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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0047

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning and ending

B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
COMMUNITY FOUNDATION OF NORTHEAST IOWA

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
P.O. BOX 1176

City or town, state or country, and ZIP + 4
WATERLOO, IA 50704-1176

D Employer identification number
42-6060414

E Telephone number
319-287-9106

G Gross receipts $ 13,459,577.

F Name and address of principal officer: Mary Ann Burk
same as C above

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: ☒ 501(c)(3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ www.cfneia.org

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1956 M State of legal domicile: IA

Part I Summary

1 Briefly describe the organization's mission or most significant activities: SUPPORT OF CIVIC AND CHARITABLE ORGANIZATIONS

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	17
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	16
5	Total number of employees (Part V, line 2a)	5	9
6	Total number of volunteers (estimate if necessary)	6	0
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	7,131,786.	5,884,405.
9	Program service revenue (Part VIII, line 2g)		
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-80,492.	401,879.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	7,051,294.	6,286,284.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	2,850,749.	4,466,257.
14	Benefits paid to or for members (Part IX, column (A), line 4)		
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	216,548.	370,028.
16a	Professional fundraising fees (Part IX, column (A), line 11e)		
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 175,592.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	74,650.	119,317.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,141,947.	4,955,602.
19	Revenue less expenses. Subtract line 18 from line 12	3,909,347.	1,330,682.

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	40,631,626.	47,754,864.
21	Total liabilities (Part X, line 26)	1,183.	3,869.
22	Net assets or fund balances. Subtract line 21 from line 20	40,630,443.	47,750,995.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

▶ Mary Ann Burk
Signature of officer — Date 9/30/10

▶ Mary Ann Burk, President
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ Steven K. Duggan — Date 8/30/10 — Check if self-employed ▶ ☐ — Preparer's identifying number (see instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ HOGAN - HANSEN, P.C.
3128 BROCKWAY RD., P.O. BOX 240
WATERLOO, IA 50704-0240

EIN ▶

Phone no. ▶ 319-233-5225

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

gre

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission:
SUPPORT CIVIC AND CHARITABLE ORGANIZATIONS

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code) (Expenses $ 4,466,257. including grants of $) (Revenue $)
CHOSEN BY THE BOARD OF DIRECTORS, DISTIBUTIONS ARE MADE IN THE FOLLOWING AREAS; ARTS & CULTURE, COMMUNITY AFFAIRS & DEVELOPMENT, EDUCATION, ENVIRONMENTAL EDUCATION & PROTECTION, HEALTH, HISTORICAL PRESERVATION & HUMAN SVCS.

4b (Code) (Expenses $ including grants of $) (Revenue $)

4c (Code.) (Expenses $ including grants of $) (Revenue $)

4d Other program services (Describe in Schedule O)
(Expenses $ including grants of $) (Revenue $)

4e Total program service expenses ▶ $ 4,466,257.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? *If "Yes," complete Schedule C, Part II*	4		X
5	**Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.** Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? *If "Yes," complete Schedule C, Part III*	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8	X	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	X	
11	Is the organization's answer to any of the following questions "Yes"? *If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable*	11	X	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*			
	• Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII.*			
	• Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*			
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX.*			
	• Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*			
	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? *If "Yes," complete Schedule D, Part X*			
12	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII.*	12	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional* (Yes: , No: X)	12A		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *If "Yes," complete Schedule F, Part I*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? *If "Yes," complete Schedule F, Part II*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Part III*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		X
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20		X

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	X	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K If "No", go to line 25*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30	X	
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35	X	
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	1a	11		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	9		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* this return (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	3a			X
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			X
b	If "Yes," enter the name of the foreign country: ▶ _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c			
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?	6a			X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	7a			X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g			X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h			X
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8			X
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?	9a			X
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b			X
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			

Part VI Governance, Management, and Disclosure *For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.*

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body	1a 17		
b	Enter the number of voting members that are independent	1b 16		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9		X

Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code.)*

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	X	
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	X	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	X	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this is done*	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ None

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available Check all that apply

[X] Own website [X] Another's website [X] Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶

Stacy Paul - 319-287-9106
425 Cedar Street, Waterloo, IA 50703

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order individual trustees or directors, institutional trustees; officers, key employees, highest compensated employees; and former such persons.

☐ Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MARY ANN BURK PRESIDENT AND CEO	40.00	X		X		X		94,429.	0.	0.
THOMAS PORTH TREASURER	0.10	X		X				0.	0.	0.
MARK BALDWIN PAST CHAIR	0.10	X		X				0.	0.	0.
CHUCK SHIREY FIRST VICE CHAIR	0.10	X		X				0.	0.	0.
DEE VANDEVENTER CHAIR	0.10	X		X				0.	0.	0.
DAWN DUVEN DISTRIBUTION CHAIR	0.10	X		X				0.	0.	0.
JOHN LARSEN DIRECTOR	0.10	X						0.	0.	0.
BARB OPHEIM DIRECTOR	0.10	X						0.	0.	0.
GARY BERTCH SECOND VICE CHAIR	0.10	X		X				0.	0.	0.
DENNIS CLARK INVESTMENT CHAIR	0.10	X		X				0.	0.	0.
KATY WILLIAMS SECRETARY	0.10	X		X				0.	0.	0.
LOIS RUPKEY-COHRT DIRECTOR	0.10	X						0.	0.	0.
JOHN MONAGHAN DIRECTOR	0.10	X						0.	0.	0.
LORI JOHNSON DIRECTOR	0.10	X						0.	0.	0.
KYLE CHRISTIASON DIRECTOR	0.10	X						0.	0.	0.
SUE NELSON DIRECTOR	0.10	X						0.	0.	0.
ROB ROBINSON DIRECTOR	0.10	X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees *(continued)*

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
SHERRY PADAVICH DIRECTOR	0.10	X						0.	0.	0.
BRYAN BURTON DIRECTOR	0.10	X						0.	0.	0.
DEB YOUNG DIRECTOR	0.10	X						0.	0.	0.
1b Total ▶								94,429.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶ 0

		Yes	No
3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	4		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization NONE

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶ 0

Part VIII Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns 1a				
	b Membership dues 1b				
	c Fundraising events 1c				
	d Related organizations 1d				
	e Government grants (contributions) 1e 2,452,844.				
	f All other contributions, gifts, grants, and similar amounts not included above 1f 3,431,561.				
	g Noncash contributions included in lines 1a-1f $ 803,378.				
	h **Total.** Add lines 1a-1f ▶	5,884,405.			
Program Service Revenue		Business Code			
	2a				
	b				
	c				
	d				
	e				
	f All other program service revenue				
	g **Total.** Add lines 2a-2f ▶				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶	1,002,083.			1002083.
	4 Income from investment of tax-exempt bond proceeds ▶				
	5 Royalties ▶				
		(i) Real / (ii) Personal			
	6a Gross Rents				
	b Less. rental expenses				
	c Rental income or (loss)				
	d Net rental income or (loss) ▶				
		(i) Securities / (ii) Other			
	7a Gross amount from sales of assets other than inventory	6573089.			
	b Less: cost or other basis and sales expenses	7173293.			
	c Gain or (loss)	-600204.			
	d Net gain or (loss) ▶	-600,204.	-600,204.		
	8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c). See Part IV, line 18 a				
	b Less: direct expenses b				
	c Net income or (loss) from fundraising events ▶				
	9a Gross income from gaming activities See Part IV, line 19 a				
	b Less direct expenses b				
	c Net income or (loss) from gaming activities ▶				
	10a Gross sales of inventory, less returns and allowances a				
	b Less. cost of goods sold b				
	c Net income or (loss) from sales of inventory ▶				
	Miscellaneous Revenue	Business Code			
	11a				
	b				
	c				
	d All other revenue				
	e **Total.** Add lines 11a-11d ▶				
	12 Total revenue See instructions. ▶	6,286,284.	-600,204.	0.	1002083.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	4,466,257.	4,466,257.		
2 Grants and other assistance to individuals in the U.S See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	101,720.		50,860.	50,860.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	220,752.		135,434.	85,318.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	8,963.		5,826.	3,137.
9 Other employee benefits	15,538.		10,100.	5,438.
10 Payroll taxes	23,055.		12,637.	10,418.
11 Fees for services (non-employees)				
a Management				
b Legal	143.		143.	
c Accounting	24,974.		24,974.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion	9,911.			9,911.
13 Office expenses	20,712.		11,143.	9,569.
14 Information technology				
15 Royalties				
16 Occupancy	18,271.		18,271.	
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,348.		2,863.	-515.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	9,340.		9,340.	
23 Insurance	4,932.		4,932.	
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a EQUIPMENT RENTAL AND MA	12,229.		12,229.	
b DUES AND MEMBERSHIPS	9,527.		9,527.	
c License Fees/Dues/Subsc	1,943.		1,943.	
d CONSULTING	1,170.		1,170.	
e ONLINE DONATION FEES	934.			934.
f All other expenses	2,883.		2,361.	522.
25 Total functional expenses. Add lines 1 through 24f	4,955,602.	4,466,257.	313,753.	175,592.
26 Joint costs Check here ▶ ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing		298.	1	295.
	2	Savings and temporary cash investments		7,245,126.	2	2,397,341.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment. cost or other basis. Complete Part VI of Schedule D	10a 119,564.			
	b	Less. accumulated depreciation	10b 89,612.	39,292.	10c	29,952.
	11	Investments - publicly traded securities		29,786,031.	11	41,600,415.
	12	Investments - other securities See Part IV, line 11			12	
	13	Investments - program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		3,560,879.	15	3,726,861.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		40,631,626.	16	47,754,864.
Liabilities	17	Accounts payable and accrued expenses		1,183.	17	3,869.
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities Complete Part X of Schedule D			25	
	26	**Total liabilities.** Add lines 17 through 25		1,183.	26	3,869.
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		18,543,594.	27	21,850,910.
	28	Temporarily restricted net assets		22,086,849.	28	25,900,085.
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117, check here ▶ [ ] and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		40,630,443.	33	47,750,995.
	34	Total liabilities and net assets/fund balances		40,631,626.	34	47,754,864.

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990 ☒ Cash ☐ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	X	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both ☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions.**

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization	Employer identification number
COMMUNITY FOUNDATION OF NORTHEAST IOWA	42-6060414

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.

a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box . . . . . ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i)	A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?		
(ii)	A family member of a person described in (i) above?		
(iii)	A 35% controlled entity of a person described in (i) or (ii) above?		

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	6722979.	8361104.	7931844.	7131786.	5884405.	36032118.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	6722979.	8361104.	7931844.	7131786.	5884405.	36032118.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4						36032118.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	6722979.	8361104.	7931844.	7131786.	5884405.	36032118.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	650,536.	1171797.	1158857.	764,846.	401,879.	4147915.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 **Total support.** Add lines 7 through 10						40180033.

12 Gross receipts from related activities, etc (see instructions) 12

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	89.68 %
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	88.86 %

16a **33 1/3% support test - 2009.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3% support test - 2008.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10% -facts-and-circumstances test - 2009.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

b **10% -facts-and-circumstances test - 2008.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support** (Add lines 9, 10c, 11, and 12)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2009** (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from **2008** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2009.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests - 2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Schedule D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization: COMMUNITY FOUNDATION OF NORTHEAST IOWA

Employer identification number: 42-6060414

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	76	285
2	Aggregate contributions to (during year)	1,071,867.	4,807,537.
3	Aggregate grants from (during year)	242,475.	4,223,880.
4	Aggregate value at end of year	8,025,852.	39,725,143.

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? [X] Yes [ ] No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? [X] Yes [ ] No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

- [ ] Preservation of land for public use (e.g., recreation or pleasure)
- [ ] Protection of natural habitat
- [ ] Preservation of open space
- [ ] Preservation of an historically important land area
- [ ] Preservation of a certified historic structure

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

		Held at the End of the Tax Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? [ ] Yes [ ] No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? [ ] Yes [ ] No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ 283,123.

(ii) Assets included in Form 990, Part X ▶ $ 3,399,813.

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a [X] Public exhibition
b [ ] Scholarly research
c [ ] Preservation for future generations
d [ ] Loan or exchange programs
e [ ] Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? [ ] Yes [X] No

Part IV Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? [ ] Yes [ ] No

b If "Yes," explain the arrangement in Part XIV and complete the following table.

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? [ ] Yes [ ] No

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	30792359.	35033150.			
b Contributions	2,326,843.	3,796,058.			
c Net investment earnings, gains, and losses	6,138,545.	-7126069.			
d Grants or scholarships	1,036,871.	677,486.			
e Other expenditures for facilities and programs					
f Administrative expenses	647,796.	233,294.			
g End of year balance	37573080.	30792359.			

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ▶ 100.00 %
b Permanent endowment ▶ _____ %
c Term endowment ▶ _____ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
(i) unrelated organizations 3a(i)		X
(ii) related organizations 3a(ii)		X
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements	28,874.		14,648.	14,226.
d Equipment	52,389.		37,382.	15,007.
e Other	38,301.		37,582.	719.
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				29,952.

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
Total (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Total (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15

(a) Description	(b) Book value
CASH VALUE LIFE INSURANCE	327,048.
PERMANENT ART COLLECTION	3,399,813.
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15)* ▶	3,726,861.

Part X Other Liabilities. See Form 990, Part X, line 25

1. (a) Description of liability	(b) Amount
Federal income taxes	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	6,286,284.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	4,955,602.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	1,330,682.
4	Net unrealized gains (losses) on investments	4	5,789,870.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net). Add lines 4 through 8	9	5,789,870.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	7,120,552.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	12,076,154.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains on investments	2a	5,789,870.		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV.)	2d			
e	Add lines 2a through 2d			2e	5,789,870.
3	Subtract line 2e from line 1			3	6,286,284.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b			
c	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 12.)*			5	6,286,284.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	4,955,602.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	4,955,602.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 18.)*			5	4,955,602.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Part III, line 4: Collections consist of works of art donated to, and purchased by, the Foundation. The Foundation accepts donations of art on behalf of the City of Waterloo and then loans the art to local museums for public exhibition.

Part V, line 4: The use of the endowment income is either unrestricted or temporarily restricted based upon the wishes of the donor. The corpus of the endowment is available for spending based upon the donor's intent.

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02-01-10

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization

COMMUNITY FOUNDATION OF NORTHEAST IOWA

Employer identification number

42-6060414

Part I **General Information on Grants and Assistance**

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes [ ] No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II **Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000 Check this box if no one recipient received more than $5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ▶ [ ]

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SEE ATTACHED SCHEDULE			2,796,156.	0.			

2 Enter total number of section 501(c)(3) and government organizations ▶ 148.

3 Enter total number of other organizations ▶ 92.

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information

Schedule I, Part I, Line 2: The Foundation requires grantees to sign a Terms of Grant Agreement specifying what the grant funds are to used for, amount, reporting requirements and accounting requirements before the money is given. Then the Foundation requires a Grant Report for all grants over $5,000 that are for a specific purpose. Grantees are sent reminder letters if reports are not filed on time. For general charitable support grants over $5,000, the grantee may just submit annual financial statements. For project grants, the payee is required to submit specific documentation such as bills, invoices, and receipts of purchase.

SCHEDULE J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization

COMMUNITY FOUNDATION OF NORTHEAST IOWA

Employer identification number

42-6060414

Part I Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
	☐ First-class or charter travel		
	☐ Travel for companions		
	☐ Tax indemnification and gross-up payments		
	☐ Discretionary spending account		
	☐ Housing allowance or residence for personal use		
	☐ Payments for business use of personal residence		
	☒ Health or social club dues or initiation fees		
	☐ Personal services (e.g., maid, chauffeur, chef)		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain . . 1b	X	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2	X	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply		
	☐ Compensation committee		
	☐ Independent compensation consultant		
	☐ Form 990 of other organizations		
	☐ Written employment contract		
	☒ Compensation survey or study		
	☒ Approval by the board or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization		
a	Receive a severance payment or change-of-control payment? 4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b		X
c	Participate in, or receive payment from, an equity-based compensation arrangement? 4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.		
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a	The organization? 5a		X
b	Any related organization? 5b		X
	If "Yes" to line 5a or 5b, describe in Part III.		
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a	The organization? 6a		X
b	Any related organization? 6b		X
	If "Yes" to line 6a or 6b, describe in Part III		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53.4958-4(a)(3)? If "Yes," describe in Part III 8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958 6(c)? 9		

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(i)							
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	(i)							
	(ii)							

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization

COMMUNITY FOUNDATION OF NORTHEAST IOWA

Employer identification number

42-6060414

Part I Types of Property

		(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1	Art - Works of art	X	34	283,123.	APPRAISAL
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	X	3	520,255.	FMV on date of donat
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ ( )				
26	Other ▶ ( )				
27	Other ▶ ( )				
28	Other ▶ ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgment — 29

			Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a		X
b	If "Yes," describe the arrangement in Part II.			
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	X	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		X
b	If "Yes," describe in Part II.			
33	If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II			

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization

COMMUNITY FOUNDATION OF NORTHEAST IOWA

Employer identification number

42-6060414

Form 990, Part VI, Section B, line 11: The Organization's board will review the Form 990 this year before it is filed.

Form 990, Part VI, Section B, Line 12c: Conflict of interest statements are required annually. The CEO/president reviews the statements and reports the results to the board of directors.

Form 990, Part VI, Section B, Line 15a: The CEO/president's salary is voted on by the board of directors annually. There are no other key employees and the board does not receive compensation.

Form 990, Part VI, Section C, Line 19: The organization makes these documents available to the public upon specific request and also has the documents posted on it's website.

SCHEDULE R
(Form 990)
Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization

COMMUNITY FOUNDATION OF NORTHEAST IOWA

Employer identification number

42-6060414

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
Community Foundation Realty Holdings - 42-1444029, P.O. Box 1176, Waterloo, IA 50704-1176	Support Civic and Charitable Actvities	Iowa	501(c)(3)	170(b)(1)(A)(v	Community Foundation of Northeast Iowa

LHA **For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.**

Schedule R (Form 990) 2009

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02-04-10

Part III **Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(d) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.)

		Yes	No
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule			
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	1a		X
b Gift, grant, or capital contribution to other organization(s)	1b		X
c Gift, grant, or capital contribution from other organization(s)	1c		X
d Loans or loan guarantees to or for other organization(s)	1d		X
e Loans or loan guarantees by other organization(s)	1e		X
f Sale of assets to other organization(s)	1f		X
g Purchase of assets from other organization(s)	1g		X
h Exchange of assets	1h		X
i Lease of facilities, equipment, or other assets to other organization(s)	1i		X
j Lease of facilities, equipment, or other assets from other organization(s)	1j		X
k Performance of services or membership or fundraising solicitations for other organization(s)	1k		X
l Performance of services or membership or fundraising solicitations by other organization(s)	1l		X
m Sharing of facilities, equipment, mailing lists, or other assets	1m		X
n Sharing of paid employees	1n		X
o Reimbursement paid to other organization for expenses	1o		X
p Reimbursement paid by other organization for expenses	1p		X
q Other transfer of cash or property to other organization(s)	1q		X
r Other transfer of cash or property from other organization(s)	1r		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

	(a) Name of other organization(s)	(b) Transaction type (a-r)	(c) Amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations? Yes	(d) No	(e) Share of end-of-year assets	(f) Disproportionate allocations? Yes	(f) No	(g) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner? Yes	(h) No

(a) Name & Address of Grantee	(b) EIN	(c)IRC section	(d) Amount of Cash Grant	(e) Amount of non-cash assistance	(f) Method of Valuation (book, FMV,appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of Grant
Black Hawk County Conservation Board, 657 Reserve Dr , Cedar Falls, IA 50613	42-6005328	115(1)	$20,000 00				Ranger Residence in Black Hawk Park-Flood Recovery
Bremer County Board of Supervisors-Bremer County Fair Association, 415 East Bremer, Waverly, IA 50677	42-6005345	115(1)	$6,000 00				Equipment update
Buchanan County Community Services, 210 5th Ave NE, Independence, IA 50644	42-6004794	115(1)	$18,500 00				Community Services- Long Term Disaster Recovery
Butler County Assessor, 428 6th St , PO Box 304, Allison, IA 50602	42-6004203	115(1)	$30,000 00				Property Tax Assessment Parkersburg-Tornado
City of Allison, P O Box 647, 410 N Main St , Allison, IA 50602	42-6004204	115(1)	$5,000 00				Wilder Park Playground Equipment
City of Aredale, 102 E. Main St., PO Box 36, Aredale, IA 50605	42-1189452	115(1)	$5,057 00				Generator for community emergency shelter
City of Armstrong, PO Box 229, Armstrong, IA 50514	42-6004240	115(1)	$10,000 00				Playground Equipment for the SE Neighborhood Park
City of Belle Plaine, 1207 8th Ave., Belle Plaine, IA 52208	42-6004272	115(1)	$6,000 00				Downtown Streetscape Enhancement
City of Buffalo Center- Heritage Town Center, PO Box 430, 314 1st Ave NW, Buffalo Center, IA 50424	42-6004304	115(1)	$10,000 00				Building a new community center & museum
City of Calmar, PO Box 268, 1010 S. Washington St , Calmar, IA 52132	42-6004315	115(1)	$8,800 00				Fire & Rescue- So We Can All Breathe Easier project
City of Calmar, PO Box 268, 1010 S Washington St , Calmar, IA 52132	42-6004315	115(1)	$5,000 00				Calmar Commercial Club- Bike Trail landscape project
City of Clarksville, 115 W Superior St , Clarksville, IA 50619	42-6004391	115(1)	$5,000 00				Clarksville Volunteer Fire Department-Replace Rescue Truck
City of Clutier, 241 Main Street, PO Box 117, Clutier, IA 52217	42-1218861	115(1)	$7,000 00				Upgrade computer system
City of Dumont- Dumont Community Library, P O Box 159, 602 2nd St , Dumont, IA 50625	42-6004604	115(1)	$6,000 00				Community Center Renovation
City of Floyd, PO Box 159, Floyd, IA 50435	42-6036479	115(1)	$5,000 00				Floyd Community Center - Refinish gym floor
City of Fort Atkinson, PO Box 36, Ft. Atkinson, IA 52144	42-1021689	115(1)	$5,000 00				Fire Department- Pump Upgrade Project
City of Gilbertville - Fire Department, 1321 5th St , Gilbertville, IA 50634	42-0865994	115(1)	$14,000 00				Purchase of rescue vehicle
City of Gladbrook- Gladbrook Fitness & Wellness Center, 319 2nd Street, PO Box 309, Gladbrook, IA 50635	42-6004706	115(1)	$7,800 00				Replace pool water heating system
City of Grinnell, 927 4th Ave , Grinnell, IA 50112	42-6004734	115(1)	$7,500 00				Grinnell Mutual Aquatics Center
City of Grundy Center/Chamber of Commerce, 705 F Ave , Grundy Center, IA 50638	42-6004737	115(1)	$5,000 00				Downtown sound system

City of Hampton, 122 First Ave NW, Hampton, IA 50441	42-6004755	115(1)	$5,488 46				Hampton Rotary Club- East Park Shelter House
City of Hartwick, 315 Vine St , Hartwick, IA 52232	42-0959201	115(1)	$9,000 00				Generator for Pumphouse- Hartwick Water System
City of Nashua, P O Box 38, Nashua, IA 50658	42-6005021	115(1)	$7,000 00				Equipment for Welcome Center
City of New Hartford, PO Box 212, 503 Packwaukee, New Hartford, IA 50660	42-6005033	115(1)	$10,000 00				New Hartford Little League Improvements
City of North Washington, c/o 114 S Wapsie St , New Hampton, IA 50659	42-1140167	115(1)	$10,000 00				Fire Department- Installation of Well & Fire Hydrant
City of Parkersburg- Kothe Memorial Library, PO Box 160, 309 3rd St , Parkersburg, IA 50665	42-6005112	115(1)	$5,000 00				Replace 2 Exterior Doors
City of Rake, PO Box 127, Rake, IA 50465	42-0889925	115(1)	$5,000 00				Rake Community Club--street lights for Main Street in Rake
City of Reinbeck, 414 Main St , Reinbeck, IA 50669	42-6005147	115(1)	$5,000 00				Purchase and installation of a generator
City of Sheffield, 110 S 3rd St , Sheffield, IA 50475	42-6005192	115(1)	$5,000 00				Volunteer Fire Department- Certified Equipment Purchase 2009
City of Spillville, PO Box 276, Spillville, IA 52168	42-0869418	115(1)	$15,050.00				Spillville Little League concession building
City of Spillville, PO Box 276, Spillville, IA 52168	42-0869418	115(1)	$6,000 00				Civic Improvement Association- Riverside Park Campground development
City of Thornton- Thornton EMS, PO Box 88, 404 Main St , Thornton, IA 50479	42-6005278	115(1)	$6,350 00				New equipment for new members--add'l training for new members
City of Traer-Shaker Gallery, 649 Second Street, Traer, IA 50675	42-6005278	115(1)	$9,259 13				Interior finish work in gallery
City of Victor-Downtown Improvement Committee of Comm Devel Assoc, 707 2nd St , Victor, IA 52347	42-6005297	115(1)	$5,000 00				Second Street lighting improvement
City of Wadena, 202 E Herriman Ave, Wadena, IA 52169	42-1050867	115(1)	$5,375 78				Wadena Illyria Volunteer Fire Department- roof, furnace and air in station
City of Wallingford - Community Center, P O Box 307, 101 St James Ave , Wallingford, IA 51365	42-6038393	115(1)	$5,373 13				Handicapped access to Community Center
City of West Union, 612 Hwy 150 South, PO Box 151, West Union, IA 52175	42-6005366	115(1)	$5,000 00				Clark Park Renovation Project
Emmet County Conservation Board, 2303 - 450th Avenue, Wallingford, IA 51365	42-6004648	115(1)	$7,750 00				Wolden Recreational Wastewater Treatment Station
Grundy County Agricultural Society, 706 G Ave , Grundy Center, IA 50638	42-6004738	115(1)	$10,000 00				New judging/exhibition building
Grundy County Conservation Board, 706 G Ave , Grundy Center, IA 50638	42-6004738	115(1)	$9,500 00				Picnic shelter at Grundy County Lake
Independence Community School District/East Elementary, 211 9th St SE, Independence, IA 50644	42-0896980	115(1)	$10,568 00				Playground renovations to meet Early Childhood standards
Independence Community School District/West Elementary, 211 9th St SE, Independence, IA 50644	42-0896980	115(1)	$5,000 00				Guided Reading lessons

Iowa County EMS/Ambulance Service, 355 W Lucas Street, Marengo, IA 52301	42-6004930	115(1)	$7,500.00				Purchase equipment for patient and staff safety
Kossuth County Board of Supervisors, 114 W State Street, Algona, IA 50511	77-0696034	115(1)	$6,000 00				Kossuth County Saddle Club- Upgrade horse facilities at Kossuth County Fairgrounds
Marshall County Conservation Board, 2349 - 233rd St , Marshalltown, IA 50158	42-6004936	115(1)	$5,000 00				American Discoveries Trail Connection
Marshalltown Community School District, 317 Columbus Dr , Marshalltown, IA 50158	42-6021927	115(1)	$5,000 00				Community School Nurse
Montezuma Community Schools, PO Box 580, Montezuma, IA 50171	42-6036027	115(1)	$10,000 00				Montezuma FFA- Classroom Technology Project
Montezuma Community Schools, PO Box 580, Montezuma, IA 50171	42-6036027	115(1)	$5,000 00				Presentation System & Mimeo
Poweshiek County Conservation Board, PO Box 666, Montezuma, IA 50171	42-6004976	115(1)	$12,000 00				Diamond Lake- Montezuma Trail (For Trail)
Tama County Conservation Board, 2283 Park Rd , Toledo, IA 52342	42-600-5285	115(1)	$15,000 00				Tama County Nature Center - Main Exhibit Room construction
Wapsie Valley Community School District - Fairbank Elementary	42-6025836	115(1)	$5,705 00				Project FRED (Family Reading Every Day)
City of Sumner, PO Box 236, Sumner, IA 50674	42-6005269	115(1)	$6,000 00				Recycling Center
City of Westgate, P O Box 187, Westgate, IA 50681	42-1177117	115(1)	$20,000 00				Westgate Community Building
Estherville-Lincoln Central Schools - PAT, 109 S 17th St , Estherville, IA 51334	39-1886795	115(1)	$7,094 00				Tutoring for K-4 grade students
Jesup Community School District/Middle School, P O Box 287, Jesup, IA 50648	42-6002171	115(1)	$7,000 00				New mobile computer lab
New Hampton Elementary School, 206 W Main, New Hampton, IA 50659	42-6002901	115(1)	$5,000.00				Interactive Boards
City of Belle Plaine-Parks & Rec Department-Playground Committee, 1207 8th Ave, Belle Plaine, IA 52208-8816	42-6004272	115(1)	$8,000 00				Belle Plaine Area Family Aquatic Center
City of Morrison, PO Box 34, 210 Sycamore St , Morrison, IA 50657	42-1186525	115(1)	$5,000 00				Town Park renovation Phase 2
City of Parkersburg, PO Box 489, Parkersburg, IA 50665	42-6005112	115(1)	$28,892 00				Emergency Services Building- Tornado Recovery
City of Parkersburg, PO Box 489, Parkersburg, IA 50665	42-6005112	115(1)	$5,000 00				Emergency Services Building
Waterloo Center for the Arts, 225 Commercial St , Waterloo, IA 50701	42-6005327	115(1)	$10,800 00				Balance due on purchase of "Song Sung Blue"- Large sculpture to be installed on the Arts Plaza
Waterloo Center for the Arts, 225 Commercial St , Waterloo, IA 50701	42-6005327	115(1)	$10,000 00				Folk Art acquisition trip to Mexico
Waterloo Center for the Arts, 225 Commercial St , Waterloo, IA 50701	42-6005327	115(1)	$10,000 00				Art and Environment· Where People Gather
Waterloo Center for the Arts, 225 Commercial St , Waterloo, IA 50701	42-6005327	115(1)	$7,454 00				General Charitable Support - Annual Distribution from the Endowment Fund-Transfer to WCA- EX Fund

Waterloo Center for the Arts, 225 Commercial St , Waterloo, IA 50701	42-6005327	115(1)	$10,000 00				Kent Shankle and Cammie Scully's Trip to Mexico to acquire folkart for the collection
Waterloo Community Schools, 1516 Washington St , Waterloo, IA 50702	42-6003910	115(1)	$21,781 10				New West High Personal Fitness Room
Waterloo Leisure Services, 1101 Campbell Ave , Waterloo, IA 50701	42-6005327	115(1)	$5,000 00				Pat Bowlsby - Off leash Dog Park
City of Thompson, 167 2nd Ave. West, PO Box 25, Thompson, IA 50478	42-6005276	115(1)	$9,538 13				Pool updates
City of Thompson- Fire Department, 167 2nd Ave West, PO Box 25, Thompson, IA 50478	42-6005276	115(1)	$7,000 00				Portable radios & pagers
City of Thompson-Thompson Ambulance Service, , 167 2nd Ave West, PO Box 25, Thompson, IA 50478	42-6005276	115(1)	$5,000 00				New Ambulance
Decorah Public Library, 202 Winnebago Street, Decorah, IA 52101	42-6004485	115(1)	$6,396.00				Community technology center
Tama County Economic Development, 1007 Prospect Dr , PO Box 22, Toledo, IA 52342	42-6005285	115(1)	$5,000 00				restoration of 1-room Haven country school
City of Wallingford- Fire Department, P O Box 307, 101 St. James Ave , Wallingford, IA 51365	42-6038393	115(1)	$6,800 00				New personal protective fire gear
Buchanan County Public Health- Buchanan County Health Center, 1413 First Street West, Indpendence, IA 50644	42-0727498	115(1)	$18,500 00				Public Health Services- Tornado Recovery
American Legion- Harold E Smith Post 54, 601 3rd St , Victor, IA 52347	42-0836133	501(c)(19)	$15,000 00				Replace ceiling tile and add insulation to ceiling
Waterloo Public Library Fund- SAME AS CFNEIA	42-6060414	501(c)(3)	$12,718 00				General Charitable Support- Annual Distribution from the Endowment Fund- Transfer to WPL- Nonendowed Subfund
Waterloo Public Library Fund- SAME AS CFNEIA	42-6060415	501(c)(3)	$9,914 89				Final payment for Feasibility Study
Waterloo Public Library Fund- SAME AS CFNEIA	42-6060416	501(c)(3)	$6,533 72				Authori-In-Residence April 27- May 1, 2009, author's honorarium, airfare and car rental
Waterloo Public Library Fund- SAME AS CFNEIA	42-6060417	501(c)(3)	$6,063 38				Mechanical/Electrical consulting for Training Center
Waterloo Public Library Fund- SAME AS CFNEIA	42-6060414	501(c)(3)	$5,487 00				General Charitable Support - Annual Distribution from the Endowment Fund- Transfer to WPL- Myrtle Smith Subfund
Winnebago County Extension- Winnebago County Fair Association	42-6021485	501(c)(3)	$5,000 00				Renovate bathrooms to make them handicap accessible
Covenant Medical Center- Retired & Senior Volunteer Program, 2101 Kimball Ave , Suite 121, Waterloo, IA 50702	42-1264647	501(c)(3)	$5,000 00				RSVP support of Prime Time (program of the Waterloo Schools in cooperation with RSVP)
First Presbyterian Church of Independence, 115 6th Avenue NW, PO Box 188, Independence, IA 50644	42-0863876	501(c)(3)	$10,000 00				Camp Noah- Buchanan County
PROSPER TEAM-Estherville, 26 S 17 Street, Estherville, IA 51334	42-6021421	501(c)(3)	$7,952 00				Strenghtening families program
Winneshiek County Agricultural Association	42-0605155	501(c)(3)	$6,000 00				Community Center completion

Woods Quality Center, Inc	42-1442125	501(c)(3)	$5,000 00				Workplace Learning Connection-Viewing the Future through a New Lens
Youth Pavilion Fund	42-6060414	501(c)(3)	$92,911 38				Reimbursement - City of Waterloo for expenses paid for the Youth Pavilion exhibit
ASPIRE-TRP, Inc , 8100 Kimball Avenue, Waterloo, IA 50701	42-1477803	501(c)(3)	$5,000 00				ASPIRE Therapeutic Riding Program
Benton County Community Foundation **Same TAX ID as CFNEIA	42-6060414	501(c)(3)	$6,580 00				Benton County Community Foundation Budget
Big Brothers/Big Sisters of Northeast Iowa, Inc 2530 University Avenue, Suite 8, Waterloo, IA 50701-3330	42-0885714	501(c)(3)	$15,000 00				AMACHI Mentoring Children of Prisoners Black Hawk County
Bosco System Schools 405 16th Ave, Gilbertville, IA 50634	42-0788230	501(c)(3)	$9,383 00				General Charitable Support
Buchanan County Disaster Recovery Coalition, 1701 First Street East, PO Box 204, Independence, IA 50644	26-3448428	501(c)(3)	$88,506 45				Ongoing Diasaster Recovery in Buchanan County- Building Materials, Case Advocacy, Victim Relief,
Buchanan County Disaster Recovery Coalition, 1701 First Street East, PO Box 204, Independence, IA 50644	26-3448428	501(c)(3)	$5,000 00				Individual assistance for natural disaster victims in Buchanan County
Butler County Visions of Well-Being, 713 Elm St , PO Box 744, Allison, IA 50602	42-1507164	501(c)(3)	$12,865 94				Tornado Victim Assistance- unmet individual needs
Cedar Valley Friends of the Family, PO Box 784, Waverly, IA 50677	42-1390144	501(c)(3)	$6,000 00				Renewing the Hope
Cedar Valley Friends of the Family, PO Box 784, Waverly, IA 50677	42-1390144	501(c)(3)	$6,000 00				"Renewing the Hope"
Cedar Valley United Way, 425 Cedar Street, Suite 300, Waterloo, IA 50701	42-0801846	501(c)(3)	$15,000 00				Black Hawk County Long Term Recovery Committee- Case Management/Direct Services- Flood Recovery
Cedar Valley United Way, 425 Cedar Street, Suite 300, Waterloo, IA 50701	42-0801846	501(c)(3)	$10,000 00				Support of the United Way Campaign
Cedar Valley United Way, 425 Cedar Street, Suite 300, Waterloo, IA 50701	42-0801846	501(c)(3)	$9,382 00				General Charitable Support- Annual Distribution from the Agency Endowment Fund
Charles City Civic Foundation, 401 N Main St , Charles City, IA 50616	42-1355655	501(c)(3)	$5,520 00				The HUT - Teen Resouce Center
Charles City Civic Foundation, 401 N Main St , Charles City, IA 50616	42-1355655	501(c)(3)	$5,000 00				Charles City Boat Dock Improvement Project
Charles City Family YMCA, 800 Hulin St., Charles City, IA 50616	42-0680309	501(c)(3)	$7,500 00				Youth Program Equipment
Communities in Schools, 213 E 4th Street, Waterloo, IA 50703	42-1444315	501(c)(3)	$11,500 00				Success Street
Consumer Credit Counseling Service of NE Iowa, Inc , 1003 W 4th Street, Waterloo, IA 50702	42-1236403	501(c)(3)	$7,000 00				Train the Trainer Money Map High School Financial Literacy
Denver Sunset Home, 235 North Mill Street, PO Box 383, Denver, IA 50622	42-0893350	501(c)(3)	$6,000 00				installation of new sprinkler system
DeSales School, 414 East Main St, Ossian, IA 52161	42-0680343	501(c)(3)	$8,000.00				Preschool- Growing in Fund

ECHO PLUS, Inc, 1520 Sixth Ave North, Estherville, IA 51334	23-7390451	501(c)(3)	$6,250 00				Purchase step van
Education Foundation of CAL, P O Box 459, Latimer, IA 50452	42-1459761	501(c)(3)	$7,988 46				Playground Phase III
El Centro Latinoamericano, 500 E 4th St , Suite 321, Waterloo, IA 50703	20-1500924	501(c)(3)	$10,000 00				Dream project
Emmet County Conservation Foundation - Peterson Point, 2109 Murray Rd , Estherville, IA 51334	42-1426192	501(c)(3)	$6,254 00				House restoration - Peterson Point
Emmet County Kinship, Inc , 115 N 6th Street, Estherville, IA 51334	20-4385603	501(c)(3)	$5,000 00				Mentoring program
Fairbank Community Day Care/Little Island Childcare Center, 101 4th North, Fairbank, IA 50629	42-1527111	501(c)(3)	$5,000 00				Storage improvements
Family and Children's Council of Black Hawk County, E 4th Street, Suite 414, Waterloo, IA 50703	42-1307663	501(c)(3)	$12,500 00				Parent Connection Program
First United Methodist Church, PO Box 556, Rockford, IA 50468	42-0919537	501(c)(3)	$5,000 00				Rockford Summer Recreation - Concession stand & restrooms
Floyd Community Volunteer Fire Department, 615 Monroe St , Floyd, IA 50435	20-5391726	501(c)(3)	$7,500.00				Fire Engine
Four Oaks, 402 E. 4th St , Waterloo, IA 50703	42-0998726	501(c)(3)	$10,000 00				Crisis Intervention
Four Oaks Family and Children's Services, 5400 Kirkwood Blvd, Cedar Rapids, IA 52404	42-0998726	501(c)(3)	$5,470 01				Benton/Iowa County Decategorization Project. Severely Emotionally Disturbed (SED) Wrap-Around Program
Franklin County Historical Society, 5 - 1st St SW, PO Box 114, Hampton, IA 50441	51-0159225	501(c)(3)	$6,000 00				Harriman Nielsen Historic Farm
Franklin County Historical Society, 5 - 1st St SW, PO Box 114, Hampton, IA 50441	51-0159225	501(c)(3)	$5,000.00				Old Stone House Restoration
Friends of Iowa County Conservation Foundation, 2550 G Ave , Ladora, IA 52551	92-2171779	501(c)(3)	$25,000 00				Lake Iowa Nature Center Project
From the Heart Fund- CFNEIA Address	42-6060414	501(c)(3)	$22,500 79				From the Heart 2008 Program Expenses
From the Heart Fund- CFNEIA Address	42-6060414	501(c)(3)	$10,000 00				2009 Waterloo Home Enhancement Project
Fund- Friends of the Waterloo Dog Park Fund-CFNEIA Address	42-6060414	501(c)(3)	$30,000.00				Dog Park fencing Contract, Part A
Fund- Friends of the Waterloo Dog Park Fund-CFNEIA Address	42-6060414	501(c)(3)	$9,910 00				Reimburse City for expenses already incurred. Largest expense - drinking fountains for dog park
Fund-Dunkerton Library Building Fund-CFNEIA Address	42-6060414	501(c)(3)	$42,221 82				Reimbursement of general city funds for Capital Campaign Expenses
Fund-Dunkerton Library Building Fund-CFNEIA Address	42-6060414	501(c)(3)	$16,548 20				Consultant Expenses incurred during capital campaign
Fund-Dunkerton Library Building Fund-CFNEIA Address	42-6060414	501(c)(3)	$9,921 00				Reimbursement for Engineer services by Terracon Consultants and Ament Engineering
Fund-Environmental Field of Interest Fund-CFNEIA Address	42-6060414	501(c)(3)	$6,609 00				Transfer to Environment Field of Interest Fund (BH00-W) for future grant making

Fund-Fayette County Community Foundation Fund-CFNEIA Address	42-6060414	501(c)(3)	$37,529 94				Opera House Renovation Project, Business District Improvement Project & River Park Improvement Project
Fund-FFE-Why Weight Fund-CFNEIA Address	42-6060414	501(c)(3)	$10,345 00				Exercise equipment for the East High Fitness Center
Fund-Floyd County Community Foundation-Marble Rock Visioning-CFNEIA Address	42-6060414	501(c)(3)	$5,000 00				FCCF Marble Rock Visioning Expendable Fund - Powerhouse Park Project
Fund-Friends of Fontana Park Expendable Fund-CFNEIA Address	42-6060414	501(c)(3)	$10,000 00				Transfer to Friends of Fontana Park Expendable Fund
Fund-Friends of Fontana Park Expendable Fund-CFNEIA Address	42-6060414	501(c)(3)	$10,000 00				Transfer to Fontana Expendable Fund
Fund-Greater Buchanan County Community Foundation Fund-CFNEIA Address	42-6060414	501(c)(3)	$10,500 00				Lights for East Buchanan Community Schools sports complex
Fund-Impact Fund-CFNEIA Address	42-6060414	501(c)(3)	$15,623 00				Impact Fund- larger, proactive, impact grants (reserve)
Fund-Mother Moon Service Scholarship Fund-CFNEIA Address	42-6060414	501(c)(3)	$7,500 00				Mother Moon Service Scholarships, Fellowship and Program Expenses
Fund-Winneshiek County Community Foundation Fund-CFNEIA Address	42-6060414	501(c)(3)	$306,406 06				Reimbursement to City of Decorah in accordance with the budget schedule of Trout Run Trail
Fund-Winneshiek County Community Foundation Fund-CFNEIA Address	42-6060414	501(c)(3)	$5,697 16				WCCF Special/Community Project Requests
Girl Scouts of Eastern Iowa and Western Illinois, 2011 2nd Avenue, Rock Island, IL 61201	42-1008848	501(c)(3)	$10,000 00				Youth leadership development outreach initiative
Girl Scouts of Eastern Iowa and Western Illinois, 2011 2nd Avenue, Rock Island, IL 61201	42-1008848	501(c)(3)	$8,620 00				General Charitable Support- Annual Distribution from the Agency Endowment Fund
Grace Baptist Church, 1110 4th St SW, Waverly, IA 50677	42-6083786	501(c)(3)	$5,000 00				Bremer County Recovery Coalition- Camp Noah
Grin and Grow Ltd , PO Box 717, Waterloo, IA 50704	42-1135299	501(c)(3)	$14,139 00				Quality Early Childhood education services
Grout Museum District, 503 South Street, Waterloo, IA 50701	42-1333059	501(c)(3)	$14,000 00				Museum School Student registration fees
Grout Museum District, 503 South Street, Waterloo, IA 50701	42-1333059	501(c)(3)	$10,000 00				General Charitable Support (Not capital expenses)
Grout Museum District, 503 South Street, Waterloo, IA 50701	42-1333059	501(c)(3)	$7,527 00				Renssellaer Russell House
Grout Museum District, 503 South Street, Waterloo, IA 50701	42-1333059	501(c)(3)	$7,230 00				Rensselaer Russell House
Iowa Heartland Habitat for Humanity, 803 W 5th Street, Waterloo, IA 50702	42-1408763	501(c)(3)	$5,000 00				Supplemental funding for Volunteer Coordinator/Family Services Staff and part time site supervisor
Habitat for Humanity - Fayette County, PO Box 127, Oelwein, IA 50062	42-1408763	501(c)(3)	$5,000 00				West Union house
Hawkeye Community College, PO Box 8015, Waterloo, IA 50704	42-6123782	501(c)(3)	$7,500 00				Hawkeye Community College Family Literacy Program
Iowa Baseball Museum of Norway, Inc, 112 East Railroad St, PO Box 151, Norway, IA 52318	26-3354848	501(c)(3)	$5,000 00				Start Up Construction Materials for Museum

Iowa Jobs for America's Graduates (I-JAG), Grimes Building, 3rd floor, 400E 14th St , Des Moines, IA 50319	42-1492988	501(c)(3)	$6,000 00				Waterloo East High School I-Jag for 2010-2011 School year
Iowa Legal Aid- Cedar Rapids Regional Office, 210 Second Street, Suite 302, Cedar Rapids, IA 52401	42-1079227	501(c)(3)	$5,000 00				Iowa County Outreach and Legal Assitance Project
Jordan River, Inc., 102 N. Main St , Charles City, IA 50616	26-0509029	501(c)(3)	$5,000 00				Cedar River Community Kitchen
Junior Achievement of Eastern Iowa, Inc , 425 Cedar Street, Waterloo, IA 50701	42-0919209	501(c)(3)	$10,800 00				JA Our Nation 5th Grade Programming
Junior Achievement of Eastern Iowa, Inc , 425 Cedar Street, Waterloo, IA 50701	42-0919209	501(c)(3)	$7,000 00				Junior Achievement of Eastern Iowa, Inc.
Kossuth Connections Coalition, 107 N Moore St , Algona, IA 50511	26-1402287	501(c)(3)	$5,000 00				Resource Center Expansion
Lutheran Services in Iowa, Inc , 925 e 4th St , Waterloo, IA 50703	42-0698267	501(c)(3)	$33,000 00				Case Advocate for Bremer/Butler Co - Flood Recovery
Lutheran Services in Iowa, Inc , 925 e 4th St., Waterloo, IA 50703	42-0698267	501(c)(3)	$10,000 00				Rural Disaster Recovery- Case Advocacy and Individual Victim Assistance in Rural Northeast Iowa
Marengo Picnic in the Park, Inc , 153 East Main Street, Marengo, IA 52301	20-4719977	501(c)(3)	$15,000 00				Park improvements
Marshall County Arts & Culture Alliance, P O Box 386, Marshalltown, IA 50158	27-0096223	501(c)(3)	$5,000 00				Linn Creek Arts Festival
Marshall County Coalition for Youth, 2500 S Center St , Suite 2380, Marshalltown, IA 50158	42-1441018	501(c)(3)	$7,500 00				Playing Safe for Quality
Marshalltown Youth Foundation, 317 Columbus Dr , Marshalltown, IA 50158	42-1475350	501(c)(3)	$5,000.00				Youth Activities Financial Assistance
Mason City Chamber of Commerce Foundation, 24 W State Street, Suite B, Mason City, IA 50401	42-1505507	501(c)(3)	$7,500 00				Vision Mason City
Mental Health Clinic of Tama County, 1309 South Broadway, Toledo, IA 52342	42-1229218	501(c)(3)	$7,789 00				General Charitable Support
Mercy Medical Center, 308 North Maple Ave , New Hampton, IA 50659	31-1373080	501(c)(3)	$6,000 00				Barrier Free Exam Tables
Mid-Iowa Community Action, Inc , 1001 South 18th St, Marshalltown, IA 50158	42-0923311	501(c)(3)	$5,488 00				General Charitable Support- Tama County
Nora Springs Community Foundation, Inc , PO Box 725, Nora Springs, IA 50458	90-0148329	501(c)(3)	$5,000 00				Carpet & Automatic entry doors at Eagle Family Health Clinic
Nora Springs Historical Society, 23 East Congress, Nora Springs, IA 50458	42-1320700	501(c)(3)	$5,000 00				Building for antique machinery
North Iowa Community Action Organization, P O Box 1627, Mason City, IA 50402	42-0921505	501(c)(3)	$8,503 62				Cerro Gordo Long Term Recovery Committee- Individual Assistance
North Kossuth Area Youth Development Council-T E A M -Swea City, P O Box 14, Swea City, IA 50590	42-1350684	501(c)(3)	$10,000.00				TEAM Senior Living Association- new Senior Assisted Living Center
North Star Community Services, 3420 University Avenue, Waterloo, IA 50701	42-1038039	501(c)(3)	$5,000 00				Newel Post Adult Day Care Sponsorship Project

Northeast Iowa Center for Independent Living, PO Box 2275, 2800 Falls Ave , Waterloo, IA 50704	42-1452251	501(c)(3)	$10,000 00				Prime Time Pass
Northeast Iowa Food Bank, PO Box 2397, Waterloo, IA 50704	42-1169648	501(c)(3)	$7,500 00				Cedar Valley Food Pantry
Northeast Iowa Food Bank, PO Box 2397, Waterloo, IA 50704	42-1169648	501(c)(3)	$5,000 00				General Charitable Support
Northeast Iowa Medical Education Foundation, 2055 Kimball Ave , Waterloo, IA 50702	42-1058745	501(c)(3)	$46,000 00				Residency Program Exp - student admin. & training
Northeast Iowa Medical Education Foundation, 2055 Kimball Ave , Waterloo, IA 50702	42-1058745	501(c)(3)	$25,619 09				Purchase of colonoscopy equipment
Northeast Iowa Medical Education Foundation, 2055 Kimball Ave , Waterloo, IA 50702	42-1058745	501(c)(3)	$6,000 00				Reimbursement for Purchase of Copier for NEIA Medical Education Foundation
Operation Threshold, PO Box 4120, 405 Chestnut St , Waterloo, IA 50704	42-0982549	501(c)(3)	$7,000 00				Housing and Fair Lending Counseling Program
Operation Threshold, PO Box 4120, 405 Chestnut St , Waterloo, IA 50704	42-0982549	501(c)(3)	$6,000 00				Rent Assistance on Temporary Agency Office Location due to Flood Recovery
Opportunity Scholarship Fund- SAME AS CFNEIA ADDRESS	42-6060414	501(c)(3)	$11,000 00				Transfer to Community Foundation Opportunity Scholarship Fund for 2009 Scholarships for Black Hawk County students
Opportunity Scholarship Fund- SAME AS CFNEIA ADDRESS	42-6060414	501(c)(3)	$11,000 00				2010 Opportunity Scholarships
Opportunity Scholarship Fund- SAME AS CFNEIA ADDRESS	42-6060414	501(c)(3)	$8,000 00				2009 Community Foundation Opportunity Scholarship for Emily Richter SS#479-29-3077
Opportunity Works Project Fund- SAME AS CFNEIA ADDRESS	42-6060414	501(c)(3)	$27,000 00				CURA My Entrenet Contract Payment
Opportunity Works Project Fund- SAME AS CFNEIA ADDRESS	42-6060414	501(c)(3)	$27,000 00				CURA MyEntreNet contract payment
People's Memorial Hospital- Buchanan County Health Center, 1600 First Street East, Independence, IA 50644	42-0727498	501(c)(3)	$5,000 00				Operation Communicable Disease Prevention
Presbytery of North Central Iowa, 2302 Falls Avenue, Waterloo, IA 50701	42-0960015	501(c)(3)	$5,000 00				Camp Noah
Quakerdale, PO Box 8, New Providence, IA 50206	42-0707117	501(c)(3)	$10,000 00				Waterloo Gender-Specific Residential Treatment
Salvation Army, PO Box 867, 89 Franklin St., Waterloo, IA 50704	36-2167910	501(c)(3)	$10,000 00				Upgrade Kitchen equipment for meal program
Salvation Army, PO Box 867, 89 Franklin St , Waterloo, IA 50704	36-2167910	501(c)(3)	$5,000 00				Support of the Women's Shelter & Activities
Social Action Inc , 227 Madison St., Waterloo, IA 50703	74-3084863	501(c)(3)	$5,000 00				Educational and recreational activities for at risk and disadvantaged youth
St Vincent DePaul, 320 Broadway St , Waterloo, IA 50703	42-0801845	501(c)(3)	$7,900 00				General Charitable Support
Tama County Day Care- Kids' Corner, 403 W Commercial St., Toledo, IA 52342	42-1157747	501(c)(3)	$5,190 00				General Charitable Support

The Learning Center, 404 N Jackson St , Charles City, IA 50616	42-1508110	501(c)(3)	$5,288 00				Art, music and drama materials and room dividers
The Nature Conservancy in Iowa, 303 Locust Street, Suite 402, Des Moines, IA 50309	53-0242652	501(c)(3)	$6,100 00				Cedar Hills Sand Prairie
Together for Youth/Allen Women's Health,233 Vold Drive, Waterloo, IA 50703	42-0698265	501(c)(3)	$10,000 00				Community Health Education
United Methodist Church of West Union, 301 Hansen Blvd , West Union, IA 52175	42-0844448	501(c)(3)	$6,750 00				Playground equipment and surrounding play area
United Way and Community Foundation of Northwest Iowa, 803 Central Ave., Fort Dodge, IA 50501	42-1439853	501(c)(3)	$82,921 79				Transfer of County Endowment Fund to Community Foundation of Northwest Iowa upon meeting National Standards for US Community Foundations
Waterloo Community Playhouse, PO Box 433, Waterloo, IA 50704	42-6018117	501(c)(3)	$17,500 00				Operational support
Waterloo Community Playhouse, PO Box 433, Waterloo, IA 50704	42-6018117	501(c)(3)	$5,985 00				Annual Distribution from the Agency Endowment Fund- General Charitable Support
Waterloo Community Playhouse, PO Box 433, Waterloo, IA 50704	42-6018117	501(c)(3)	$5,708 00				Upkeep & Maintenance on the Walker Building
Waterloo Community Playhouse, PO Box 433, Waterloo, IA 50704	42-6018117	501(c)(3)	$5,478 00				Upkeep & Maintenance on the Walker Building
Waterloo Community Playhouse, PO Box 433, Waterloo, IA 50704	42-6018117	501(c)(3)	$5,000.00				Costume Shop inventory replacement due to Flood Recovery
Waterloo-Cedar Falls Symphony Orchestra, Gallagher-Bluedorn PAC 17, Cedar Falls, IA 50613	42-0766745	501(c)(3)	$21,373 00				General Charitable Support- Annual Distribution from the Agency Endowment Fund
Waterloo-Cedar Falls Symphony Orchestra, Gallagher-Bluedorn PAC 17, Cedar Falls, IA 50613	42-0766745	501(c)(3)	$20,558 00				Semi-Annual Distribution from the Agency Endowment Fund- General Charitable Support
Waterloo-Cedar Falls Symphony Orchestra, Gallagher-Bluedorn PAC 17, Cedar Falls, IA 50613	42-0766745	501(c)(3)	$13,500.00				2010 Youth Concerts
Waterloo-Cedar Falls Symphony Orchestra, Gallagher-Bluedorn PAC 17, Cedar Falls, IA 50613	42-0766745	501(c)(3)	$5,000 00				Harp Chair and General Charitable Support
Winnebago Council of Boy Scouts, 2929 Airport Blvd , Waterloo, IA 50703	42-0985053	501(c)(3)	$5,740 00				Camp Ingawanis Waterfront improvements
YWCA of Black Hawk County, 425 Lafayette St , Waterloo, IA 50703	42-0680302	501(c)(3)	$20,000 00				Child care programs - financial assistance
YWCA of Black Hawk County, 425 Lafayette St , Waterloo, IA 50703	42-0680302	501(c)(3)	$5,000 00				General Charitable Support
Black Hawk Foster & Adoptive Parents 108 Sunset Lane, Elk Run Heights, IA 50707	42-1481245	501(c)(3)	$5,000 00				Black Hawk Foster and Adoptive Parents Association
Blairstown Community Foundation, P O Box 99, Blairstown, IA 52209	42-1286583	501(c)(3)	$7,000 00				Blairstown City Park Project
Boys and Girls Club of Black Hawk County, 515 Lime Street, Waterloo, IA 50703	42-6083723	501(c)(3)	$10,000 00				Boys and Girls Club of Black Hawk County
Algona Family YMCA Foundation, 5 East Call St , Algona, IA 50511	20-8688113	501(c)(3)	$24,500.00				Annual Distribution from the Endowment- General Charitable Support of the YMCA

Allen Women's Health, 233 Vold Drive, Waterloo, IA 50703	42-0698265	501(c)(3)	$32,353 00				To establish the Allen Child Protection Center
American Red Cross of the Tri-States- Tri-County Unit, 1111 Paine St Suite E, Decorah, IA 52101	53-0196605	501(c)(3)	$6,307 69				Students Save Lives
Benton County Disaster Recovery Coalition, PO Box 147, Vinton, IA 52349	26-3381606	501(c)(3)	$10,000 00				Flood Recovery Assistance
Cedar Valley Living, Inc d/b/a Angel House, 110 Wellington Street, Waterloo, IA 50701	26-4572231	501(c)(3)	$15,855 00				Clean and sober living facility for women
Chickasaw County Historical Society, 2729 Cheyenne Ave , Nashua, IA 50658	23-7410742	501(c)(3)	$6,000 00				Lighting in Old Bradford Pioneer Village Museum
Grinnell Regional Medical Center, 210 4th Ave , Grinnell, IA 50112	42-0933383	501(c)(3)	$7,440 00				Capital Expenses- Cot Warmer, Defibrillator, Recumbent Stepper
Grundy Center School Foundation, 1301 12th St, Grundy Center, IA 50638	42-1381035	501(c)(3)	$5,000 00				Stadium Renovation Project- Grant to be awarded in June 2009
Brooklyn Community Foundation, PO Box 66, Brooklyn, IA 52211	42-1479364	501(c)(3)	$5,000 00				BGM Sports Complex Expansion- For Fencing
Brooklyn Community Foundation- Brooklyn Ruritan Club, PO Box 66, Brooklyn, IA 52211	42-1479364	501(c)(3)	$6,400 00				Brooklyn Ruritan Club- BGM Outdoor Classroom Project- For Trail & Prairie Plantings
Buchanan County Volunteer Services, Inc , 309 First Street East, Independence, IA 50644	42-1369670	501(c)(3)	$6,600.00				"Managing Pressures" educational program on reducing negative health behaviors
Lawler Lions, Box 151, Lawler, IA 52154	65-1192812	501(c)(4)	$5,000 00				Replace bleachers at Junko Park in Lawler
Dysart Lions Club, 329 Main St , Dysart, IA 52224	42-6092405	501(c)(4)	$7,000 00				Lions Park food and youth storage building
New Hartford Lions Club, 301 Broadway, New Hartford, IA 50660	23-7307611	501(c)(4)	$5,000 00				New Hartford Beautification & Restoration Project
Cedar Falls Woman's Club, 304 Clay St , Cedar Falls, IA 50613	42-0172720	501(c)(4)	$5,000 00				Restoration of Victorian Home, creating handicapped accessible south entrance and restrooms
Benton Development Group, 303-1st Avenue, Vinton, IA 52349	42-1347303	501(c)(4)	$7,569 00				BDG Regional Marketing Alliance
Franklin County Agri & Fair Society, P O Box 442, Hampton, IA 50441	42-0260495	501(c)(5)	$5,000 00				New Roof for Cultural Center
Wishbone Restaurant	42-0894416	For Profit	$10,000 00				Flood recovery- basement repair & inventory replacement
Moment in Thyme Catering, 1925 Victory Drive, Cedar Falls, IA 50613	20-3688838	For Profit	$7,800 00				Flood Recovery- repair & replacement of commercial kitchen
Rainbow Florist & Greenhouse, 2005 Westfield Avenue, Waterloo, IA 50701	42-0933103	For Profit	$10,000.00				Flood recovery- repair of greenhouse and heat retention system
Scott's Electric, Inc , P O Box 1257, 2072 Howard Ave , Waterloo, IA 50704	42-1328668	For Profit	$10,000 00				Flood recovery- structural repair and replacement of inventory
Selesky Manufacturing, 339 Rath St , Waterloo, IA 50703	1-07-032979	For Profit	$5,000 00				Flood recovery- replacement of equipment and repair
Shady Rest Motel, 2010 Center St , Cedar Falls, IA 50613	47-2789529	For Profit	$10,000 00				Flood recovery- repair & rebuilding of 10 extended stay units

Victoria Room dba Oh So In Boutique, 221 W 4th St , Waterloo, IA	42-1209458	For Profit	$10,000 00				Flood recovery- basement repair and re-building
Aikey Auto Salvage, 1524 Independence Ave , Cedar Falls, IA 50613	42-1461981	For Profit	$12,200 00				Flood recovery- rebuilding office & shop-and replacement of inventory
Clarksville Food Pantry, PO Box 725, Clarksville, IA 50619	91-2000248	not federally classified*	$5,000.00				Feeding disaster victims, printing forms
Frederika Rural Fire Department, PO Box 114, Frederika, IA 50631	42-1208725	not federally classified*	$6,000 00				Replacement of turnout gear
Big Four Fair Association, Hwy 346 East, Nashua, IA 50658	42-1241919	not federally classified*	$7,500 23				Big Four Building Project

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property) 990

▶ See separate instructions. ▶ Attach to your tax return.

OMB No 1545-0172

2009

Attachment Sequence No **67**

Name(s) shown on return	Business or activity to which this form relates	Identifying number
COMMUNITY FOUNDATION OF NORTHEAST IOWA	Form 990 Page 10	42-6060414

Part I **Election To Expense Certain Property Under Section 179** Note: *If you have any listed property, complete Part V before you complete Part I*

1	Maximum amount See the instructions for a higher limit for certain businesses	1	250,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	800,000.
4	Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost

7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the **smaller** of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2008 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2010. Add lines 9 and 10, less line 12 ▶	13	

Note: *Do not use Part II or Part III below for listed property. Instead, use Part V*

Part II **Special Depreciation Allowance and Other Depreciation (Do not include listed property)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	9,340.

Part III **MACRS Depreciation (Do not include listed property) (See instructions)**

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2009	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ ☐		

Section B - Assets Placed in Service During 2009 Tax Year Using the General Depreciation System

	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property						
b	5-year property						
c	7-year property						
d	10-year property						
e	15-year property						
f	20-year property						
g	25-year property			25 yrs.		S/L	
h	Residential rental property	/		27 5 yrs	MM	S/L	
		/		27 5 yrs	MM	S/L	
i	Nonresidential real property	/		39 yrs.	MM	S/L	
		/			MM	S/L	

Section C - Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System

20a	Class life					S/L	
b	12-year			12 yrs		S/L	
c	40-year	/		40 yrs.	MM	S/L	

Part IV **Summary** (See instructions)

21	Listed property Enter amount from line 28	21	
22	**Total.** Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations - see instr	22	9,340.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V **Listed Property** (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: *For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete* **only** *24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.*

Section A - Depreciation and Other Information (Caution: *See the instructions for limits for passenger automobiles*)

24a Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No | 24b If "Yes," is the evidence written? ☐ Yes ☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use						25		
26 Property used more than 50% in a qualified business use:								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use:								
		%				S/L -		
		%				S/L -		
		%				S/L -		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1						28		
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1							29	

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person.
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
30 Total business/investment miles driven during the year (**do not** include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons.

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		
Note: *If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles*		

Part VI **Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2009 tax year:					
43 Amortization of costs that began before your 2009 tax year				43	
44 **Total.** Add amounts in column (f). See the instructions for where to report				44	