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

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

2010

For calendar year 2010, or tax year beginning January / , 2010, and ending December 31 , 20 10

G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity ☐ Final return
☐ Amended return ☐ Address change ☐ Name change

| | | |
|---|--|--|
| Name of foundation The Miccio Foundation | | A Employer identification number 42-1501038 |
| Number and street (or P.O. box number if mail is not delivered to street address) PO Box 522 | Room/suite | B Telephone number (see page 10 of the instructions) 319-337-6735 |
| City or town, state, and ZIP code Iowa City, IA 52244-0522 | | C If exemption application is pending, check here <input type="checkbox"/> |
| H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation | | D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> |
| I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 916,934 | J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ | E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> |
| (Part I, column (d) must be on cash basis.) | | F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/> |

| Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions).) | | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|--|---|------------------------------------|---------------------------|-------------------------|---|
| Revenue | 1 Contributions, gifts, grants, etc., received (attach schedule) | 675 | | | |
| | 2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B | | | | |
| | 3 Interest on savings and temporary cash investments | 52 | 52 | 52 | |
| | 4 Dividends and interest from securities | 24,880 | 24,880 | 24,880 | |
| | 5a Gross rents | 0 | 0 | 0 | |
| | b Net rental income or (loss) | 0 | | | |
| | 6a Net gain or (loss) from sale of assets not on line 10 | (2,593) | | | |
| | b Gross sales price for all assets on line 6a | 202,109 | | | |
| | 7 Capital gain net income (from Part IV, line 2) | | 0 | | |
| | 8 Net short-term capital gain | | | 34 | |
| | 9 Income modifications | | | 1,000 | |
| | 10a Gross sales less returns and allowances | 0 | | | |
| b Less: Cost of goods sold | 0 | | | | |
| c Gross profit or (loss) (attach schedule) | 0 | | 0 | | |
| 11 Other income (attach schedule) | 205 | 205 | 205 | | |
| 12 Total. Add lines 1 through 11 | 23,219 | 25,137 | 26,171 | | |
| Operating and Administrative Expenses | 13 Compensation of officers, directors, trustees, etc. | 0 | 0 | 0 | |
| | 14 Other employee salaries and wages | 0 | 0 | 0 | |
| | 15 Pension plans, employee benefits | 0 | 0 | 0 | |
| | 16a Legal fees (attach schedule) | 0 | 0 | 0 | |
| | b Accounting fees (attach schedule) | 0 | 0 | 0 | |
| | c Other professional fees (attach schedule) | 4,427 | 4,427 | 4,427 | |
| | 17 Interest | 0 | 0 | 0 | |
| | 18 Taxes (attach schedule) (see page 14 of the instructions) | 3,410 | 3,410 | 0 | |
| | 19 Depreciation (attach schedule) and depletion | 0 | 0 | 0 | |
| | 20 Occupancy | 0 | 0 | 0 | |
| | 21 Travel, conferences, and meetings | 415 | 415 | 415 | |
| | 22 Printing and publications | 0 | 0 | 0 | |
| | 23 Other expenses (attach schedule) | 62 | 62 | 62 | |
| | 24 Total operating and administrative expenses. Add lines 13 through 23 | 8,314 | 8,314 | 4,904 | 61,054 |
| | 25 Contributions, gifts, grants paid | 61,054 | | | |
| 26 Total expenses and disbursements. Add lines 24 and 25 | 69,368 | 8,314 | 4,904 | 61,054 | |
| 27 Subtract line 26 from line 12: | | | | | |
| a Excess of revenue over expenses and disbursements | (46,149) | | | | |
| b Net investment income (if negative, enter -0-) | | 16,823 | | | |
| c Adjusted net income (if negative, enter -0-) | | | 21,267 | | |

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| Part II Balance Sheets | | Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.) | Beginning of year | End of year | |
|------------------------------------|---|---|-------------------|----------------|-----------------------|
| | | | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| Assets | 1 Cash—non-interest-bearing | | 31,303 | 36,710 | 36,710 |
| | 2 Savings and temporary cash investments | | 0 | 0 | 0 |
| | 3 Accounts receivable ▶ | 0 | | | |
| | Less: allowance for doubtful accounts ▶ | 0 | 0 | 0 | 0 |
| | 4 Pledges receivable ▶ | 0 | | | |
| | Less: allowance for doubtful accounts ▶ | 0 | 0 | 0 | 0 |
| | 5 Grants receivable | | 0 | 0 | 0 |
| | 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 15 of the instructions) | | 0 | 0 | 0 |
| | 7 Other notes and loans receivable (attach schedule) ▶ | | 0 | 0 | 0 |
| | Less: allowance for doubtful accounts ▶ | | 0 | 0 | 0 |
| | 8 Inventories for sale or use | | 0 | 0 | 0 |
| | 9 Prepaid expenses and deferred charges | | 0 | 0 | 0 |
| | 10a Investments—U.S. and state government obligations (attach schedule) | | 132,854 | 120,648 | 120,648 |
| | b Investments—corporate stock (attach schedule) | | 455,950 | 588,912 | 588,912 |
| | c Investments—corporate bonds (attach schedule) | | 277,497 | 170,664 | 170,664 |
| | 11 Investments—land, buildings, and equipment: basis ▶ | | | | |
| Liabilities | Less: accumulated depreciation (attach schedule) ▶ | | 0 | 0 | 0 |
| | 12 Investments—mortgage loans | | 0 | 0 | 0 |
| | 13 Investments—other (attach schedule) | | 0 | 0 | 0 |
| | 14 Land, buildings, and equipment: basis ▶ | | | | |
| | Less: accumulated depreciation (attach schedule) ▶ | | 0 | 0 | 0 |
| | 15 Other assets (describe ▶) | | 0 | 0 | 0 |
| | 16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I) | | 897,604 | 916,934 | 916,934 |
| | 17 Accounts payable and accrued expenses | | | | |
| | 18 Grants payable | | | | |
| | 19 Deferred revenue | | | | |
| | 20 Loans from officers, directors, trustees, and other disqualified persons | | | | |
| | 21 Mortgages and other notes payable (attach schedule) | | | | |
| | 22 Other liabilities (describe ▶) | | | | |
| | 23 Total liabilities (add lines 17 through 22) | | 0 | 0 | |
| Net Assets or Fund Balances | Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. <input type="checkbox"/> | | | | |
| | 24 Unrestricted | | | | |
| | 25 Temporarily restricted | | | | |
| | 26 Permanently restricted | | | | |
| | Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. <input type="checkbox"/> | | | | |
| | 27 Capital stock, trust principal, or current funds | | 897,604 | 916,934 | |
| | 28 Paid-in or capital surplus, or land, bldg., and equipment fund | | 0 | 0 | |
| | 29 Retained earnings, accumulated income, endowment, or other funds | | 0 | 0 | |
| | 30 Total net assets or fund balances (see page 17 of the instructions) | | 897,604 | 916,934 | |
| | 31 Total liabilities and net assets/fund balances (see page 17 of the instructions) | | 897,604 | 916,934 | |

Part III Analysis of Changes in Net Assets or Fund Balances

| | | |
|---|----------|----------|
| 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) | 1 | 897,604 |
| 2 Enter amount from Part I, line 27a | 2 | (46,149) |
| 3 Other increases not included in line 2 (itemize) ▶ Chg in mkt val 64,447; return grant 1,000; rounding 2 | 3 | 65,479 |
| 4 Add lines 1, 2, and 3 | 4 | 916,934 |
| 5 Decreases not included in line 2 (itemize) ▶ | 5 | 0 |
| 6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 | 6 | 916,934 |

Part IV Capital Gains and Losses for Tax on Investment Income

| (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co) | | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo., day, yr.) | (d) Date sold (mo., day, yr.) |
|---|--|--|--------------------------------------|----------------------------------|
| 1a | See exhibit on- Line 2 includes impact of capital gain dividends | | | |
| b | | | | |
| c | | | | |
| d | | | | |
| e | | | | |

| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | (h) Gain or (loss) (e) plus (f) minus (g) |
|-----------------------|--|---|--|
| a 202,109 | | 206,125 | |
| b | | | |
| c | | | |
| d | | | |
| e | | | |

| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 | | | (i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h)) |
|---|--------------------------------------|---|---|
| (i) F.M.V. as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col. (i) over col. (j), if any | |
| a | | | |
| b | | | |
| c | | | |
| d | | | |
| e | | | |

| | | |
|--|----------|---------|
| 2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 } | 2 | (2,593) |
| 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8 | 3 | 34 |

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No
 If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

| 1 Enter the appropriate amount in each column for each year; see page 18 of the instructions before making any entries. | | | |
|--|---------------------------------------|---|--|
| (a) Base period years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitable-use assets | (d) Distribution ratio (col. (b) divided by col. (c)) |
| 2009 | 54,331 | 832,830 | 0.065 |
| 2008 | 57,486 | 952,248 | 0.06 |
| 2007 | 64,725 | 1,064,620 | 0.06 |
| 2006 | 64,548 | 1,000,000est | 0.06 |
| 2005 | 47,917 | 1,031,501 | 0.05 |

| | | |
|--|----------|---------|
| 2 Total of line 1, column (d) | 2 | 0.295 |
| 3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years | 3 | 0.6 |
| 4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5 | 4 | 880,202 |
| 5 Multiply line 4 by line 3 | 5 | 52,812 |
| 6 Enter 1% of net investment income (1% of Part I, line 27b) | 6 | 168 |
| 7 Add lines 5 and 6 | 7 | 52,980 |
| 8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions on page 18. | 8 | 61,054 |

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

| | | | |
|---|---------------|-----------|------------|
| 1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions) | | | |
| b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b | | 1 | 168 |
| c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). | | | |
| 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | 2 | 0 |
| 3 Add lines 1 and 2 | | 3 | 168 |
| 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | 4 | 0 |
| 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | | 5 | 168 |
| 6 Credits/Payments: | | | |
| a 2010 estimated tax payments and 2009 overpayment credited to 2010 | 6a 299 | | |
| b Exempt foreign organizations—tax withheld at source | 6b 0 | | |
| c Tax paid with application for extension of time to file (Form 8868) | 6c 0 | | |
| d Backup withholding erroneously withheld | 6d 0 | | |
| 7 Total credits and payments. Add lines 6a through 6d | | 7 | 299 |
| 8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached | | 8 | 0 |
| 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | 9 | 168 |
| 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | 10 | 131 |
| 11 Enter the amount of line 10 to be: Credited to 2011 estimated tax 131 Refunded | | 11 | |

Part VII-A Statements Regarding Activities

| | Yes | No |
|---|-----|----|
| 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? | | ✓ |
| b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i> | | ✓ |
| c Did the foundation file Form 1120-POL for this year? | | ✓ |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ 0 (2) On foundation managers. ▶ \$ 0 | | |
| e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 0 | | |
| 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i> | | ✓ |
| 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i> | | ✓ |
| 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | ✓ |
| b If "Yes," has it filed a tax return on Form 990-T for this year? | | ✓ |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i> | | ✓ |
| 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? | | ✓ |
| 7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV</i> | ✓ | |
| 8a Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) ▶ | | |
| b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i> | | ✓ |
| 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page 27)? <i>If "Yes," complete Part XIV</i> | | ✓ |
| 10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> | | ✓ |

Part VII-A Statements Regarding Activities (continued)

| | | | | |
|---|---|-----------------|-------------------------------------|-------------------------------------|
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions) | 11 | | <input checked="" type="checkbox"/> |
| 12 | Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? | 12 | | <input checked="" type="checkbox"/> |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | <input checked="" type="checkbox"/> | |
| Website address ► <u>www.miccio.org</u> | | | | |
| 14 | The books are in care of ► <u>Gary Levitz</u> | Telephone no. ► | <u>319-354-4117</u> | |
| | Located at ► <u>14 Cherry LN NE Iowa City IA</u> | ZIP+4 ► | <u>52240-9171</u> | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here. <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year | 15 | | |
| 16 | At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? | 16 | Yes | No |
| | See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country ► | | | <input checked="" type="checkbox"/> |

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

| | | Yes | No |
|-----------|---|------------|-------------------------------------|
| 1a | During the year did the foundation (either directly or indirectly): | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| b | If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)? | 1b | <input checked="" type="checkbox"/> |
| | Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/> | | |
| c | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2010? | 1c | <input checked="" type="checkbox"/> |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): | | |
| a | At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► 20____, 20____, 20____, 20____ | | |
| b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see page 22 of the instructions.) | 2b | <input checked="" type="checkbox"/> |
| c | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ► 20____, 20____, 20____, 20____ | | |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| b | If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2010.) | 3b | <input checked="" type="checkbox"/> |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | <input checked="" type="checkbox"/> |
| b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010? | 4b | <input checked="" type="checkbox"/> |

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year did the foundation pay or incur any amount to:(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions) ☐ Yes ☒ No(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No**b** If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? **5b**Organizations relying on a current notice regarding disaster assistance check here ☐**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945–5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **6b**

If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? **7b****Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1** List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).

| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|---|---|---|---|---------------------------------------|
| See attached exhibit. Total for all in column c,d,e | 1 - 1 1/2 hours each | 0 | 0 | 0 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

2 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). If none, enter "NONE."

| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|---|---|------------------|---|---------------------------------------|
| NONE | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Total number of other employees paid over \$50,000 **0**

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)***3** Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE."

| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
|---|---------------------|------------------|
| NONE | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Total number of others receiving over \$50,000 for professional services **0**

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

Expenses

| | | |
|----------|--|---------------|
| 1 | See exhibit attached for grants made to further charitable purpose of humane treatment of domestic animals. Areas of need that were funded were animal adoption; training and education; facilities; equipment and maintenance; spay/neuter procedures, veterinary services and shelter. | 61,054 |
| 2 | Grants approved total \$61,054 | |
| 3 | | |
| 4 | | |

Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

Amount

| | | |
|----------|--|--|
| 1 | | |
| 2 | | |
| 3 | All other program-related investments See page 24 of the instructions. | |

Total. Add lines 1 through 3 **0**

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see page 24 of the instructions.)

| | | | |
|----------|---|-----------|---------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | |
| a | Average monthly fair market value of securities | 1a | 887,106 |
| b | Average of monthly cash balances | 1b | 6,500 |
| c | Fair market value of all other assets (see page 25 of the instructions) | 1c | 0 |
| d | Total (add lines 1a, b, and c) | 1d | 893,606 |
| e | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). | 1e | 0 |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0 |
| 3 | Subtract line 2 from line 1d | 3 | 893,606 |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25 of the instructions) | 4 | 13,404 |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 880,202 |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 44,010 |

Part XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

| | | | |
|-----------|---|-----------|--------|
| 1 | Minimum investment return from Part X, line 6 | 1 | 44,010 |
| 2a | Tax on investment income for 2010 from Part VI, line 5 | 2a | 168 |
| b | Income tax for 2010. (This does not include the tax from Part VI.) | 2b | 0 |
| c | Add lines 2a and 2b | 2c | 168 |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 43,842 |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 1,000 |
| 5 | Add lines 3 and 4 | 5 | 44,842 |
| 6 | Deduction from distributable amount (see page 25 of the instructions) | 6 | 0 |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 44,842 |

Part XII Qualifying Distributions (see page 25 of the instructions)

| | | | |
|----------|---|-----------|--------|
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| a | Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26 | 1a | 61,054 |
| b | Program-related investments—total from Part IX-B | 1b | 0 |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | 0 |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | |
| a | Suitability test (prior IRS approval required) | 3a | 0 |
| b | Cash distribution test (attach the required schedule) | 3b | 0 |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 61,054 |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see page 26 of the instructions) | 5 | 168 |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 60,886 |

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see page 26 of the instructions)

| | (a) Corpus | (b) Years prior to 2009 | (c) 2009 | (d) 2010 |
|---|---------------|----------------------------|-------------|---------------|
| 1 Distributable amount for 2010 from Part XI, line 7 | | | | 44,842 |
| 2 Undistributed income, if any, as of the end of 2010: | | | | |
| a Enter amount for 2009 only | | | 0 | |
| b Total for prior years: 20____, 20____, 20____ | | 0 | | |
| 3 Excess distributions carryover, if any, to 2010: | | | | |
| a From 2005 | 3,160 | | | |
| b From 2006 | 21,392 | | | |
| c From 2007 | 11,494 | | | |
| d From 2008 | 9,874 | | | |
| e From 2009 | 13,071 | | | |
| f Total of lines 3a through e | 58,991 | | | |
| 4 Qualifying distributions for 2010 from Part XII, line 4: ► \$ | | | | |
| a Applied to 2009, but not more than line 2a | | | 0 | |
| b Applied to undistributed income of prior years (Election required—see page 26 of the instructions) | | 0 | | |
| c Treated as distributions out of corpus (Election required—see page 26 of the instructions) | 0 | | | |
| d Applied to 2010 distributable amount | | | | 44,842 |
| e Remaining amount distributed out of corpus | 16,212 | | | |
| 5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a).) | 0 | | | 0 |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 | 75,203 | | | |
| b Prior years' undistributed income. Subtract line 4b from line 2b | | 0 | | |
| c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed | | 0 | | |
| d Subtract line 6c from line 6b. Taxable amount—see page 27 of the instructions | | 0 | | |
| e Undistributed income for 2009. Subtract line 4a from line 2a. Taxable amount—see page 27 of the instructions | | | 0 | |
| f Undistributed income for 2010. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2011 | | | | 0 |
| 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions) | 0 | | | |
| 8 Excess distributions carryover from 2005 not applied on line 5 or line 7 (see page 27 of the instructions) | 3,160 | | | |
| 9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a | 72,043 | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2006 | 21,392 | | | |
| b Excess from 2007 | 11,494 | | | |
| c Excess from 2008 | 9,874 | | | |
| d Excess from 2009 | 13,071 | | | |
| e Excess from 2010 | 16,212 | | | |

Part XIV Private Operating Foundations (see page 27 of the instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2010, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

| | Tax year | Prior 3 years | | | (e) Total |
|--|----------|---------------|----------|----------|-----------|
| | (a) 2010 | (b) 2009 | (c) 2008 | (d) 2007 | |
| 2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed | 21,267 | 20,996 | 14,552 | 18,005 | 74,820 |
| b 85% of line 2a | 18,077 | 17,847 | 12,369 | 15,304 | 63,597 |
| c Qualifying distributions from Part XII, line 4 for each year listed | 61,054 | 54,522 | 57,486 | 64,725 | 237,787 |
| d Amounts included in line 2c not used directly for active conduct of exempt activities | | | | | |
| e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c | | | | | |
| 3 Complete 3a, b, or c for the alternative test relied upon: | | | | | |
| a "Assets" alternative test—enter: | | | | | |
| (1) Value of all assets | | | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b "Endowment" alternative test—enter $\frac{2}{3}$ of minimum investment return shown in Part X, line 6 for each year listed | 30,044 | 27,900 | 31,900 | 35,665 | 125,509 |
| c "Support" alternative test—enter: | | | | | |
| (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) | | | | | |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) | | | | | |
| (3) Largest amount of support from an exempt organization | | | | | |
| (4) Gross investment income | | | | | |

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see page 28 of the instructions.)**1 Information Regarding Foundation Managers:**

- a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NONE

- b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

- a** The name, address, and telephone number of the person to whom applications should be addressed:

The Miccio Foundation PO Box 522 Iowa City, IA 52244-0522 319-337-6735

- b** The form in which applications should be submitted and information and materials they should include:

See Attachment - The Miccio Grant Program

- c** Any submission deadlines:

May 1 and Nov 1 of each year

- d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

See Attachment - The Miccio Grant Program

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|--|--|--------------------------------------|-------------------------------------|---------------|
| a Paid during the year See Attachment - The Miccio Foundation 2010 Grant Recipients | | | | |
| Total | | | ▶ 3a | 61,054 |
| b Approved for future payment NONE | | | | |
| Total | | | ▶ 3b | 0 |

Enter gross amounts unless otherwise indicated.

| Enter gross amounts unless otherwise indicated. | | Unrelated business income | | Excluded by section 512, 513, or 514 | | (e) Related or exempt function income (See page 28 of the instructions.) |
|--|----------------------|---------------------------|-----------------------|--------------------------------------|--|--|
| | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | | |
| 1 Program service revenue: | | | | | | |
| a | | | | | | |
| b | | | | | | |
| c | | | | | | |
| d | | | | | | |
| e | | | | | | |
| f | | | | | | |
| g Fees and contracts from government agencies | | | | | | |
| 2 Membership dues and assessments | | | | | | |
| 3 Interest on savings and temporary cash investments | | 53 | | | | |
| 4 Dividends and interest from securities | | 24,880 | | | | |
| 5 Net rental income or (loss) from real estate: | | | | | | |
| a Debt-financed property | | | | | | |
| b Not debt-financed property | | | | | | |
| 6 Net rental income or (loss) from personal property | | | | | | |
| 7 Other investment income | | 205 | | | | |
| 8 Gain or (loss) from sales of assets other than inventory | | | | | | |
| 9 Net income or (loss) from special events | | | | | | |
| 10 Gross profit or (loss) from sales of inventory | | | | | | |
| 11 Other revenue: a _____ | | | | | | |
| b _____ | | | | | | |
| c _____ | | | | | | |
| d _____ | | | | | | |
| e _____ | | | | | | |
| 12 Subtotal. Add columns (b), (d), and (e) | | 22,544 | | | | |
| 13 Total. Add line 12, columns (b), (d), and (e) | | | | | | |

(See worksheet in line 13 instructions on page 29 to verify calculations.)

| Line No. ▼ | Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See page 29 of the instructions.) |
|---------------|--|
| | |

| Week | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
|------|--------|---------|-----------|----------|--------|----------|--------|
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| | | Yes | No |
|----------|--|--------------|----|
| 1 | Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | | |
| a | Transfers from the reporting foundation to a noncharitable exempt organization of: | | |
| | (1) Cash | 1a(1) | ✓ |
| | (2) Other assets | 1a(2) | ✓ |
| b | Other transactions: | | |
| | (1) Sales of assets to a noncharitable exempt organization | 1b(1) | ✓ |
| | (2) Purchases of assets from a noncharitable exempt organization | 1b(2) | ✓ |
| | (3) Rental of facilities, equipment, or other assets | 1b(3) | ✓ |
| | (4) Reimbursement arrangements | 1b(4) | ✓ |
| | (5) Loans or loan guarantees | 1b(5) | ✓ |
| | (6) Performance of services or membership or fundraising solicitations | 1b(6) | ✓ |
| c | Sharing of facilities, equipment, mailing lists, other assets, or paid employees | 1c | ✓ |
| d | If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. | | |

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule.

| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
|--------------------------|--------------------------|---------------------------------|
| | | |
| | | |
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| | | | |
|------------------|--|--------------|-----------|
| Sign Here | 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 taxpayer or fiduciary) is based on all information of which preparer has any knowledge | | |
| | <i>Gary S. Lutz</i> | Nov 10, 2011 | Treasurer |
| | Signature of officer or trustee | Date | Title |

**Paid
Preparer
Use Only**

| | | | | |
|----------------------------|----------------------|------|---|------|
| Print/Type preparer's name | Preparer's signature | Date | Check <input type="checkbox"/> if self-employed | PTIN |
| Firm's name ▶ | | | Firm's EIN ▶ | |
| Firm's address ▶ | | | Phone no | |

The Miccio Foundation 42-1501038

Explanations

| | | |
|------------------|--|----------------|
| Part I, Line 9 | Grant funds Returned | \$1,000 |
| | Animal Welfare Foundation, Oxford, IA | |
| Part I, Line 11 | Other Income, Net Class Action Settlements | \$205 |
| Part I, Line 16c | Investment Fee, Hills Bank | \$4,427 |
| Part I, Line 18 | Taxes Paid With Amended Returns, 2005-2008 | \$2,765 |
| | Taxes Paid 2009 | \$490 |
| | Tax Penalty and Interest Paid | \$155 |
| | TOTAL | \$3,410 |
| Part I, Line 21 | Annual Meeting Expense | \$415 |
| Part I, Line 23 | Membership Fee Iowa Association of Humane Societies | \$50 |
| | Foreign Taxes Paid | \$12 |
| Part II | Balance Sheet Entries are 12/31/09 or 12/31/10 market values | |
| Part II, Line 10 | Schedule of Investments at Hills Bank attached | |
| Part III | Net fund balances are based on market values | |
| Part IV | Exhibit of Gains and Losses from sales, attached | |
| | Net loss of \$4,016 reduced to loss of \$2,539 due to | |
| | offset of capital gain dividend income of \$1,423 | |
| | (\$4,016)-\$1,423=(\$2,539) | |

The Miccio Foundation 42-1501038

Schedules Attached

Detail of Investments

Pages 1 - 7 of Hills Bank Account Statement

Publicly Traded Securities Sold for Gains and Losses

Pages 36 -37 of Hills Bank Account Statement

Board of Directors - The Miccio Foundation

Grants Made to Further Charitable Purpose of Humane Treatment Of Animals

Detail of Grant Recipients

The Miccio Grant Program - Application and Review Procedures

Capital Gain Dividend of \$1,423 noted on page 22 of Hills Bank Account Statement



Detail of Investments

ACCOUNT STATEMENT 42-1501038

ACCOUNT NUMBER [REDACTED]

JANUARY 01, 2010 TO DECEMBER 31, 2010



MICCIO FOUNDATION
C/O GARY LEVITZ
14 CHERRY LANE NE
IOWA CITY, IA 52240

| | |
|-------------------------|--|
| ACCOUNT NAME | MICCIO FOUNDATION AGENCY |
| RELATIONSHIP MANAGER | FRANK T JUVAN 800-899-8858 FRANK_JUVAN@HILLSBANK.COM |
| INVESTMENT OFFICER | PETER F SORENSEN 800-899-8858 PETER_SORENSEN@HILLSBANK.COM |

FOR YOUR INFORMATION

THIS ACCOUNT STATEMENT IS INTENDED TO PROVIDE YOU WITH A SUMMARY OF ACCOUNT ACTIVITY AND ASSET VALUES AS OF THE DATE SHOWN ABOVE. PLEASE CONTACT YOUR RELATIONSHIP MANAGER WITH ANY QUESTIONS YOU MAY HAVE.

TRUST DEPARTMENT





1-800-899-8858 (319) 338-1522

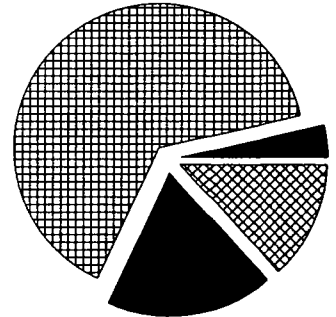
ACCOUNT STATEMENT

PAGE 2

ACCOUNT NUMBER [REDACTED]
JANUARY 01, 2010 TO DECEMBER 31, 2010

PORTFOLIO SUMMARY

| MARKET VALUE AS OF | 01/01/2010 | 12/31/2010 | % OF ACCOUNT |
|--|-------------------|-------------------|---------------|
|  CASH AND EQUIVALENTS | 25,966.71 | 32,574.51 | 3.6% |
|  EQUITIES | 455,949.75 | 588,912.57 | 64.5% |
|  FIXED INCOME | 277,497.40 | 170,664.51 | 18.7% |
|  OTHER ASSETS | 132,853.92 | 120,647.90 | 13.2% |
| Total | 892,267.78 | 912,799.49 | 100.0% |



ACTIVITY SUMMARY

| | |
|------------------------|------------|
| BEGINNING MARKET VALUE | 892,267.78 |
| DIVIDENDS AND INTEREST | 24,879.94 |
| OTHER RECEIPTS | 204.79 |
| DISBURSEMENTS | 62,010.51 |
| FEES | 4,426.98 |
| REALIZED GAIN/LOSS | 2,592.61 |
| CHANGE IN MARKET VALUE | 64,477.08 |
| ENDING MARKET VALUE | 912,799.49 |

ASSET DETAIL

| DESCRIPTION | MARKET VALUE/ TAX COST | MARKET PRICE/ COST PRICE | ESTIMATED ANNUAL INCOME | CURRENT YIELD |
|---|------------------------------|--------------------------------|-------------------------------|------------------|
| CASH AND EQUIVALENTS | | | | |
| 665278248 NORTHERN INSTL MUNICIPAL MM #849 | 32,574 51 32,574 51 | 1 00 | 48 86 | 0 15 |
| CASH | 0 00 | | | |
| TOTAL CASH AND EQUIVALENTS | 32,574.51 32,574 51 | | 48 86 | 0.15 |

| DESCRIPTION | TICKER | SHARES | MARKET VALUE/ TAX COST | MARKET PRICE/ COST PRICE | ESTIMATED ANNUAL INCOME | CURRENT YIELD |
|--|--------|------------|------------------------------|--------------------------------|-------------------------------|------------------|
| FIXED INCOME | | | | | | |
| 31331YQ29 FEDERAL FARM CREDIT BANK NON-CALLABLE 3 45% 05/16/2012 | | 20,000 000 | 20,803 20 19,941 00 | 104 02 99 71 | 690 00 | 3 32 |
| 3133XFJY3 FEDERAL HOME LOAN BANK NON-CALLABLE 5 25% 06/10/2011 | | 25,000 000 | 25,526 50 24,920 00 | 102 11 99 68 | 1,312 50 | 5 14 |
| 3133XLEA7 FEDERAL HOME LOAN BANK NON-CALLABLE 5 375% 06/08/2012 | | 25,000 000 | 26,729 75 25,002 00 | 106 92 100 01 | 1,343 75 | 5 03 |
| 3133XR4U1 FEDERAL HOME LOAN BANK NON-CALLABLE 3 125% 06/10/2011 | | 20,000 000 | 20,229 60 19,888 20 | 101 15 99 44 | 625 00 | 3 09 |
| 3133XSNM6 FEDERAL HOME LOAN BANK NON-CALLABLE 4% 12/13/2013 | | 20,000 000 | 21,645 40 21,147 59 | 108 23 105 74 | 800 00 | 3 70 |
| 3133XUMR1 FEDERAL HOME LOAN BANK NON-CALLABLE 3 25% 09/12/2014 | | 15,000 000 | 15,943 20 15,259 53 | 106 29 101 73 | 487 50 | 3 06 |
| 546585CU2 LOUISVILLE & JEFFERSON CNTY, KY METRO GOV G O SER C FED TAXABLE NON-CALLABLE 3 25% 12/01/2011 | | 25,000 000 | 25,556 00 25,885 00 | 102 22 103 54 | 812 50 | 3 18 |
| 60636XJ95 MISSOURI ST HSG DEV COMM FED TAXABLE 5 07% 09/01/2012 | | 14,000 000 | 14,230 86 14,000 00 | 101 65 100 00 | 709 80 | 4 99 |
| TOTAL FIXED INCOME | | | 170,664 51 166,043 32 | | 6,781 05 | 3 97 |

EQUITIES

| | | | | | | |
|-----------------------------------|-----|---------|----------------------|----------------|--------|------|
| 00206R102 AT&T | T | 100 000 | 2,938 00 2,545 00 | 29 38 25 45 | 172 00 | 5 85 |
| 086516101 BEST BUY COMPANY INC | BBY | 100 000 | 3,429 00 3,317 57 | 34 29 33 18 | 60 00 | 1 75 |

ACCOUNT STATEMENT

PAGE 4

ACCOUNT NUMBER [REDACTED]

JANUARY 01, 2010 TO DECEMBER 31, 2010

ASSET DETAIL (CONTINUED)

| DESCRIPTION | TICKER | SHARES | MARKET VALUE/ TAX COST | MARKET PRICE/ COST PRICE | ESTIMATED ANNUAL INCOME | CURRENT YIELD |
|--|--------|-----------|------------------------------|--------------------------------|-------------------------------|------------------|
| EQUITIES | | | | | | |
| 093001402 WILLIAM BLAIR INTERNATIONAL GROWTH CLASS N - FUND #317 | WBIGX | 1,473 907 | 32,204 87 42,182 08 | 21 85 28 62 | 619 04 | 1 92 |
| 109641100 BRINKER INTERNATIONAL INC | EAT | 200 000 | 4,176 00 2,915 69 | 20 88 14 58 | 112 00 | 2 68 |
| 17275R102 CISCO SYSTEMS INC | CSCO | 600 000 | 12,138 00 8,737 84 | 20 23 14 56 | | |
| 189054109 CLOROX COMPANY | CLX | 100 000 | 6,328 00 6,213 14 | 63 28 62 13 | 220 00 | 3 48 |
| 249030107 DENTSPLY INTERNATIONAL | XRAY | 150 000 | 5,125 50 3,230 36 | 34 17 21 54 | 30 00 | 0 59 |
| 256206103 DODGE & COX INTERNATIONAL STOCK FUND #1048 | DODFX | 855 275 | 30,541 87 26,137 37 | 35 71 32 00 | 423 36 | 1 39 |
| 257651109 DONALDSON | DCI | 200 000 | 11,656 00 5,297 14 | 58 28 26 49 | 104 00 | 0 89 |
| 278642103 EBAY INC | EBAY | 250 000 | 6,957 50 10,362 50 | 27 83 41 45 | | |
| 291011104 EMERSON ELECTRIC COMPANY | EMR | 100 000 | 5,717 00 2,399 71 | 57 17 24 00 | 138 00 | 2 41 |
| 30231G102 EXXON MOBIL CORP | XOM | 175 000 | 12,796 00 6,113 22 | 73 12 34 93 | 308 00 | 2 41 |
| 311900104 FASTENAL CO | FAST | 250 000 | 14,977 50 4,352 38 | 59 91 17 41 | 210 00 | 1 40 |
| 337738108 FISERV | FISV | 150 000 | 8,784 00 5,182 60 | 58 56 34 55 | | |
| 369604103 GENERAL ELECTRIC CO | GE | 500 000 | 9,145 00 12,915 66 | 18 29 25 83 | 280 00 | 3 06 |
| 370334104 GENERAL MILLS INC | GIS | 200 000 | 7,118 00 6,802 66 | 35 59 34 01 | 224 00 | 3 15 |
| 38142Y856 GOLDMAN SACHS TECHNOLOGY TOLLKEEPER INSTL FUND #1182 | GITIX | 947 647 | 13,096 48 12,500 00 | 13 82 13 19 | | |

ACCOUNT NUMBER [REDACTED]
JANUARY 01, 2010 TO DECEMBER 31, 2010

ASSET DETAIL (CONTINUED)

| DESCRIPTION | TICKER | SHARES | MARKET VALUE/ TAX COST | MARKET PRICE/ COST PRICE | ESTIMATED ANNUAL INCOME | CURRENT YIELD |
|--|--------|---------|------------------------------|--------------------------------|-------------------------------|------------------|
| EQUITIES | | | | | | |
| 437076102 HOME DEPOT INC | HD | 300 000 | 10,518 00 9,074 42 | 35 06 30 25 | 283 50 | 2 70 |
| 452308109 ILLINOIS TOOL WORKS INC | ITW | 350 000 | 18,690 00 11,113 76 | 53 40 31 75 | 476 00 | 2 55 |
| 458140100 INTEL CORP | INTC | 700 000 | 14,721 00 15,782 16 | 21 03 22 55 | 441 00 | 3 00 |
| 45865V100 INTERCONTINENTAL EXCHANGE INC | ICE | 25 000 | 2,978 75 2,885 45 | 119 15 115 42 | | |
| 459200101 IBM | IBM | 100 000 | 14,676 00 6,842 75 | 146 76 68 43 | 260 00 | 1 77 |
| 464287465 ISHARES TRUST MSCI EAFE INDEX FUND | EFA | 300 000 | 17,466 00 13,423 47 | 58 22 44 74 | 419 10 | 2 40 |
| 464288786 ISHARES DOW JONES INSURANCE INDEX | IAK | 350 000 | 10,968 65 8,152 21 | 31 34 23 29 | 227 50 | 2 07 |
| 464288828 ISHARES HEALTHCARE PROVIDERS | IHF | 100 000 | 5,387 00 5,941 76 | 53 87 59 42 | 10 00 | 0 19 |
| 46625H100 J P MORGAN CHASE & CO | JPM | 200 000 | 8,484 00 8,732 61 | 42 42 43 66 | 40 00 | 0 47 |
| 478160104 JOHNSON & JOHNSON INC | JNJ | 150 000 | 9,277 50 9,583 44 | 61 85 63 89 | 324 00 | 3 49 |
| 580135101 MC DONALD'S CORPORATION | MCD | 100 000 | 7,676 00 6,718 45 | 76 76 67 18 | 244 00 | 3 18 |
| 585055106 MEDTRONIC INC | MDT | 300 000 | 11,127 00 12,489 28 | 37 09 41 63 | 270 00 | 2 43 |
| 594918104 MICROSOFT CORPORATION | MSFT | 500 000 | 13,955 00 12,786 50 | 27 91 25 57 | 320 00 | 2 29 |
| 629491101 NYSE EURONEXT | NYX | 200 000 | 5,996 00 5,825 52 | 29 98 29 13 | 240 00 | 4 00 |
| 654106103 NIKE INC CLASS B | NKE | 50 000 | 4,271 00 2,527 96 | 85 42 50 56 | 62 00 | 1 45 |

ACCOUNT STATEMENT

PAGE 6

ACCOUNT NUMBER [REDACTED]

JANUARY 01, 2010 TO DECEMBER 31, 2010

ASSET DETAIL (CONTINUED)

| DESCRIPTION | TICKER | SHARES | MARKET VALUE/ TAX COST | MARKET PRICE/ COST PRICE | ESTIMATED ANNUAL INCOME | CURRENT YIELD |
|---|--------|---------|------------------------------|--------------------------------|-------------------------------|------------------|
| EQUITIES | | | | | | |
| 681919106 OMNICOM GROUP INC | OMC | 150 000 | 6,870 00 5,164 28 | 45 80 34 43 | 120 00 | 1 75 |
| 713448108 PEPSICO INCORPORATED | PEP | 350 000 | 22,865 50 17,610 77 | 65 33 50 32 | 672 00 | 2 94 |
| 73935X856 POWERSHARES BIOTECH GENOME | PBE | 200 000 | 4,378 00 3,906 95 | 21 89 19 53 | | |
| 73936T615 POWERSHARES GLOBAL EFT CLEAN ENERGY PORT | PBD | 100 000 | 1,396 00 2,455 77 | 13 96 24 56 | 1 90 | 0 14 |
| 74144T108 T ROWE PRICE GROUP | TROW | 150 000 | 9,681 00 5,347 79 | 64 54 35 65 | 162 00 | 1 67 |
| 742718109 PROCTER & GAMBLE CO | PG | 300 000 | 19,299 00 12,791 50 | 64 33 42 64 | 578 10 | 3 00 |
| 779556208 T ROWE PRICE MID CAP GROWTH ADV #264 | PAMCX | 614 224 | 35,299 45 27,621 51 | 57 47 44 97 | | |
| 78467Y107 STANDARD & POORS MIDCAP 400 SPDR | MDY | 150 000 | 24,702 00 21,367 16 | 164 68 142 45 | 225 45 | 0 91 |
| 81369Y100 SECTOR SPDR TR MATERIALS SPDR | XLB | 500 000 | 19,205 00 13,862 37 | 38 41 27 72 | 589 00 | 3 07 |
| 81369Y506 SECTOR SPDR TR ENERGY SPDR | XLE | 550 000 | 37,537 50 20,851 85 | 68 25 37 91 | 548 35 | 1 46 |
| 81369Y886 SECTOR SPDR TR UTILITIES SELECT SECTOR SPDR | XLU | 350 000 | 10,969 00 11,184 37 | 31 34 31 96 | 444 85 | 4 06 |
| 857477103 STATE STREET CORP COM | STT | 150 000 | 6,951 00 6,779 15 | 46 34 45 19 | 6 00 | 0 09 |
| 871829107 SYSCO CORP | SYN | 250 000 | 7,350 00 7,385 00 | 29 40 29 54 | 260 00 | 3 54 |
| 87612E106 TARGET CORP | TGT | 150 000 | 9,019 50 7,405 40 | 60 13 49 37 | 150 00 | 1 66 |
| 881624209 TEVA PHARMACEUTICAL INDUST LTD ADR | TEVA | 150 000 | 7,819 50 4,613 61 | 52 13 30 76 | 100 05 | 1 28 |

ASSET DETAIL (CONTINUED)

| DESCRIPTION | TICKER | SHARES | MARKET VALUE/ TAX COST | MARKET PRICE/ COST PRICE | ESTIMATED ANNUAL INCOME | CURRENT YIELD |
|--|--------|-----------|----------------------------------|--------------------------------|-------------------------------|------------------|
| EQUITIES | | | | | | |
| 883556102 THERMO FISHER SCIENTIFIC INC | TMO | 150 000 | 8,304 00 4,704 43 | 55 36 31 36 | | |
| 949746101 WELLS FARGO & CO | WFC | 450 000 | 13,945 50 10,500 94 | 30 99 23 34 | 90 00 | 0 65 |
| TOTAL EQUITIES | | | 588,912.57 478,637.51 | | 10,465 20 | 1.78 |
| OTHER ASSETS | | | | | | |
| 31428Q101 FEDERATED TOTAL RETURN BOND FUND FUND #328 | FTRBX | 4,731 215 | 52,753 05 50,000 00 | 11 15 10 57 | 2,332 49 | 4 42 |
| 665278685 NORTHERN INSTL PORTFOLIO CLASS A - FUND #818 | BBPAX | 2,535 497 | 53,118 66 50,000 00 | 20 95 19 72 | 2,013 18 | 3 79 |
| 922031836 VANGUARD SHORT TERM INVESTMENT-GRADE FUND ADMIRAL SHS | VFSUX | 1,155 683 | 12,446 71 12,308 37 | 10 77 10 65 | 432 23 | 3 47 |
| 922031844 VANGUARD SHORT-TERM FEDERAL FD ADMIRAL | VSGDX | 216 494 | 2,329 48 2,371 27 | 10 76 10 95 | 40 48 | 1 74 |
| TOTAL OTHER ASSETS | | | 120,647 90 114,679 64 | | 4,818.38 | 3 99 |
| GRAND TOTAL ASSETS | | | 912,799 49 791,934 98 | | 22,113 49 | 2 42 |

Market prices shown have been obtained from pricing services which we believe are reliable; however, we cannot guarantee their accuracy or that securities can be bought or sold for these prices. We will be glad to provide further details upon request.

42-1501038

ACCOUNT STATEMENT

PAGE 36

ACCOUNT NUMBER [REDACTED]

JANUARY 01, 2010 TO DECEMBER 31, 2010

Security Sales

TRANSACTION DETAIL (CONTINUED)

| DATE | DESCRIPTION | PRINCIPAL CASH | INCOME CASH | COST | GAIN / LOSS |
|-----------------------------|--|-------------------|----------------|------------|----------------|
| SALES AND MATURITIES | | | | | |
| 02/09/10 | COLUMBIA ACORN FUND CLASS Z - #492 SOLD 1,264 431 SHS COLUMBIA ACORN FUND CLASS Z - #492 ON 02/08/2010 AT 23 13 THRU STN FUNDS | 29,246 29 | | 35,833 74- | 6,587 45- |
| 07/02/10 | FASTENAL CO SOLD 50 SHS FASTENAL CO ON 06/29/2010 AT 50 6432 THRU UBS FINANCIAL SERVICES COMMISSIONS PAID 2 00 EXPENSES PAID 0 05 | 2,530 11 | | 706 53- | 1,823 58 |
| 03/15/10 | FEDERAL FARM CREDIT BANK NON-CALLABLE 5 1% 03/15/2010 MATURED 20,000 UNITS FEDERAL FARM CREDIT BANK NON-CALLABLE 5 1% 03/15/2010 | 20,000 00 | | 20,021 48- | 21 48- |
| 12/15/10 | FEDERAL HOME LOAN MTG CORP MULTI-STEP 2 5% 12/15/2017 REDEEMED 12/15/2010 15,000 UNITS FEDERAL HOME LOAN MTG CORP MULTI-STEP 2 5% 12/15/2017 | 15,000 00 | | 15,000 00- | |
| 12/15/10 | FEDERAL HOME LOAN MTG CORP 3% 12/15/2015 REDEEMED 12/15/2010 15,000 UNITS FEDERAL HOME LOAN MTG CORP 3% 12/15/2015 | 15,000 00 | | 15,000 00- | |
| 02/23/10 | FEDERAL HOME LOAN BANK 1XC; 02/23/06 4 03% 02/23/2010 MATURED 10,000 UNITS FEDERAL HOME LOAN BANK 1XC, 02/23/06 4 03% 02/23/2010 | 10,000 00 | | 10,000 00- | |
| 10/01/10 | FEDERAL HOME LOAN BANK 1XC; 10/01/10 5% 10/01/2012 REDEEMED 10/01/2010 25,000 UNITS FEDERAL HOME LOAN BANK 1XC, 10/01/10 5% 10/01/2012 | 25,000 00 | | 25,000 00- | |
| 10/04/10 | FEDERAL HOME LOAN BANK F/C 10/01/2010; CC 5 05% 10/01/2018 REDEEMED 10/04/2010 20,000 UNITS FEDERAL HOME LOAN BANK F/C 10/01/2010, CC 5 05% 10/01/2018 | 20,000 00 | | 20,000 00- | |
| 07/19/10 | FNMA STEP-UP, F/C 7/19/2010 3% 01/19/2018 REDEEMED 07/19/2010 15,000 UNITS FNMA STEP-UP, F/C 7/19/2010 3% 01/19/2018 | 15,000 00 | | 15,000 00- | |

TRANSACTION DETAIL (CONTINUED)

| DATE | DESCRIPTION | PRINCIPAL CASH | INCOME CASH | COST | GAIN / LOSS |
|-----------------------------------|--|-------------------|----------------|-------------|----------------|
| | GOLDMAN SACHS TAX-FREE #477 NET WITHDRAWAL GOLDMAN SACHS TAX-FREE #477 | 25,966 71 | | 25,966 71- | |
| 09/01/10 | MISSOURI ST HSG DEV COMM FED TAXABLE 5 07% 09/01/2012 REDEEMED 09/01/2010 1,000 UNITS MISSOURI ST HSG DEV COMM FED TAXABLE 5 07% 09/01/2012 | 1,000 00 | | 1,000 00- | |
| 02/05/10 | PEPSICO INCORPORATED SOLD 50 SHS PEPSICO INCORPORATED ON 02/02/2010 AT 60 7406 THRU HAPOALIM SECURITIES COMMISSIONS PAID 2 00 EXPENSES PAID 0 04 | 3,034 99 | | 2,184 00- | 850 99 |
| 07/02/10 | SECTOR SPDR TR MATERIALS SPDR SOLD 150 SHS SECTOR SPDR TR MATERIALS SPDR ON 06/29/2010 AT 28 932 THRU UBS FINANCIAL SERVICES COMMISSIONS PAID 6 00 EXPENSES PAID 0 07 | 4,333 73 | | 4,350 28- | 16 55- |
| 05/24/10 | VANGUARD SHORT TERM INVESTMENT-GRADE FUND ADMIRAL SHS SOLD 279 59 SHS VANGUARD SHORT TERM INVESTMENT-GRADE FUND ADMIRAL SHS ON 05/21/2010 AT 10 72 THRU STN FUNDS | 2,997 20 | | 2,978 73- | 18 47 |
| 05/24/10 | VANGUARD SHORT-TERM FEDERAL FD ADMIRAL SOLD 277 008 SHS VANGUARD SHORT-TERM FEDERAL FD ADMIRAL ON 05/21/2010 AT 10 83 THRU STN FUNDS | 3,000 00 | | 3,047 09- | 47 09- |
| 09/23/10 | SOLD 912 409 SHS VANGUARD SHORT-TERM FEDERAL FD ADMIRAL ON 09/22/2010 AT 10 96 THRU STN FUNDS | 10,000 00 | | 10,036 50- | 36 50- |
| TOTAL SALES AND MATURITIES | | 202,109 03 | 0 00 | 206,125 06- | 4,016.03- |
| NON CASH ACTIVITY | | | | | |
| 06/14/10 | GENERAL MILLS INC RECEIVED 2-FOR-1 STK SPLIT 50 SHS GENERAL MILLS INC | | | | |
| 01/29/10 | STANDARD & POORS MIDCAP 400 SPDR CUSIP # CHANGED FROM 595635103 STANDARD & POOR'S MIDCAP 400 SPDR TO 78467Y107 STANDARD & POORS MIDCAP 400 SPDR | | | | |
| TOTAL NON CASH ACTIVITY | | 0 00 | 0 00 | 0 00 | 0.00 |
| NET TRANSFERS FOR THE PERIOD | | 3,886 46 | 3,886 46- | | |
| TOTAL | | 3,886 46 | 3,886.46- | 0 00 | 0.00 |
| ENDING BALANCE | | 22.72- | 22.72 | 791,934 98 | 2,592.61- |

Total
Net Loss



42-1501038

Part VIII, Line 1

Board of Directors

Tuesday, June 21, 2011

Anne Burnside, Secretary

618 Ronald St

Iowa City IA 52245

(319) 337-9575 ag.burnside@gmail.com

End of Term: 1/31/2014

Diana Harris, Technology

523 Brown St

Iowa City IA 52245

(319) 338-4859 cwcrrr@yahoo.com

End of Term: 1/31/2013

Kathleen Janz, President

1990 Willow Ave

Ainsworth IA 52201

(319) 337-6735 kathleen-janz@uiowa.edu

End of Term: 1/31/2012

Kathleen Kamerick, Communication

321 Hutchinson Ave

Iowa City IA 52246

(319) 338-5590 kathleen-kamerick@uiowa.edu

End of Term: 1/31/2014

Gary Levitz, Treasurer

14 Cherry Lane NE

Iowa City IA 52240 9171

(319) 354-4117 gary.levitz@gmail.com

End of Term: 1/31/2012

Rebecca Porter, Communication

425 Hutchinson Ave

Iowa City IA 52246

(319) 354-3582 jsdillon@mchsi.com

End of Term: 1/31/2014

Debora Tiemens, Technology

2332 Catskill Ct

Iowa City IA 52245

(319) 325-2227 deb-tiemens@uiowa.edu

End of Term: 1/31/2012

(c) (d) (e)

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o o o

o o o

o o o

o o o

o o o

Total o o o



GRANTS MADE

42-1501038

Standard Grants Awarded

Protectors of Animal Welfare (PAW)

\$5,000

235 Avenue E

Fort Madison, IA 52627

New roof for shelter building

TLC Canine Center

\$3,765

521 North Fulton Street

Newell, IA 50568

Wall and floor repair to keep the shelter clean and sanitary

Tama County Humane Society

\$3,175

PO Box 332

Toledo, IA 52342

Kaivac purchase to keep the shelter floor sanitary

Heartland Humane Society of Ottumwa

\$3,000

P.O. Box 1149

Ottumwa, IA 52501

Spay/neuter project

Panora P.E.T.S.

\$3,000

P.O. Box 144

Panora, IA 50216

Opurration fix-it!

Safe Haven of Iowa County (SHIC)

\$3,000

P.O. Box 444

Williamsburg, IA 52361

Winterizing to protect shelter animals in Iowa County

Tama County Humane Society

\$3,000

PO Box 332

Toledo, IA 52342

Dog runs for animal holding area

C & W Rustic Hollow Shelter, Inc

\$2,250

PO Box 67

Nashua, IA 50658

Clinic building: No more homeless pets in northeast Iowa

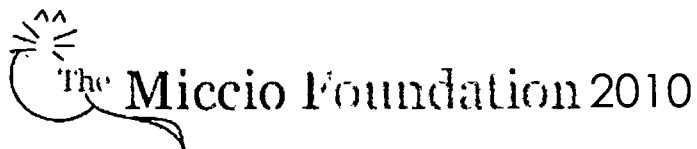
Iowa Humane Alliance

\$2,000

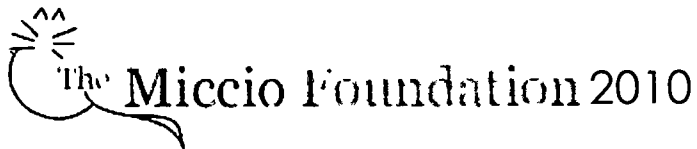
P.O. Box 5292

Coralville, IA 52241

Spay/neuter subsidy project for mobile home park felines



| | |
|--|---------|
| Jackson County Humane Society & Animal Shelter 3354 Dark Hallow Rd Maquoketa , IA 52060 <i>Roof funds</i> | \$2,000 |
| Johnson County Humane Society 1050 Woodlawn Iowa City , IA 52245 <i>JCHS pet food project</i> | \$2,000 |
| Noah's Ark Animal Foundation PO Box 2005 Fairfield IA 52556 <i>Funding for a caring community spay neuter assistance program</i> | \$2,000 |
| SNAP of NE IA 527 3rd Ave W Cresco , IA 52136 <i>Community spay/neuter assistance program</i> | \$2,000 |
| Spay Neuter Assistance for Pets, Inc (SNAP) 36346 Monroe Drive Zephyrhills , FL 33541 <i>Financial assistance for the barn/outdoor cat and kittens S/N project</i> | \$2,000 |
| Last Hope Animal Rescue 6203 32nd Ave Shellsburg , IA 52332 <i>Request for funds for shelter improvement items</i> | \$1,800 |
| Safe Haven of Iowa County (SHIC) P.O. Box 444 Williamsburg , IA 52361 <i>Equipment and supply needs for move</i> | \$1,714 |
| Last Hope Animal Rescue 6203 32nd Ave Shellsburg , IA 52332 <i>Shelter improvement and expansion</i> | \$1,700 |
| Furry Friends Refuge 9235 Swanson Blvd Suite 2 Clive Ia 50325 <i>Furry Friends dog room renovation</i> | \$1,500 |
| PAWS & More Animal Shelter 502 West Main Street Washington , IA 52353 <i>Renovation of upper dog kennel area</i> | \$1,468 |



4 PAWS \$1,100

1512 River Ave
Harlan, IA 51537
New steel roof for pound facility

PAWS & More Animal Shelter \$1,000

502 West Main Street
Washington, IA 52353
Washington Cty TNR program

Mini Grants Awarded

Animal Rescue of Carroll \$1,500

PO Box 393
Carroll, IA 51401
Animal Rescue of Carroll: Building a shelter project

Cat Spay/Neuter Connection \$1,500

P.O. Box 27927
Omaha, NE 68127
Iowa 2010: Spay and Neuter

King's Harvest Ministries \$1,500

5837 Wisconsin Ave
Davenport, IA 52803
Spay neuter assistance program (SNAP) for Davenport's homeless

Noah's Ark Animal Foundation \$1,500

PO Box 748
Fairfield, IA 52556
Targeting most critical needs

Faith in Action Volunteers, Inc \$1,200

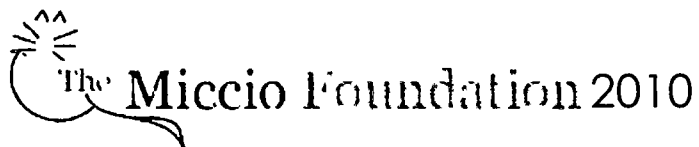
PO Box 604
Sidney, IA 51652
Fremont County community cats TNR program

Animal Protection and Education (APE) \$1,000

P.O. Box 65
Paton, IA 50217
Spay neuter mobile clinic for Winterset

Montgomery County Animal Rescue/Red Oak Heritage Foundation \$1,000

PO Box 468
Red Oak, IA 51566
Spay neuter assistance program



People for Pets

\$882

2312 Highway Boulevard
Spencer, IA 51301
Driver emergency

Jean M. Walker Grants Awarded

Iowa Federation of Humane Societies (IFHS)

\$1,000

5452 NE 22nd St.
Des Moines, IA 50313
Animal welfare conference

Iowa Voters for Companion Animals

\$1,000

1321 41st Street
Des Moines, IA 50311
Web page support

SNAP of NE IA

\$500

527 3rd Ave W
Cresco, IA 52136
Be kind to animals program: Innovative humane education for the entire community

Total 2010 Grants Awarded

\$61,054



MICCIO GRANT PROGRAM

42-1501038

Grant Applications

Those eligible for Miccio Foundation grants in support of Iowa's animals will be organizations that have demonstrated commitment to animal welfare. Examples include, but are not limited to, private and governmental animal shelters, humane societies, rescue groups, volunteer foster organizations, and local animal control agencies. We will not support activities inconsistent with federal, state or local laws/ordinances, and we reserve the right to request additional information prior to making funding decisions

The Miccio Foundation's focus is to support organizations involved in animal welfare (501c3 status is required). Projects eligible for funding are those that will have an immediate, direct and measurable impact on improving animal welfare in a target community. Grants can be for projects such as spay/neuter programs, facility renovation, medical care, humane education, caging, and adoption support

Projects of greatest interest are those that include:

- Renovating facilities to ensure the health and well being of animals prior to adoption and/or improving the efficiency of overall daily operations.
- Developing and sustaining alliances that may include sharing resources to accomplish specific activities, particularly spay/neuter, emergency transportation, and professional services.
- Supporting areas of the state where resources for animals are limited or unavailable.

Organizations may apply for funds from the Miccio Foundation through a three-tier grant program. Applicants may apply for only one Miccio Foundation Standard or Mini grant per funding cycle. In addition to applying for a Standard or Mini grant, applicants may apply for one Jean M. Walker grant per cycle. Funding cycles occur twice annually, in May and November.

The Foundation awards **Standard** grants to organizations licensed by the State of Iowa Department of Agriculture and Land Stewardship (IDALS) as Pounds or Shelters. Typically Standard Miccio grants are funded at \$3,500. Standard grant requests may not exceed \$10,000.

Organizations with 501c3 status are eligible for the Miccio Foundation **Mini** grant of up to \$1,500. An IDALS pound or shelter license is not required. In exceptional circumstances, grants of more than \$1,500 may be funded. Contact the Miccio Foundation Board prior to submitting such an application. Please note that you must contact the Foundation each time you request an exceptional circumstance exemption

The Foundation will award up to \$1,000 for a **Jean M. Walker** grant to 501c3 organizations regardless of IDALS licensing. The Jean M. Walker grant is designed to raise public awareness to improve the humane treatment of animals. This grant will be awarded to individuals and organizations 1) providing educational programming on the humane treatment of animals and 2) taking action to end inhumane treatment of animals, particularly the abuse and suffering of companion animals bred under inhumane conditions.

Grant Applications

Click here for the appropriate application: [Standard and Mini](#), or [Jean M. Walker](#).

Help with getting a grant

Click here for easy to understand advice from the American Humane Association on the [business of getting a grant](#).

More help with getting a grant and other [funding strategies](#) from the Humane Society of

Download Grant Applications:

- [Standard or Mini Grant](#)
- [Jean M. Walker Grant](#)

Submission Information

Mail seven copies of all your grant material to:

The Miccio Foundation
P. O. Box 522
Iowa City, Iowa 52244-0522

Application Deadlines

May 1 & November 1

the United States

Submission Information

Mail seven copies of all your grant material to the address shown below:

The Miccio Foundation

P. O. Box 522

Iowa City, Iowa 52244-0522

[Home](#) | [About Ursula Delworth](#) | [Grant Applications](#) | [Past Award Recipients](#) | [Contact Us](#)

The Miccio Foundation . P. O. Box 522 . Iowa City, Iowa 52244-0522 info@miccio.org

The Miccio Foundation

Standard and Mini Grant Application

Awards up to \$10,000 Standard (typically \$3,500) and \$1,500 Mini (typically \$1,500)

Internal Use Only

Code _____

Date Received ____ / ____ / ____

Amount Granted \$ _____

Instructions

Enter the requested information into fields below, print this page and attach to the front of your grant application packet (packet checklist) **Grant applications must be post marked by May 1 or November 1 Provide SEVEN copies of all your grant material including this cover page!**

Application

Organization Information

Organization Name _____

Federal Tax ID (EIN) _____

Date of 501c3 Letter ____ / ____ / ____

Project Title _____

Contact Name _____

Mailing Address _____

Address (cont.) _____

Facility Address _____

Address (cont.) _____

Phone (____) ____ - ____

E-Mail Address _____

Web Address _____

Current Director's Name _____

Grant Type

☐ Standard ☐ Mini

Funding Cycle

Month: ☐ May ☐ November

Year: _____

Amount Requested: \$ _____

Purpose (Check all that apply)

☐ Adoption☐ Emergency Services☐ Facility Maintenance/Remodeling☐ Veterinary Care/Medical Equipment☐ Animal Training☐ Ending Inhumane Treatment☐ Feral Colony TNR

Other (describe) _____

☐ Caging☐ Equipment☐ Spay/Neuter☐ Humane Education☐ Facility Expansion☐ Start-up

How to Write a Miccio Grant

Please include the following (typed) information with your grant application. Note that the Miccio Grant application process has two parts. We ask that you describe A.) the project which you are requesting funds for and B.) your organization.

A) Describe your project and include your organization's need for this project

- Answer each question and use headings to organize your response
 - 1 How will this project benefit your organization and/or community?
 - 2 Who is going to do this project?
 - 3 When will you start your project? When do you expect your project to be completed?
 - 4 How will you know if your project is successful?
 - 5 What are your plans for matching funds or additional funds?
- Provide a line item budget, by category, showing how grant funds will be spent including any funds available from other sources (group expenses in logical categories) If the project is ongoing, provide the past source of income and previous

budget

- Please include bids (if applicable) for your current project. If possible, provide more than one bid. List labor and materials donated to this project.
- Include a copy of a current letter of support from your community that is specific to this project (e.g., local law enforcement, veterinarian, mayor).

B) Describe your organization and the geographic area that you serve (Grant funds are for Iowa animals only)

- Answer each question or respond to each request and use headings to organize your response
 - 1 Where are you located in Iowa and how does your organization serve your local area?
 - 2 If applicable, how many animals do you serve per year and in what way?
 - 3 Please list your organization's yearly (most recent) budget allocations divided by income and expenses (Do not send IRS tax returns)
 - 4 Please list your current board members, officers, and directors
 - 5 If you are applying for a Standard Miccio grant, include a copy of your Iowa Department of Agriculture and Land Stewardship (IDALS) Pound or Shelter license

Submit Your Application to:

The Miccio Foundation
P. O. Box 522
Iowa City, Iowa 52244-0522

Provide SEVEN copies of all your grant material.

We appreciate you taking the time to make your grant proposals look professional but it is not necessary to do anything more than staple the proposals. Plastic binders, cardboard folders, etc. are not needed. We do ask that you respond to each bulleted item above and that you include headings in your proposal that match the numerical questions/requests.

The Miccio Foundation

Jean M. Walker Grant Application (Awards up to \$1,000)

Internal Use Only

Code _____

Date Received ____/____/____

Amount Granted \$ _____

Instructions

Enter the requested information into fields below, print this page and attach to the front of your grant application packet (packet checklist) Grant applications must be post marked by May 1 or November 1 *Provide SEVEN copies of all your grant material including this cover page!*

Application

Organization Information

Organization Name _____

Federal Tax ID (EIN) _____

Date of 501c3 Letter ____/____/____

Project Title _____

Contact Name _____

Mailing Address _____

Address (cont.) _____

Facility Address _____

Address (cont.) _____

Phone (____) ____-____

E-Mail Address _____

Web Address _____

Current Director's Name _____

Funding Cycle

Month: ☐ May ☐ November

Year: _____

Amount Requested \$ _____

Purpose (Check each that apply)

☐ Ending Inhumane Treatment of Companion Animals ☐ Humane Education

How to Write a Jean M. Walker Miccio Grant

Please include the following (typed) information with your grant application. Note that the Jean M. Walker Miccio Grant application process has two parts. We ask that you describe A.) the project which you are requesting funds for, and B.) your organization.

A) Describe your project and include your organization's need for this project

- Answer each question and use headings to organize your response
 - 1 How with this project benefit your organization and/or community?
 - 2 Who is going to do this project?
 - 3 When will you start your project? When do you expect your project to be completed?
 - 4 How will you know if your project is successful?
 - 5 What are your plans for matching funds or additional funds?
- Provide a line item budget, by category, showing how grant funds will be spent including any funds available from other sources (group expenses in logical categories) If the project is ongoing, provide the past source of income and previous budget
- Please include bids (if applicable) for your current project. If possible, provide more than one bid. List labor and materials donated to this project.
- Include a copy of a current letter of support from your community that is specific to this project (e.g., local law enforcement,

veterinarian, mayor)

B) Describe your organization and the geographic area that you serve (Grant funds are for Iowa animals only)

- Answer each question or respond to each request and use headings to organize your response
 - 1 Where are you located in Iowa and how does your organization serve your local area?
 - 2 If applicable, how many animals do you serve per year and in what way?
 - 3 Please list your organization's yearly (most recent) budget allocations divided by income and expenses (Do not send IRS tax returns)
 - 4 Please list your current board members, officers, and directors

Submit Your Application to:

The Miccio Foundation
P. O. Box 522
Iowa City, Iowa 52244-0522

Provide SEVEN copies of all your grant material.

We appreciate you taking the time to make your grant proposals look professional but it is not necessary to do anything more than staple the proposals. Plastic binders, cardboard folders, etc. are not needed. We do ask that you respond to each bulleted item above and that you include headings in your proposal that match the numerical questions/requests.

ACCOUNT STATEMENT

PAGE 22

ACCOUNT NUMBER [REDACTED]

JANUARY 01, 2010 TO DECEMBER 31, 2010

TRANSACTION DETAIL (CONTINUED)

| DATE | DESCRIPTION | PRINCIPAL CASH | INCOME CASH | COST | GAIN / LOSS |
|------------------------------|--|-------------------|----------------|------|----------------|
| 03/30/10 | VANGUARD SHORT-TERM FEDERAL FD ADMIRAL SHORT TERM CAPITAL GAINS DIVIDEND ON 1,390 945 SHS VANGUARD SHORT-TERM FEDERAL FD ADMIRAL AT 008 PER SHARE PAYABLE 03/30/2010 EX DATE 03/29/2010 | | 11 13 | | 11 13 |
| 03/30/10 | LONG TERM CAPITAL GAINS DIVIDEND ON 1,390 945 SHS VANGUARD SHORT-TERM FEDERAL FD ADMIRAL AT 0 03 PER SHARE PAYABLE 03/30/2010 EX DATE 03/29/2010 | 41 73 | | | 41 73 |
| 12/31/10 | SHORT TERM CAPITAL GAINS DIVIDEND ON 214 379 SHS VANGUARD SHORT-TERM FEDERAL FD ADMIRAL AT 106 PER SHARE PAYABLE 12/31/2010 EX DATE 12/30/2010 | | 22 72 | | 22 72 |
| 03/01/10 | WELLS FARGO & CO DIVIDEND ON 450 SHS WELLS FARGO & CO AT 0 05 PER SHARE PAYABLE 03/01/2010 EX DATE 02/03/2010 | | 22 50 | | |
| 06/01/10 | DIVIDEND ON 450 SHS WELLS FARGO & CO AT 0 05 PER SHARE PAYABLE 06/01/2010 EX DATE 05/05/2010 | | 22 50 | | |
| 09/01/10 | DIVIDEND ON 450 SHS WELLS FARGO & CO AT 0 05 PER SHARE PAYABLE 09/01/2010 EX DATE 08/04/2010 | | 22 50 | | |
| 12/01/10 | DIVIDEND ON 450 SHS WELLS FARGO & CO AT 0 05 PER SHARE PAYABLE 12/01/2010 EX DATE 11/03/2010 | | 22 50 | | |
| <i>Capital Gain Dividend</i> | | | | | |
| TOTAL DIVIDENDS | | 1,389 57 | 10,981 55 | 0 00 | 1,423.42 |

INTEREST

| | | | | | |
|----------|---|--|--------|--|--|
| 03/15/10 | FEDERAL FARM CREDIT BANK NON-CALLABLE 5.1% 03/15/2010 INTEREST ON 20,000 UNITS FEDERAL FARM CREDIT BANK NON-CALLABLE 5 1% 03/15/2010 PAYABLE 03/15/2010 | | 510 00 | | |
| 05/17/10 | FEDERAL FARM CREDIT BANK NON-CALLABLE 3.45% 05/16/2012 INTEREST ON 20,000 UNITS FEDERAL FARM CREDIT BANK NON-CALLABLE 3 45% 05/16/2012 PAYABLE 05/16/2010 EFFECTIVE 05/16/2010 | | 345 00 | | |
| 11/16/10 | INTEREST ON 20,000 UNITS FEDERAL FARM CREDIT BANK NON-CALLABLE 3 45% 05/16/2012 PAYABLE 11/16/2010 | | 345 00 | | |

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☐
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

| | | |
|---|--|--------------------------------|
| Type or print File by the due date for filing your return. See instructions. | Name of exempt organization | Employer identification number |
| | Number, street, and room or suite no. If a P.O. box, see instructions. | |
| | City, town or post office, state, and ZIP code. For a foreign address, see instructions. | |

Enter the Return code for the return that this application is for (file a separate application for each return) ☐ ☐

| Application Is For | Return Code | Application Is For | Return Code |
|--|-------------|--------------------------|-------------|
| Form 990 | 01 | Form 990-T (corporation) | 07 |
| Form 990-BL | 02 | Form 1041-A | 08 |
| Form 990-EZ | 03 | Form 4720 | 09 |
| Form 990-PF | 04 | Form 5227 | 10 |
| Form 990-T (sec. 401(a) or 408(a) trust) | 05 | Form 6069 | 11 |
| Form 990-T (trust other than above) | 06 | Form 8870 | 12 |

- The books are in the care of ►

Telephone No. ► FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until _____, 20____, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ☐ calendar year 20____ or
- ☐ tax year beginning _____, 20____, and ending _____, 20____.

- 2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
- ☐ Change in accounting period

| | | |
|---|----|----|
| 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. | 3a | \$ |
| b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. | 3b | \$ |
| c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. | 3c | \$ |

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

| | | |
|---|--|--|
| Type or print File by the extended due date for filing your return. See instructions. | Name of exempt organization The Miccio Foundation | Employer identification number 42-1501038 |
| | Number, street, and room or suite no. If a P.O. box, see instructions. P.O. Box 522 | |
| | City, town or post office, state, and ZIP code. For a foreign address, see instructions. Iowa City, IA 52244-0522 | |
| | | |

Enter the Return code for the return that this application is for (file a separate application for each return)

0 4

| Application Is For | Return Code | Application Is For | Return Code |
|--|-------------|--------------------|-------------|
| Form 990 | 01 | | |
| Form 990-BL | 02 | Form 1041-A | 08 |
| Form 990-EZ | 03 | Form 4720 | 09 |
| Form 990-PF | 04 | Form 5227 | 10 |
| Form 990-T (sec. 401(a) or 408(a) trust) | 05 | Form 6069 | 11 |
| Form 990-T (trust other than above) | 06 | Form 8870 | 12 |

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of ► Gary Levitz 14 Cherry LN NE Iowa City, IA 52240
Telephone No. ► 319-354-4117 FAX No. ►
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐ . If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

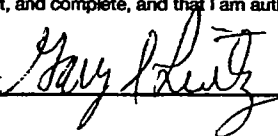
- 4 I request an additional 3-month extension of time until October 15, 20 11 .
- 5 For calendar year 10 , or other tax year beginning , 20 , and ending , 20 .
- 6 If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period
- 7 State in detail why you need the extension Additional time is needed to consult and work with previous accountant to reconcile data to assure accurate and complete return.

| | | | |
|--|-----------|----|-----|
| 8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. | 8a | \$ | 250 |
| b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868. | 8b | \$ | 299 |
| c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. | 8c | \$ | 0 |

Signature and Verification

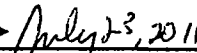
Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ►



Title ► Treasurer

Date ►



Form 8868 (Rev. 1-2011)

**Application for Extension of Time To File an
Exempt Organization Return**

OMB No 1545-1709

▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☐
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

| | | |
|--|---|---|
| Type or print File by the due date for filing your return. See instructions. | Name of exempt organization The Miccio Foundation | Employer identification number 42-1501038 |
| | Number, street, and room or suite no. If a P.O. box, see instructions. P.O. Box 522 | |
| | City, town or post office, state, and ZIP code. For a foreign address, see instructions. Iowa City, IA 52244-0522 | |
| | | |

Enter the Return code for the return that this application is for (file a separate application for each return) ☐

| Application Is For | Return Code | Application Is For | Return Code |
|--|-------------|--------------------------|-------------|
| Form 990 | 01 | Form 990-T (corporation) | 07 |
| Form 990-BL | 02 | Form 1041-A | 08 |
| Form 990-EZ | 03 | Form 4720 | 09 |
| Form 990-PF | 04 | Form 5227 | 10 |
| Form 990-T (sec. 401(a) or 408(a) trust) | 05 | Form 6069 | 11 |
| Form 990-T (trust other than above) | 06 | Form 8870 | 12 |

- The books are in the care of ▶ **Gary Levitz 14 Cherry LN NE Iowa City, IA 52240**

Telephone No. ▶ **319-354-4117** FAX No. ▶

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **August 15**, 20 **11**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ▶ ☒ calendar year 20 **11** or
- ▶ ☐ tax year beginning , 20 , and ending , 20 .

- 2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
- ☐ Change in accounting period

| | | | |
|--|-----------|----|------------|
| 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. | 3a | \$ | 250 |
| b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. | 3b | \$ | 299 |
| c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. | 3c | \$ | 0 |

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☐ **Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

| | | |
|---|--|--------------------------------|
| Type or print File by the extended due date for filing your return. See instructions. | Name of exempt organization | Employer identification number |
| | Number, street, and room or suite no. If a P.O. box, see instructions. | |
| | City, town or post office, state, and ZIP code. For a foreign address, see instructions. | |

Enter the Return code for the return that this application is for (file a separate application for each return)

| | |
|--|--|
| | |
|--|--|

| Application Is For | Return Code | Application Is For | Return Code |
|--|-------------|--------------------|-------------|
| Form 990 | 01 | | |
| Form 990-BL | 02 | Form 1041-A | 08 |
| Form 990-EZ | 03 | Form 4720 | 09 |
| Form 990-PF | 04 | Form 5227 | 10 |
| Form 990-T (sec. 401(a) or 408(a) trust) | 05 | Form 6069 | 11 |
| Form 990-T (trust other than above) | 06 | Form 8870 | 12 |

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

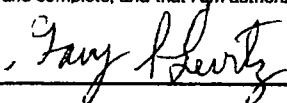
- The books are in the care of ☐ Telephone No. ☐ FAX No. ☐
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ☐. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 4 I request an additional 3-month extension of time until _____, 20____.
- 5 For calendar year _____, or other tax year beginning _____, 20____, and ending _____, 20____.
- 6 If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period
- 7 State in detail why you need the extension _____

| | | |
|--|-----------|----|
| 8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. | 8a | \$ |
| b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868. | 8b | \$ |
| c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. | 8c | \$ |

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature Title **Treasurer**Date **May 8, 2011**