of travels to differ or any range of the transactions and the continuation of travels to differ or any range of the transactions of the continuation of travels to differ or any range of the transactions of the continuation                               | 5a During the year, did the foundation pay or incur any amount to:                  |  | · ·              |  |               | Yes              | No              |
| any voter registration drive?  (3) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(0)(4)(A)? See instructions (5) Provide to any purpose other than a charitable, etc., organization described in section 4945(0)(4)(A)? See instructions (5) Provide to any purpose other than a charitable, etc., organization described in section 4945(0)(4)(A)? See instructions (5) Provide to any purpose other than religious, charitable, etc., organization described in section 4945(0)(4)(A)? See instructions (6) Provide any purpose other than religious, charitable, scientific, literary, or aducational purposes, or for the prevention of crelety to children or animale?  It may asserve five five 51(-5)(-5) (dil vary of the instructions? Section 53,4945 or in a current notice regarding disester assistance, refers to secretic them to see the secretic se                              |   |  |                  | s X No                                 |               |                  |                 |
| (4) Provide a grant to an indevidual for travel, study, or other similar purposes?  (4) Provide a grant to an regardization other than a charitable, etc., organization described in section  4945(c)(4)(A)/S see instructions  (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of travelity to different or animals?  (6) It is any answer is "Yes" fo ski1-(-6), did any of the transactions fall to qualify under the exceptions described in Regulations section 53-46 or in a current notice regarding diseaster assistance, check here of if the answer is "Yes" to question ski4), does the foundation obtain exemption from the tax bucause it maintained expenditure responsibility for the grant?  If Yes, statish the statement required by Regulations section 53-494-5-(0).  8 Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If Yes, did the foundation receive any proceeds or have any net income attributible to the transaction?  9 Life's, did the foundation ceive any preceded or have any net income attributible to the transaction?  1 Life all officers, directors, trustees, and dountractors  1 Life all officers, directors, trustees, and countractors  1 Life all officers, directors, trustees, and countractors  2 Life all officers, directors, trustees, and countractors  2 Life all officers, directors, trustees, and countractors  2 Life all officers, directors, trustees, and countractors  3 Life all officers, directors, trustees, and countractors  4 Life all officers, directors, trustees, and countractors  2 Life all officers, directors, trustees, and countractors  3 Life all officers, directors, trustees, and countractors  4 Life all officers, directors, trustees, and countractors  5 Life all officers, directors, trustees, and countractors  1 Life all officers, directors, trustees, and countractors  2 Life all officers, directors, trustees, and countractors  3 Life and officers, directors, trustees,                              | (2) Influence the outcome of any specific public election (see section 4955); o     |  |                  |  |               |                  |                 |
| (4) Provide a grant to an individual for travel, study, or other smills purposes?   | any voter registration drive?   |  |                  |  |               |                  |                 |
| 4945(g)(4)(A) Pse instructions  (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  If any answer is "Yes" to Sq. Inc. of Sq. Inc.                               |   |  |                  | s X No                                 |               |                  |                 |
| 4945(g)(4)(A) Pse instructions  (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  If any answer is "Yes" to Sq. Inc. of Sq. Inc.                               | (4) Provide a grant to an organization other than a charitable, etc., organization  | n described in section   |                  |  |               |                  |                 |
| (a) Provide for any purpose other than reliquious, charitable, solemitic, literary, or educational purposes, or for the prevention of cruelly to hillsher or animals?  b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fall to qualify under the exceptions described in Regulations section 53.4945 or in a current notice reparring diseaser assistancy See instructions Organizations reliping on a current notice reparring diseaser assistancy See instructions Organizations reliping on a current notice reparring diseaser assistancy, sinch the second organization reliping on a current notice reparring diseaser assistancy, shock here  if the answer is "Yes" or question 5a(4), does the foundation object to figure grant?  If "Yes," attach the statement required by Regulations section 53.4945-5(ci).  6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal beherit contract?  7a All any firm during the tax year, was the foundation a party to a prohibited tax shelter transaction?  7a All any firm during the tax year, was the foundation appray to a prohibited tax shelter transaction?  7b If "Yes" of the foundation covers any proceeds or have any net income attributable to the transaction?  8i Is the foundation subject to the section 4960 bx on payment(s) of more than \$1,000,000 in remuneration or covers year that year.  Parti Visit   Information About Officers, Directors, Trustees, Foundation Managers, Highly  Paid Employees, and Contractors  1 List all officers, directors, trustees, and contractors  6 by Trust and average for information and address  6 by Trust and average for information and address of the section 4960 bx on payment(s) of more than \$1,000,000 in remuneration or covers year than \$2,000 or \$2,00 |   |  | Ye               | s X No                                 |               |                  |                 |
| b If any asserts in Yes 15 41,15(), did say of the transactions fall to qualify under the exceptions described in Regulations section 53.4945 or in a current notice reparding disaster assistance? See instructions  Organizations relying on a current notice reparding disaster assistance? See instructions  Organizations relying on a current notice reparding disaster assistance? See instructions  Organizations relying on a current notice reparding disaster assistance? See instructions  Organizations relying on a current notice reparding disaster assistance? See instructions  Organizations relying on a current notice reparding disaster assistance? See instructions  If Yes a State in Yes 10 question of Section 53.4945-5(d).  6a ID the foundation, furing the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If Yes 12 de in Evan 8870.  7b If Yes, did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If Yes, did the foundation receive any proceeds or have any net income attributable to the transaction?  See 1 the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If Yes, did the foundation receive any proceeds or have any net income attributable to the transaction?  See 1 the foundation of the foundation receive any proceeds or have any net income attributable to the transaction?  If Yes 3 the foundation of the foundation receive any proceeds or have any net income attributable to the transaction?  If Yes 3 the foundation of the foundation receive any proceeds or have any net income attributable to the transaction?  If Yes 3 the foundation of the foundation receive any proceeds or have any net income attributable to the transaction?  If Yes 3 the foundation of the foundation receive any proceeds or the variety and the foundation of the foundation o                              | (5) Provide for any purpose other than religious, charitable, scientific, literary, | vide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for   |                  |  |               |                  |                 |
| b Itary answer is "rest to Sat1)-(5), did any of the transactions all to qualify under the exceptions described in Regulations section 53.4945 or in a current notice reparding disaster assistance? See instructions  Organizations relying on a current notice reparding disaster assistance; See instructions  It was an expenditure or groups of the transaction of the tax because it maintained expenditure responsibility for the grant?  If Yes, attach the statement required by Regulations section 53.4945-5(d).  Be a litch the foundation, during the grant, acceve any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If Yes, attach the statement required by Regulations section 53.4945-5(d).  Be a litch the foundation, during the year, secver any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If Yes, attach the statement required by Regulations section 53.4945-5(d).  Be if If Yes, die foundation receives any proceeds for have any net income attributable to the transaction?  The Aray time during the tax year, vas the foundation a party to a prohibited tax shelter transaction?  If Yes, at any time during the tax year, vas the foundation appropriate of the transaction?  If Yes, at any time during the tax year, vas the foundation appropriate payment (s) file form 870.  If Yes, at any time during the text year, vas the foundation appropriate payment (s) file form 870.  If Yes, at any time during the text year, vas the foundation appropriate payment (s) file form 870.  If Yes, at any time during the text year, vas the foundation received any time the text year.  If Yes, at any time during the text year, vas the foundation appropriate payment (s) file form 870.  If Yes, at any time during the text year, vas the foundation received any time the transaction?  It is all officers, directors, brustees, and foundation managers and their compensation (file for paid, enter 4-) and the foundation received any time the foundation received any time the foundation received any t                              |   |  |                  | s X No                                 |               | W                |                 |
| Section 53.4945 or in a current notice regarding disaster assistancy? See instructions  If the answer is "Nes" to question 53.494, does the foundation dain exemption from the tax because it maintained expenditure responsibility for the grant?  If "Yes, attain the statement required by Regulations section \$3.4945-5(d).  6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes," to file, life form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  If "Yes," did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes," did the foundation subject to the section 4900 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachate payment(s) during the year?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, VIII Information About Officers, Officers, Directors, VIII Information About                             |   |  |                  |  |               |                  |                 |
| Cryanizations relying on a current notice regarding disaster assistance, check here  c if the answer is "Yes" to question 5.4(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If "Yes," attach this statement required by Regulations section 53.4945-5(0).  8 old the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes to 8b, file Farm 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction?  7a At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction?  8 is the foundation subject to the section 4980 tax on payment(s) of more than \$1,000,000 in remuneration or occess parachuba payment(s) during the year?  Part VIII   Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII   Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII   Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII   Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII   Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII   Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII   Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII   Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII   Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII   Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII   Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII   Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII   Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII   Information About Officers                             |   |  |                  | N/A                                    | 5b            |                  |                 |
| c If the answer is "Yes" to question 54(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53.4945-5(f).  6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes" to 65, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Yes X No  If "Yes" did the foundation receive any proceeds or have any net income attributable to the transaction?  At It is still be foundation subject to the section 4980 it ax on payments) of one than \$1,000,000 in remuneration or excess paracturity party or payments (income attributable to the transaction?  Part VIII. Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, and foundation managers and their compensation.  (a) Name and address  IDITIES and Average hours of the paid of th                             |   |  |                  |  |               |                  |                 |
| appenditure responsibility for the grant?  N/A. Yes No  If "Yes," attach the statement required by Regulations section 53.4945-5(d).  8a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes to 8b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a porhibited tax shelter transaction?  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  7b If "Yes to 8b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  8 Is the foundation subject to the section 4890 tax on payment(s) of more than \$1,000,000 in remuneration or excess paracture and the foundation managers.  Part VIII. Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII. Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII. Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII. Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII. Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII. Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII. Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII. Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII. Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII. Informatio                             |   |  |                  |  |               |                  |                 |
| If "Yes," attach the statement required by Regulations section 53.494-5(f).  8a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a parsonal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  1 If "Yes To So, file Forms 870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  9 If "Yes," did the foundation subject to the section 4960 bit on payment(s) of more than \$1,000,000 in remuneration or excess parachule payment(s) during the year?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, and foundation managers and their compensation.  1 Light all officers, directors, trustees, and foundation managers and their compensation.  1 Light all officers, directors, trustees, and foundation managers and their compensation.  1 Light all officers, directors, trustees, and foundation managers and their compensation.  1 Light all officers, directors, trustees, and foundation managers and their compensation.  1 Light all officers, directors, trustees, and foundation managers and their compensation.  1 Light all officers, directors, trustees, and foundation managers and their compensation.  1 Light all officers, directors, trustees, and foundation managers and their compensation.  1 Light all officers, directors, trustees, and foundation managers and their compensation.  1 Light all officers, directors, trustees, and foundation managers and their compensation.  1 Light all officers, directors, trustees, and foundation managers and their compensation.  1 Light all officers, directors, trustees, and foundation managers and their analyses.  1 Light all officers, directors, trustees, and foundation managers and trustees, foundation managers.  2 Light all officers, directors, trustees, and foundation managers and trustees, foundation managers                             | expenditure responsibility for the grant?   | N  | /A Y             | s No                                   |               |                  |                 |
| Sea Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?   Yes X No   Bob Ut the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?   Yes X No   If "Yes to 6b, file form 8870.   Yes X No   Yes X                                | If "Yes," attach the statement required by Regulations section 53.4945-5(d).        |  |                  |  |               |                  |                 |
| a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes 106, file form 8870.  7a At any time during the taxyear, was the foundation aparty to a prohibited tax shelter transaction?  8 Is the foundation subject to the section 4980 tax on payments; of more than \$1,000,000 in remuneration or excess parachule payment(s) during the year?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Paid Employees, and Contractors  1 List all officers, directors, trustees, and foundation managers and their compensation.  (a) Name and address  (b) Title, and average hours paid, enter -0-)  JERRED D, RUBLE  SECRETARY  JERRED TREETOR  1 RECTOR  1 REASURER  1 O, 10  |   | pay premiums on  |                  |  |               |                  |                 |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  7b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?  8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, and foundation managers and their compensation.  (a) Name and address    List all officers, directors, trustees, and foundation managers and their compensation.  (b) Title and syerage (house directed) (fine paid enter -0)    List all officers, directors, trustees, and foundation managers and their compensation.  (a) Name and address    List all officers, directors, trustees, and foundation managers and their compensation.  (b) Title and syerage (house paid enter -0)    List all officers, directors, trustees, and foundation managers and their compensation.  (b) Title and syerage (house paid enter -0)    List all officers, directors, trustees, and foundation managers and their compensation.    (b) Title, and syerage (house paid enter -0)    C) Compensation (d) Cantellates and account, other allowances and enter -0)    C) Compensation (d) Cantellates and account, other accounts and account, other accounts and account, other accounts accounts account, other accounts accounts account, other accounts a                             |   |  | Y6               | s X No                                 |               | 1.00             |                 |
| If "Yes" to 6b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  N/A  7b  N/A  7b  8 Is the foundation receive any proceeds or have any net income attributable to the transaction?  N/A  7b  N/A  N/A  N/A  N/A  N/A  N/A  N/A  N/   |   |  |                  |  | 6b            |                  | Х               |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?  B Is the foundation subject to the section 4980 tax on payment[s) of more than \$15,000,000 in remuneration or excess parachular payment(s) during the year?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, and foundation managers and their compensation.  (a) Name and address  (b) Tills, and average hours per week devoted to position  (fine t paid, enter -0-)  SECRETARY  (b) Tills, and average hours per week devoted to position  (if not paid, enter -0-)  SECRETARY  (d) Compensation (c) Compe                             |   |  |                  |  |               |                  |                 |
| b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? N/A 7b 8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess paractule payment(s) during the year?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, and foundation managers and their compensation.  (a) Name and address (b) Title, and average full of the paid to position (file of paid to position of the paid to position of the paid to position of the highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000 Position of the highest-paid employees (other than those included on line 1). If none, enter "NONE."  (b) Title, and average full of the transaction?  (c) Compensation (d) Contractors (e) Expense additional exception of the highest-paid employees (other than those included on line 1). If none, enter "NONE."  (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (d) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (e) Expense (c) Compensation (d) Contractors (d) Compensation (d) Contractors (e) Compensation (e) Compensation (d) Contractors (e) Compensation (d) Contractors (e) Compensation (e) Compensati                            |   | shelter transaction?   | Ye               | s X No                                 |               |                  | 140             |
| 8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or secess parachute payment(s) during the year?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directora, trustees, and foundation managers and their compensation.  (a) Name and address   (b) Title, and average hours per week devoted to position (if not paid, enter -0-)   (c) Compensation (if not paid, enter -0-)   (d) Particulators to secretary account, other allowances account, other accounts and address of each employee paid more than \$50,000   (b) Title, and average hours per week devoted to position   (c) Compensation   (d) Compensation                               | b If "Yes." did the foundation receive any proceeds or have any net income attribu  | itable to the transaction?   |                  | N/A                                    | 7b            |                  |                 |
| Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, and foundation managers and their compensation.  (a) Name and address (b) Title, and average hours per week devoted to position (ff not paid, enter -0-) and on the compensation (ff not paid, enter -0-) and on the compensation (ff not paid, enter -0-) and on the compensation (ff not paid, enter -0-) and on the compensation (ff not paid, enter -0-) and on the compensation (ff not paid, enter -0-) and on the compensation (ff not paid, enter -0-) and on the compensation (ff not paid, enter -0-) and on the compensation (ff not paid, enter -0-) and on the compensation of the compensation (ff not paid, enter -0-) and on the compensation of the compensation (ff not paid, enter -0-) and allowances account, other accounts and address of each employee paid more than \$50,000 (b) Title, and average hours prevek devoted to position (c) Compensation (d) compensation account, other compensation allowances account, other compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours prevek devoted to position (c) Compensation (d) compensation allowances account, other compensation of five paid and account, other compensation allowances account, other compensation allowances account, other compensation accounts and the compensation accounts account and the compensation accounts account and the compensation accounts account account accounts account accounts account accounts account accounts ac                            |   |  |                  |  |               |                  |                 |
| Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, and foundation managers and their compensation.  (a) Name and address  (b) Title, and average hours per week devoted to position  (if not paid, enter -0-)  (if not paid, enter                                 | excess parachute payment(s) during the year?  |  | Ye               | s X No                                 |               |                  |                 |
| List all officers, directors, trustees, and foundation managers and their compensation. (b) Title, and average hours per week devoted to position (if not paid, enter-0-) and one of the highest-paid employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (if not paid, enter-0-) and one of the highest-paid employee paid more than \$50,000 (c) Compensation (if not paid, enter-0-) and one of the highest-paid employee paid more than \$50,000 (c) Compensation (if not paid, enter-0-) and one of the highest-paid employee paid more than \$50,000 (c) Compensation (c) Comp                            | Part VIII Information About Officers, Directors, Truste                             | es, Foundation Mar   | nagers, Highly   |  |               |                  |                 |
| (a) Name and address (b) Title, and average hours per week devoted to position (fif not paid, enter -0-)  JERRED D. RUBLE  754 342ND STREET  HANLONTOWN, IA 50444  0.20 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0   |   |  |                  |  |               |                  |                 |
| SECRETARY   SECR                                | 1 List all officers, directors, trustees, and foundation managers and the           |  | 1                | (-0)                                   |               |                  |                 |
| SECRETARY   SECR                                | /=> Nome and address  | (b) Title, and average hours per week devoted  |                  | employee benefit plans                 | ac            | e) Exp<br>count, | ense<br>, other |
| 754 342ND STREET HANLONTOWN, IA 50444  DIRECTOR  514 342ND STREET HANLONTOWN, TA 50444  0.10 0.0 0.0. 0.0. 0.0. 0.0. 0.0.   | (a) Name and address  |  |                  | compensation                           | - 3           |                  |                 |
| ### 10.20 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0   | JERRED D. RUBLE   | SECRETARY  |                  |  |               |                  |                 |
| ELLEEN L. RUBLE  754 342ND STREET  HANLONTOWN, TA 50444  0.10 0.0 0.0.0.0.  NATHAN C. RUBLE  FREASURER  754 342ND STREET  HANLONTOWN, TA 50444  0.10 0.10 0.0.0.0.0.  TIMOTHY J. RUBLE  PRESIDENT  TA 342ND STREET  HANLONTOWN, TA 50444  0.10 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0  | 754 342ND STREET  | ]  |                  |  |               |                  |                 |
| 754 342ND STREET HANLONTOWN, IA 50444  O.10  O. 0.  NATHAN C. RUBLE  754 342ND STREET HANLONTOWN, IA 50444  O.10  O. 0.  O. 0.  TIMOTHY J. RUBLE  FRESIDENT  104 1 50444  O.10  O. 0.  O. 0.  O. 0.  O. 0.  O. 0.  TIMOTOWN, IA 50444  O.10  O. 0.  O. 0.  O. 0.  Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (b) Tille, and average hor week devoted to position  (c) Compensation  (d) Combustines to employee shared, paid account, other allowances  (e) Expense account, other allowances  Total number of other employees paid over \$50,000  | HANLONTOWN, IA 50444  | 0.20   | 0.               | 0.                                     |               |                  | 0.              |
| HANLONTOWN, IA 50444  O.10 O. 0.  NATHAN C. RUBLE TREASURER TREASURER  O.10 O. 0.  O. 0.  TIMOTHY J. RUBLE PRESIDENT TS4 342ND STREET HANLONTOWN, IA 50444  O.10 O. 0.  O. 0.  O. 0.  O. 0.  O. 0.  O. 0.  TIMOTHY J. RUBLE PRESIDENT  (a) Name and address of each employee gold more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  NONE  (c) Compensation  (d) Contributions of employee paid more than \$50,000  NONE  (e) Expense account, other allowances  (c) Compensation  Total number of other employees paid over \$50,000   | EILEEN L. RUBLE   | DIRECTOR   |                  |  |               |                  |                 |
| NATHAN C. RUBLE 754 342ND STREET HANLONTOWN, IA 50444  0.10 0.0 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0  | 754 342ND STREET  |  |                  |  |               |                  |                 |
| 754 342ND STREET HANLONTOWN, IA 50444  PRESIDENT  TIMOTHY J. RUBLE PRESIDENT  HANLONTOWN, IA 50444  O.10 O. 0. O. 0.  Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  NONE  (c) Compensation  (d) Contributions to employee add more than \$50,000  (e) Expense account, other allowances  Total number of other employees paid over \$50,000  | HANLONTOWN, IA 50444  | 0.10   | 0.               | 0.                                     |               |                  | 0.              |
| HANLONTOWN, IA 50444  TIMOTHY J. RUBLE  PRESIDENT  TAY 342ND STREET  HANLONTOWN, IA 50444  Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  NONE  (c) Compensation  (d) Compensation  (e) Expense account, other supplyees paid more than \$50,000  Total number of other employees paid over \$50,000  | NATHAN C. RUBLE   | TREASURER  |                  |  |               |                  |                 |
| TIMOTHY J. RUBLE 754 342ND STREET HANLONTOWN, IA 50444  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  NONE  (c) Compensation  (d) Contributions to employee basis plans account, other allowances  (c) Compensation  (d) Contributions to employee basis plans account, other allowances  (e) Expense account, other allowances  (f) Compensation  (h) Title, and average hours per week devoted to position  (h) Total number of other employees paid over \$50,000   | 754 342ND STREET  | ]  |                  |  |               |                  |                 |
| 754 342ND STREET HANLONTOWN, TA 50444  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  NONE  (c) Compensation (d) Contributions or employee basefit plans addrense: campensation account, other allowances  Total number of other employees paid over \$50,000   | HANLONTOWN, IA 50444  | 0.10   | 0.               | 0                                      |               |                  | 0.              |
| HANLONTOWN, TA 50444 0.10 0. 0. 0. 0.  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation employee banaft plans and deferred compensation and deferred compensation allowances  NONE  Total number of other employees paid over \$50,000   | TIMOTHY J. RUBLE  | PRESIDENT  |                  | 1, 31 p                                |               |                  |                 |
| 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee basis plans account, other allowances  account, other allowances  Total number of other employees paid over \$50,000   | 754 342ND STREET  |  |                  |  |               |                  |                 |
| (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions employee halfit plans address account, other allowances  (e) Expense account, other allowances  Total number of other employees paid over \$50,000  |   |  |                  | 0                                      |               |                  | 0.              |
| (a) Name and address of each employee paid more than \$50,000  NONE  (c) Compensation employee band plans address addre                             | 2 Compensation of five highest-paid employees (other than those inc                 |  | enter "NONE."    | (4)                                    | T .           |                  |                 |
| NONE  NONE  Total number of other employees paid over \$50,000  | (a) Name and address of each employee paid more than \$50,000                       | hours per week   | (c) Compensation | employee benefit plans<br>and deferred | ac            | count,           | , other         |
| Total number of other employees paid over \$50,000  | NONE  | and the second   |                  |  |               |                  |                 |
| Total number of other employees paid over \$50,000  Form 990-PF (2020)  |   | 1  |                  |  |               |                  |                 |
| Total number of other employees paid over \$50,000  Form 990-PF (2020)  |   |  |                  | 110                                    |               |                  |                 |
| Total number of other employees paid over \$50,000  Form 990-PF (2020)  | Ä.  |  |                  |  |               |                  |                 |
| Total number of other employees paid over \$50,000  Form 990-PF (2020)  |   |  |                  |  |               |                  |                 |
| Total number of other employees paid over \$50,000  ▶ 0 Form 990-PF (2020)  |   | 1  |                  |  |               |                  |                 |
| Total number of other employees paid over \$50,000  ▶ 0 Form 990-PF (2020)  |   |  |                  |  |               |                  |                 |
| Total number of other employees paid over \$50,000   ▶ 0 Form 990-PF (2020)   |   | †  |                  |  |               |                  |                 |
| Total number of other employees paid over \$50,000   ▶ 0 Form 990-PF (2020)   |   |  |                  |  |               | -                |                 |
| Total number of other employees paid over \$50,000  Form 990-PF (2020)  |   | 1  |                  |  |               |                  |                 |
| Form 990-PF (2020)  | T-4-1 number at other ampleyees paid aver \$50,000                                  | The state of the s |                  |  |               |                  | 0               |
|   | Total number of other employees hard over \$50,000                                  |  | 7727-1917-1918   | Forr                                   | n <b>99</b> 0 | )-PF             | (2020)          |

| 3 Five highest-paid independent contractors for professional services. If none, enter                      | er "NONE."                       |                  |
|--|----------------------------------|------------------|
| (a) Name and address of each person paid more than \$50,000  | (b) Type of service              | (c) Compensation |
| NONE   |                                  |                  |
|  | =                                |                  |
|  |                                  |                  |
|  |                                  |                  |
|  |                                  |                  |
|  |                                  |                  |
|  |                                  |                  |
|  |                                  |                  |
|  |                                  |                  |
| otal number of others receiving over \$50,000 for professional services                                    |                                  | <b>&gt;</b>      |
| Part IX-A Summary of Direct Charitable Activities  |                                  |                  |
| ist the foundation's four largest direct charitable activities during the tax year. Include relevant state | tistical information such as the | Evpanese         |
| number of organizations and other beneficiaries served, conferences convened, research papers pro          | oduced, etc.                     | Expenses         |
| N/A  |                                  |                  |
|  |                                  |                  |
|  |                                  |                  |
|  |                                  |                  |
|  |                                  |                  |
|  |                                  |                  |
|  |                                  |                  |
|  |                                  |                  |
|  |                                  |                  |
|  |                                  |                  |
|  |                                  |                  |
| Part IX-B Summary of Program-Related Investments   |                                  | Amount           |
| Describe the two largest program-related investments made by the foundation during the tax year (          | on lines 1 and 2.                | Amount           |
| N/A  |                                  |                  |
|  |                                  |                  |
|  |                                  |                  |
|  |                                  |                  |
|  |                                  |                  |
| All other program-related investments. See instructions.   |                                  |                  |
| S S S S S S S S S S S S S S S S S S S  |                                  |                  |
|  |                                  |                  |
|  |                                  |                  |
|  |                                  |                  |
|  |                                  |                  |
|  | <b>.</b>                         |                  |
| Total. Add lines 1 through 3   |                                  | - 000 DE         |
|  |                                  | Form 990-PF (2   |

|      | Fair market value of assets not used (or held for use) directly in carrying out ch                                    | aritable, etc., purposes:          |                   | 1000            |                                  |
|------|---|------------------------------------|-------------------|-----------------|----------------------------------|
|      | Average monthly fair market value of securities   |                                    | ,                 | 1a              | 76,092.                          |
|      | Average monthly cash balances   |                                    |                   | 1b              | 42,631.                          |
|      | Fair market value of all other assets   |                                    |                   | 1c              |                                  |
|      |   |                                    |                   | 1d              | 118,723.                         |
|      | Total (add lines 1a, b, and c)  |                                    |                   |                 |                                  |
| е    | Reduction claimed for blockage or other factors reported on lines 1a and  | 1 10                               | 0.                |                 |                                  |
| 2217 | 1c (attach detailed explanation)  | 16                                 |                   | 2               | 0.                               |
| -    | Acquisition indebtedness applicable to line 1 assets  |                                    |                   | 3               | 118,723.                         |
| 3    | Subtract line 2 from line 1d  | mount con instructions)            |                   | 4               | 1,781.                           |
| 4    | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater at                                    | nount, See instructions)           | CONTRACTOR OF THE | 5               | 116,942.                         |
| 5    | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here  |                                    |                   | 6               | 5,847.                           |
| 6    | Minimum investment return. Enter 5% of line 5   | 3/0) and (3/5) exists apprating    | foundations and   |                 |                                  |
|      | part XI Distributable Amount (see instructions) (Section 4942)  | j)(3) and (j)(5) private operating | iounuations and   | Certain         |                                  |
| _    | foreign organizations, check here 🕨 🔃 and do not complete thi   |                                    |                   | 1               | 5,847.                           |
| 1    | Minimum investment return from Part X, line 6   |                                    | 20.               | 1               |                                  |
| 2a   | Tax on investment income for 2020 from Part VI, line 5  |                                    |                   |                 |                                  |
| b    | Income tax for 2020. (This does not include the tax from Part VI.)  |                                    | ***               | 2c              | 20.                              |
| C    | Add lines 2a and 2b   |                                    |                   | 3               | 5,827.                           |
| 3    |   |                                    |                   |                 | 0.                               |
| 4    |   |                                    |                   | 5               | 5,827.                           |
| 5    | Add lines 3 and 4   |                                    |                   |                 | 0.                               |
| 6    | Deduction from distributable amount (see instructions)  |                                    |                   | 7               | 5,827.                           |
| 7    | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and o                                       | on Part XIII, line 1               |                   | /               | 3,027.                           |
| P    | art XII Qualifying Distributions (see instructions)   |                                    |                   |                 |                                  |
| 1    | Amounts paid (including administrative expenses) to accomplish charitable, et   | c., purposes:                      |                   |                 |                                  |
| a    | Expenses, contributions, gifts, etc total from Part I, column (d), line 26  |                                    |                   | 1a              | 5,568.                           |
|      | Program-related investments - total from Part IX-B  |                                    |                   | 1b              | 0.                               |
| 2    | Amounts paid to acquire assets used (or held for use) directly in carrying out of                                     | charitable, etc., purposes         |                   | 2               |                                  |
| 3    | Amounts set aside for specific charitable projects that satisfy the:  |                                    |                   |                 |                                  |
| а    | Suitability test (prior IRS approval required)  |                                    |                   | 3a              |                                  |
| b    | Cash distribution test (attach the required schedule)   |                                    |                   | 3b              |                                  |
| 4    | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, li                                       | ne 8; and Part XIII, line 4        |                   | 4               | 5,568.                           |
| 5    | Foundations that qualify under section 4940(e) for the reduced rate of tax on r                                       | net investment                     |                   |                 | 322                              |
|      | income. Enter 1% of Part I, line 27b  |                                    |                   | 5               | 0.                               |
| 6    | Adjusted qualifying distributions. Subtract line 5 from line 4  |                                    |                   | 6               | 5,568.                           |
| •    | Note: The amount on line 6 will be used in Part V, column (b), in subsequent 4940(e) reduction of tax in those years. | years when calculating whether t   | he foundation qu  | alifies for the | section Form <b>990-PF</b> (2020 |

# Part XIII Undistributed Income (see instructions)

|  | (a)<br>Corpus | (b)<br>Years prior to 2019 | (c)<br>2019                              | (d)<br>2020               |
|--|---------------|----------------------------|--|---------------------------|
| 1 Distributable amount for 2020 from Part XI,  |               |                            |  | E 027                     |
| line 7   |               |                            |  | 5,827.                    |
| 2 Undistributed income, if any, as of the end of 2020:   |               |                            | 0  |                           |
| a Enter amount for 2019 only   |               |                            | 0.                                       |                           |
| <b>b</b> Total for prior years:  |               | 0.                         |  |                           |
| 3 Excess distributions carryover, if any, to 2020:   |               |                            |  |                           |
| - 5 2015   |               |                            |  |                           |
| 1 F 0040   |               |                            |  |                           |
| c From 2017 7,740.   |               |                            |  |                           |
| d From 2018  |               |                            |  |                           |
| e From 2019 12,084.  |               |                            |  |                           |
| f Total of lines 3a through e  | 19,824.       |                            |  |                           |
| 4 Qualifying distributions for 2020 from   |               |                            |  |                           |
| Part XII, line 4: ► \$ 5,568.  |               |                            |  |                           |
| a Applied to 2019, but not more than line 2a   |               |                            | 0.                                       |                           |
| b Applied to undistributed income of prior   |               |                            |  |                           |
| years (Election required - see instructions)   |               | 0.                         |  |                           |
| c Treated as distributions out of corpus   |               |                            |  |                           |
| (Election required - see instructions)   | 0.            |                            | 3 10 10 10 10 10 10 10 10 10 10 10 10 10 | F 560                     |
| d Applied to 2020 distributable amount   |               |                            |  | 5,568.                    |
| e Remaining amount distributed out of corpus   | 0.            |                            |  |                           |
| Excess distributions carryover applied to 2020 (If an amount appears in column (d), the same amount must be shown in column (a).)                | 259.          |                            |  | 259.                      |
| 6 Enter the net total of each column as indicated below:   |               |                            |  |                           |
| a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5  | 19,565.       |                            |  |                           |
| 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<br>deficiency has been issued, or on which<br>the section 4942(a) tax has been previously<br>assessed |               | 0.                         |  |                           |
| d Subtract line 6c from line 6b. Taxable   |               |                            |  |                           |
| amount - see instructions  |               | 0.                         |  |                           |
| e Undistributed income for 2019. Subtract line   |               |                            |  |                           |
| 4a from line 2a. Taxable amount - see instr  |               |                            | 0.                                       |                           |
| f Undistributed income for 2020. Subtract  |               |                            |  |                           |
| lines 4d and 5 from line 1. This amount must   |               |                            |  | 0.                        |
| be distributed in 2021   |               |                            |  |                           |
| 7 Amounts treated as distributions out of  |               |                            |  |                           |
| corpus to satisfy requirements imposed by  |               |                            |  |                           |
| section 170(b)(1)(F) or 4942(g)(3) (Election   | 0             |                            |  |                           |
| may be required - see instructions)  | 0.            |                            |  |                           |
| 8 Excess distributions carryover from 2015   |               |                            |  |                           |
| not applied on line 5 or line 7  | 0.            |                            |  |                           |
| 9 Excess distributions carryover to 2021.  | 19,565.       |                            |  |                           |
| Subtract lines 7 and 8 from line 6a  | 19,303.       |                            |  |                           |
| 10 Analysis of line 9:   |               |                            |  |                           |
| a Excess from 2016 h Excess from 2017 7,481.   |               |                            |  |                           |
| B EXCOSO ITOTAL EO TO  |               |                            |  |                           |
| c Excess from 2018 d Excess from 2019 12,084.  |               |                            |  |                           |
| a choose from Eo to  |               |                            |  |                           |
| e Excess from 2020   |               |                            |  | Form <b>990-PF</b> (2020) |

45-2153676

| Part XIV Private Operating For   |                            |  | I-A, question 9)   | N/A                       |  |
|--|----------------------------|--|--|---------------------------|--|
| a If the foundation has received a ruling or o   |                            |  |  |                           |  |
| foundation, and the ruling is effective for 2  |                            |  |  | 4040(i)/2) or [] 4        | 942(j)(5)  |
| b Check box to indicate whether the foundate   |                            | foundation described                   | in section   | 4942(j)(3) or4            | 1942())(3)   |
| a Enter the lesser of the adjusted net   | Tax year                   | (h) 0010                               | Prior 3 years  | (d) 2017                  | (e) Total  |
| income from Part I or the minimum  | (a) 2020                   | <b>(b)</b> 2019                        | (c) 2018   | (0) 2017                  | (c) rotar  |
| investment return from Part X for  |                            |  |  |                           |  |
| each year listed   |                            |  |  |                           | -  |
| b 85% of line 2a   |                            |  |  |                           |  |
| c Qualifying distributions from Part XII,  |                            |  |  |                           |  |
| line 4, for each year listed   |                            |  |  |                           |  |
| d Amounts included in line 2c not  |                            |  |  |                           | 2  |
| used directly for active conduct of  |                            |  |  |                           |  |
| exempt activities  |                            |  |  |                           |  |
| e Qualifying distributions made directly   |                            |  |  |                           |  |
| for active conduct of exempt activities.   |                            |  |  |                           |  |
| Subtract line 2d from line 2c  |                            |  |  |                           |  |
| Complete 3a, b, or c for the   |                            |  |  |                           |  |
| alternative test relied upon:  |                            |  |  |                           |  |
| a "Assets" alternative test - enter:   |                            |  |  |                           |  |
| (1) Value of all assets  |                            |  |  | 10400114                  | 100  |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i)  |                            |  |  |                           |  |
| b "Endowment" alternative test - enter<br>2/3 of minimum investment return   | £.                         |  |  |                           |  |
| shown in Part X, line 6, for each year<br>listed   |                            |  |  |                           |  |
| c "Support" alternative test - enter:  | P-1                        |  |  |                           |  |
| (1) Total support other than gross   |                            |  |  |                           |  |
| investment income (interest,   |                            |  |  |                           |  |
| dividends, rents, payments on  |                            |  |  |                           |  |
| securities loans (section<br>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   |                            |  |  |                           |  |
| 1.7  |                            |  |  |                           |  |
| an exempt organization   |                            |  |  |                           |  |
| (4) Gross investment income Part XV   Supplementary Infor  | mation (Complet            | e this part only                       | if the foundation  | had \$5,000 or mo         | ore in assets  |
| at any time during th  | e vear-see instru          | ictions.)                              |  |                           |  |
| Information Regarding Foundation   |                            | ************************************** | - 901  |                           |  |
| a List any managers of the foundation who  | have contributed more t    | han 204 of the total cor               | ntributions received by the                              | foundation before the cl  | ose of any tax   |
| year (but only if they have contributed m  | ore than \$5,000), (See se | ection 507(d)(2).)                     | in ibution o reconsed by the                             |                           |  |
| Selection of America and Selection and Selection Assistance and assistance and an expectation of the selection of the selecti | 010 (11(01) 00)000). (000  | · · · · · · · · · · · · · · · · · · ·  |  |                           |  |
| ERRED D. RUBLE   | 100/ mayo of the           | etack of a corporation                 | /or an equally large portion                             | on of the ownership of a  | partnership or   |
| b List any managers of the foundation who other entity) of which the foundation has  | own 10% or more of the     | stock of a corporation                 | r (or an equally large portion                           | m or the ownership or a   | paratoromp or  |
|  | a 1070 of greater interes  |  |  |                           |  |
| ONE  |                            |  |  |                           |  |
| 2 Information Regarding Contribution   | on, Grant, Gift, Loan,     | Scholarship, etc., I                   | rograms:   | ot accept uppolicited rec | nupete for funds. If   |
| Check here ► X if the foundation or  | nly makes contributions t  | o preselected charitable               | e organizations and does i<br>litions, complete items 23 | h c and d                 | facers for fatiger it  |
| the foundation makes gifts, grants, etc.,  |                            |  |  |                           | 1500   |
| a The name, address, and telephone numb  | er or email address of th  | e person to whom app                   | lications should be address                              | 6001                      |  |
|  |                            |  |  |                           |  |
|  |                            | المحالة والماسانية                     | should include:  |                           |  |
| b The form in which applications should be   | e submitted and informat   | ion and materials they                 | snould include;  |                           |  |
| c Any submission deadlines:  |                            |  |  |                           |  |
|  |                            |  |  |                           | the second secon |
| d Any restrictions or limitations on awards  |                            | l avana obevitable field               | le kinde of inetitutions or                              | other factors             |  |

Form 990-PF (2020) FOUNDATION

[Part XV | Supplementary Information (continued)

| 3 Grants and Contributions Paid During the |  | Payment              |                                  | ***      |
|--|--|----------------------|----------------------------------|----------|
| Recipient                                  | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation status of | Purpose of grant or contribution | Amount   |
| Name and address (home or business)        | or substantial contributor   | recipient            |                                  |          |
| a Paid during the year                     |  |                      |                                  |          |
| VINNEBAGO HISTORICAL SOCIETY               | NONE   | PC                   | GENERAL OPERATING                |          |
| 336 N. CLARK ST                            | 13213  |                      | BUDGET                           |          |
| FOREST CITY, IA 50436                      | 100 miles  |                      |                                  | 5,000    |
|  |  |                      |                                  |          |
| II.  |  |                      |                                  |          |
|  | 5*   | la la                |                                  |          |
|  |  |                      |                                  |          |
|  |  |                      |                                  |          |
|  |  |                      |                                  | <u> </u> |
|  |  |                      |                                  | 18       |
| STORE STATES                               |  | 4                    | ▶ 3a                             | 5,000    |
| Total                                      |  |                      |                                  | •        |
| Approved for future payment                |  |                      |                                  |          |
| NONE                                       | *  |                      |                                  |          |
|  |  | _                    |                                  |          |
|  |  |                      |                                  |          |
|  |  |                      |                                  |          |
|  |  |                      |                                  |          |
|  |  |                      |                                  |          |
| 8  |  |                      |                                  |          |
| Total                                      |  | 5 (10 )              | ► 3b                             |          |

| Part XVI-A | Analysis of Income-Producing Activities |
|------------|---|
|            | · · · · · · · · · · · · · · · · · · ·   |

| Enter gross amounts unless otherwise indicated.  | Unrelate   | d business income           |                        | d by section 512, 513, or 514 | (e)   |
|--|--|-----------------------------|------------------------|-------------------------------|---|
|  | (a)<br>Business  | ( <b>b)</b><br>Amount       | Exclu-<br>sion<br>code | (d)<br>Amount                 | Related or exempt function income   |
| 1 Program service revenue:   | code   |                             | 0000                   |                               |   |
| a  | .  |                             |                        |                               |   |
| b  |  |                             |                        |                               | 460   |
| ¢  |  |                             | -                      |                               |   |
| d  |  |                             |                        |                               |   |
| e  | The state of the s | Participation of the second |                        |                               |   |
| f  | 500000   |                             |                        |                               |   |
| g Fees and contracts from government agencies  |  |                             |                        |                               |   |
| 2 Membership dues and assessments  |  |                             |                        |                               |   |
| 3 Interest on savings and temporary cash   | *  |                             |                        |                               |   |
| investments  |  |                             |                        |                               |   |
| 4 Dividends and interest from securities   |  |                             | 14                     | 1,482.                        |   |
| 5 Net rental income or (loss) from real estate:  |  |                             |                        |                               |   |
|  |  |                             |                        |                               |   |
| a Debt-financed property   |  |                             |                        |                               |   |
| b Not debt-financed property   | /  |                             |                        |                               | 100 mm |
| 6 Net rental income or (loss) from personal  |  |                             |                        |                               |   |
| property   |  |                             | -                      |                               |   |
| 7 Other investment income  |  |                             |                        |                               |   |
| 8 Gain or (loss) from sales of assets other  |  |                             |                        | 4 040                         |   |
| than inventory   |  |                             | 18                     | 1,812.                        |   |
| 9 Net income or (loss) from special events   |  |                             |                        |                               |   |
| 10 Gross profit or (loss) from sales of inventory  |  |                             |                        |                               |   |
| 11 Other revenue:  |  |                             |                        |                               |   |
| a  |  |                             |                        |                               |   |
| b  |  |                             |                        |                               |   |
| C  |  |                             |                        |                               |   |
|  |  |                             |                        |                               |   |
|  | _  |                             |                        |                               |   |
| e  |  | 0.                          |                        | 3,294.                        | 0.  |
| 13 Total. Add line 12, columns (b), (d), and (e)   |  |                             |                        | 13                            | 3,294.  |
| (See worksheet in line 13 instructions to verify calculations.)  |  |                             |                        |                               |   |
| Part XVI-B Relationship of Activities  |  | mplishment of Ex            | empt F                 | Purposes                      |   |
|  |  |                             |                        |                               | Process   |
| Line No. Explain below how each activity for which in  | come is reported   | in column (e) of Part XVI-/ | A contribu             | ted importantly to the accomp | plishment of  |
| the foundation's exempt purposes (other than   | n by providing tu  | nds for such purposes).     |                        |                               |   |
|  |  |                             |                        |                               |   |
|  |  |                             |                        |                               |   |
|  |  |                             |                        |                               |   |
|  |  |                             |                        |                               | V   |
|  |  |                             |                        |                               |   |
|  |  |                             |                        | 10011177755                   |   |
|  |  |                             |                        |                               |   |
|  | 330  | ***                         |                        |                               |   |
|  |  |                             |                        |                               |   |
|  |  |                             | -                      |                               |   |
|  |  |                             |                        |                               |   |
|  |  |                             |                        |                               |   |
|  |  |                             |                        |                               |   |
| TARREST PARTY OF THE PARTY OF T |  |                             |                        |                               |   |
|  |  |                             |                        |                               |   |
|  |  |                             |                        |                               |   |
|  |  |                             |                        |                               |   |
|  |  |                             |                        |                               |   |
|  |  |                             |                        |                               |   |
|  | 10-7-10-7  |                             |                        |                               |   |

DES MOINES, IA 50309-2354

| Part    | XVII       | Information Reg<br>Exempt Organiz  |                            | fers to an                          | d Transactions an   | d Relationsh          | nips With Nonc                               | haritable  |          |              |
|---------|------------|------------------------------------|----------------------------|-------------------------------------|---|-----------------------|--|--|----------|--------------|
| 4 D     | d the pro  |                                    |                            | of the following                    | with any other organizatio  | n described in sec    | tion 501(c)                                  |  | Yes      | No           |
| 1 Di    | a the orgi | enetion 601(e)(3) organia          | otiy engaye in any c       | n the lollowing<br>n 527 relating t | to political organizations?                                       | ii doddinaa iii aaa   |  |  |          |              |
|         |            | om the reporting foundat           |                            |                                     |   |                       |  |  |          |              |
|         |            |                                    |                            |                                     |   |                       |  | 1a(1)  |          | X            |
|         |            |                                    |                            |                                     |   |                       |  |  |          | Х            |
| 225     | ther trans |                                    |                            |                                     |   | ••••                  |  |  |          |              |
| _       |            |                                    | le exempt organizati       | ion                                 |   |                       |  | 1b(1)  |          | Х            |
|         |            |                                    |                            |                                     |   |                       |  |  |          | Х            |
|         |            |                                    |                            |                                     |   |                       |  |  |          | Х            |
|         |            |                                    |                            |                                     |   |                       |  |  | -        | Х            |
|         |            |                                    |                            |                                     |   |                       |  |  |          | Х            |
| (6      | ) Perfor   | mance of services or mer           | nbership or fundrais       | ing solicitation                    | s   |                       |  | 1b(6)  |          | Х            |
| c S     | haring of  | facilities, equipment, mail        | ling lists, other asse     | ts, or paid emp                     | loyees  |                       |  |  | 1        | Х            |
| d If    | the answ   | er to any of the above is "        | Yes," complete the f       | ollowing sched                      | ule. Column (b) should alv  | ways show the fair    | market value of the g                        | oods, other ass  | ets,     |              |
| 0       | services   | given by the reporting fo          | undation. If the four      | idation received                    | l less than fair market valu                                      | e in any transactio   | n or sharing arrangen                        | nent, show in  |          |              |
| C       |            | the value of the goods, o          | ither assets, or servi     | ices received.                      |   | T                     |  |  | 100      | - 2          |
| (a)Line | no.        | b) Amount involved                 | (c) Name of                |                                     | exempt organization   | (d) Descripti         | on of transfers, transaction                 | ns, and sharing arra   | angeme   | nts          |
|         |            |                                    |                            | N/A                                 |   | _                     |  | 1000000  |          |              |
|         |            |                                    |                            |                                     |   |                       |  |  |          |              |
|         |            |                                    |                            |                                     |   |                       |  |  |          |              |
|         |            |                                    |                            |                                     |   |                       | 1100   |  |          |              |
|         |            |                                    | 7100 2011 3                |                                     |   |                       |  |  | -        |              |
|         |            |                                    |                            | - 1                                 |   |                       |  |  |          |              |
|         |            |                                    |                            |                                     |   | -                     |  |  |          |              |
|         |            |                                    |                            | - 10                                |   | - 1                   |  |  |          |              |
|         |            |                                    |                            |                                     |   |                       |  |  |          | -            |
|         |            |                                    |                            |                                     |   |                       |  |  |          |              |
|         |            |                                    |                            |                                     |   | -                     |  |  |          |              |
|         |            |                                    |                            |                                     |   |                       |  |  |          |              |
|         | _          |                                    |                            |                                     |   |                       | jene-  |  |          |              |
| -       | -          |                                    |                            |                                     |   |                       |  |  |          |              |
|         | _          |                                    |                            |                                     |   |                       | - 100-700-1                                  | 30 - 40  | W-9      |              |
|         |            | alata a disa aka ay badha ak       | the efficient with or      | rolated to one                      | or more tax-exempt organ  | izations described    |  | CASSILLE CONTRACTOR OF THE PARTY OF THE PART | 20       |              |
| 2a      | s the four | idation directly or indirect       | n 501/a/(2)) or in se      | etion 5272                          | or more tax exempt organ  | izationo docorizoa    |  | Yes  | X        | No.          |
|         |            | omplete the following sch          |                            |                                     | ***************************************                           |                       |  |  |          | - 8270.00000 |
| _ b     | res, co    | (a) Name of org                    | anization                  |                                     | (b) Type of organization  |                       | (c) Description of re                        | elationship  |          |              |
| _       |            | N/A                                | arrization.                |                                     |   |                       |  |  |          |              |
|         |            |                                    |                            |                                     | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1                             |                       |  |  |          |              |
|         |            |                                    | Water se                   |                                     |   |                       |  | 41-2-41-   |          |              |
|         | 10122      |                                    |                            |                                     |   |                       |  |  |          | 15           |
|         |            |                                    |                            |                                     |   |                       |  |  | 1000     |              |
|         | Under      | penalties of perjury, I declare t  | hat I have examined this   | return, including                   | accompanying schedules and s<br>taxpayer) is based on all informa | tatements, and to the | best of my knowledge<br>r has any knowledge. | May the IRS return with the  | discuss  | this         |
| Sig     | 1          | lief, it is true, correct, and com | iplete. Declaration of pre | sparer (other man                   | taxpayer) is based out all informa-                               | ation of timos propur |  | shown below  | v? See i |              |
| Her     | e          |                                    |                            |                                     |   | TREASU                | RER  | _ X Yes  | s L      | No           |
|         | Sign       | nature of officer or trustee       | į                          |                                     | Date  | Title                 | Later Table                                  | DTIN   |          |              |
|         |            | Print/Type preparer's na           | ıme                        | Preparer's si                       | gnature   | Date                  | Check if                                     | PTIN   |          |              |
|         |            |                                    |                            |                                     |   |                       | self- employed                               | D0000000   | 0        |              |
| Pai     | W          | KATHY FAIRCHILE                    |                            |                                     |   | 04/30/21              | l en men N                                   | P00222608  | _        |              |
|         | parer      | Firm's name RSM                    | US LLP                     |                                     |   |                       | Firm's EIN                                   | #Z-U/143Z3   | <b>.</b> |              |
| USE     | Only       | Firm's address ► 400               | ) LOCHEM EMPE              | יש פוודיים                          | 640   |                       |  |  |          |              |
|         |            | Fill S address 400                 | , HOCOSI SIKEE             | , 0011B                             | V 4.4   |                       |  | FED (600   |          |              |

### 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

Name of the organization

JERRED D. RUBLE FAMILY CHARITABLE

Employer identification number

45-2153676 FOUNDATION Organization type (check one) Filers of: Section: ) (enter number) organization Form 990 or 990-EZ 501(c)( 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 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 (entering "N/A" in column (b) instead of the contributor name and address), 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

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).

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) (2020)

Name of organization

JERRED D. RUBLE FAMILY CHARITABLE

FOUNDATION

Employer identification number

45-2153676

| Part I     | Contributors (see instructions). Use duplicate copies of Part I is | f additional space is needed. |  |
|------------|--|-------------------------------|--|
| (a)<br>No. | (b) Name, address, and ZIP + 4                                     | (c)<br>Total contributions    | (d) Type of contribution   |
| 1          | GEORGE SCHAFF  22718 S. WIRTH LN.  FRANKFORT, IL 60423             | \$60,000.                     | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                  | (c)<br>Total contributions    | (d)<br>Type of contribution  |
|            |  | \$                            | Person Payroll Noncash (Complete Part II for noncash contributions.)   |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                  | (c) Total contributions       | (d)<br>Type of contribution  |
|            |  | \$                            | Person Payroll Noncash (Complete Part II for noncash contributions.)   |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                  | (c) Total contributions       | (d)<br>Type of contribution  |
|            |  | \$                            | Person Payroll Noncash (Complete Part II for noncash contributions.)   |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                  | (c) Total contributions       | (d)<br>Type of contribution  |
|            |  | \$                            | Person Payroll Noncash (Complete Part II for noncash contributions.)   |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                  | (c) Total contributions       | (d)<br>Type of contribution  |
| 140.       |  | \$                            | Person Payroll Noncash (Complete Part II for noncash contributions.)   |

Name of organization

JERRED D. RUBLE FAMILY CHARITABLE

FOUNDATION

Employer identification number

45-2153676

| cash Property (see instructions). Use duplicate copies of Pa | rt II if additional space is needed.  | -   |
|--|---|---|
| (b)  Description of noncash property given                   | (c) FMV (or estimate) (See instructions.)   | (d)<br>Date received  |
|  | <b>\$</b>   |   |
| (b)<br>Description of noncash property given                 | (c) FMV (or estimate) (See instructions.)   | (d)<br>Date received  |
|  | \$  |   |
| (b)  Description of noncash property given                   | (c) FMV (or estimate) (See instructions.)   | (d)<br>Date received  |
|  | \$  | 8   |
| (b)  Description of noncash property given                   | (c) FMV (or estimate) (See instructions.)   | (d)<br>Date received  |
|  | \$  |   |
| (b)  Description of noncash property given                   | (c) FMV (or estimate) (See instructions.)   | (d)<br>Date received  |
|  | \$  |   |
| (b)  Description of noncash property given                   | (c) FMV (or estimate) (See instructions.)   | (d)<br>Date received  |
|  |   |   |
|  | (b) Description of noncash property given  (b) Description of noncash property given | (b) Description of noncash property given  (c) FMV (or estimate) (see instructions.)  (d) FMV (or estimate) (see instructions.)  (e) FMV (or estimate) (see instructions.)  (f) FMV (or estimate) (see instructions.)  (h) Description of noncash property given  (c) FMV (or estimate) (see instructions.)  (d) FMV (or estimate) (see instructions.)  (e) FMV (or estimate) (see instructions.)  (f) FMV (or estimate) (see instructions.)  (g) FMV (or estimate) (see instructions.)  (h) Description of noncash property given  (g) FMV (or estimate) (see instructions.) |

|                           | m 990, 990-EZ, or 990-PF) (2020)               |   | Employer identification number  |  |  |  |
|---------------------------|--|---|---|--|--|--|
| me of organiz             |  |   | Employer Identification number  |  |  |  |
|                           | BLE FAMILY CHARITABLE                          |   | 45-2153676  |  |  |  |
| fro                       | m any one contributor. Complete columns (a)    | through (e) and the following line entry.<br>haritable, etc., contributions of \$1,000 or les | ion 501(c)(7), (8), or (10) that total more than \$1,000 for the year. For organizations ss for the year. (Enter this info. onca.) \$ |  |  |  |
| Us                        | e duplicate copies of Part III if additional s | space is needed.  |   |  |  |  |
| a) No.<br>from<br>Part I  | (b) Purpose of gift                            | (c) Use of gift   | (d) Description of how gift is held   |  |  |  |
|                           | Transferee's name, address, ar                 | (e) Transfer of gift 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, a                  | nd ZIP + 4  | Relationship of transferor to transferee  |  |  |  |
| (a) No.<br>from<br>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, a                  | nd ZIP + 4  | Relationship of transferor to transferee  |  |  |  |
| (a) No.<br>from<br>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, a                  | and ZIP + 4   | Relationship of transferor to transferee  |  |  |  |
| -                         |  |   |   |  |  |  |

| FORM 990-PF  | DIVIDENDS       | AND INTERE   | ST FROM SECUR  | ITIES ST                                 | PATEMENT 1   |
|--|-----------------|--|--|--|--|
| SOURCE   | GROSS<br>AMOUNT | CAPITAL<br>GAINS<br>DIVIDENDS  | (A)<br>REVENUE<br>PER BOOKS  | (B)<br>NET INVEST-<br>MENT INCOME        | (C)<br>ADJUSTED<br>NET INCOME                                      |
| <br>NORTHWESTERN<br>MUTUAL - DIVIDENDS   | 2,391.          | 91   | 3. 1,478.  | 1,478.                                   |  |
| NORTHWESTERN<br>MUTUAL - INTEREST  | 4,              |  | 0, 4.  | 4.                                       |  |
| TO PART I, LINE 4  | 2,395.          | . 91   | 1,482.   | 1,482.                                   |  |
| FORM 990-PF  |                 | ACCOUNTI   | NG FEES  | S  | FATEMENT 2   |
| DESCRIPTION  |                 | (A)<br>EXPENSES<br>PER BOOKS   | (B)<br>NET INVEST-<br>MENT INCOME  | (C)<br>ADJUSTED<br>NET INCOME            | (D)<br>CHARITABLE<br>PURPOSES                                      |
|  | 8               | 1,136.   | 568.   |  | 568  |
| TAX PREP FEES  |                 |  |  |  |  |
| TAX PREP FEES TO FORM 990-PF, PG 1   | 1, LN 16B       | 1,136.   | 568.   |  | 568  |
|  | 1               |  | SIONAL FEES  | S  | TATEMENT 3   |
| TO FORM 990-PF, PG 1   | 1               |  |  | (C)<br>ADJUSTED<br>NET INCOME            | TATEMENT 3   |
| TO FORM 990-PF, PG 1   | 1               | THER PROFES  (A)  EXPENSES   | SIONAL FEES  (B)  NET INVEST-  MENT INCOME                                   | (C)<br>ADJUSTED                          | (D) CHARITABLE PURPOSES  |
| TO FORM 990-PF, PG 1 FORM 990-PF DESCRIPTION                                       | 07              | (A) EXPENSES PER BOOKS   | SIONAL FEES  (B)  NET INVEST-  MENT INCOME                                   | (C)<br>ADJUSTED                          | (D)<br>CHARITABLE  |
| FORM 990-PF, PG 1  FORM 990-PF  DESCRIPTION  INVESTMENT FEES  TO FORM 990-PF, PG 1 | 07              | (A) EXPENSES PER BOOKS 1,263.  | (B) NET INVEST- MENT INCOME  1,263.  | (C) ADJUSTED NET INCOME                  | (D) CHARITABLE PURPOSES  |
| TO FORM 990-PF, PG 1 FORM 990-PF  DESCRIPTION  INVESTMENT FEES                     | 07              | (A) EXPENSES PER BOOKS   | (B) NET INVEST- MENT INCOME  1,263.  | (C) ADJUSTED NET INCOME                  | (D) CHARITABLI PURPOSES  |
| FORM 990-PF, PG 1  FORM 990-PF  DESCRIPTION  INVESTMENT FEES  TO FORM 990-PF, PG 1 | 07              | (A) EXPENSES PER BOOKS 1,263.  | (B) NET INVEST- MENT INCOME  1,263.  | (C) ADJUSTED NET INCOME                  | TATEMENT 3  (D) CHARITABLI PURPOSES  0  TATEMENT 4  (D)            |
| TO FORM 990-PF, PG 1 FORM 990-PF  DESCRIPTION INVESTMENT FEES TO FORM 990-PF, PG 1 | 07<br>1, LN 16C | THER PROFES  (A)  EXPENSES PER BOOKS  1,263.  1,263.  TAX  (A)  EXPENSES | (B) NET INVEST- MENT INCOME  1,263.  1,263.  ES  (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME  S  (C) ADJUSTED | TATEMENT 3  (D) CHARITABLE PURPOSES  0  TATEMENT 4  (D) CHARITABLE |

| FORM 990-PF O                    | THER | INVESTMENTS         |            | STATEMENT 5          |
|----------------------------------|------|---------------------|------------|----------------------|
| DESCRIPTION                      |      | VALUATION<br>METHOD | BOOK VALUE | FAIR MARKET<br>VALUE |
| 20-35 FLOUR CITY TRACTOR         |      | COST                | 106,967.   | 240,000.             |
| 20-35 EB BIG 4-20 TRACTOR        |      | COST                | 132,211.   | 200,000.             |
| 15-30 RUMELY OIL PULL TRACTOR, T | YPE  | COST                |            |                      |
| F                                |      |                     | 140,500.   | 170,000.             |
| 40-70 FLOUR CITY TRACTOR         |      | COST                | 365,412.   | 450,000.             |
| NORTHWESTERN MUTUAL - MUTUAL FUN | IDS  | COST                | 74,864.    | 82,707.              |
| 30 DC DCS STEAMER                |      | COST                | 58,500.    | 58,500.              |
| TOTAL TO FORM 990-PF, PART II, L | INE  | 13                  | 878,454.   | 1,201,207.           |

GENERAL EXPLANATION

STATEMENT 6

#### FORM/LINE IDENTIFIER

SUPPLEMENTAL INFORMATION - FORM 990PF, PART VII-A, QUESTION B:

#### EXPLANATION:

WEBSITE ADDRESS:

HTTP://WWW.IOWAOLDIRON.INFO