

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 Open to Public

Inspection A For the 2010 calendar year, or tax year beginning and ending Check if applicable C Name of organization D Employer identification number Address change COMMUNITY FOUNDATION OF NORTHEAST IOWA Name change 42-6060414 Doing Business As Initial Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite Termin-319-287-9106 P.O. BOX 1176 Amende return 20,649,769. City or town, state or country, and ZIP + 4 G Gross receipts \$ Applica-tion WATERLOO, IA 50704-1176 H(a) Is this a group return pending Yes X No F Name and address of principal officer. MARY ANN BURK for affiliates? SAME AS C ABOVE H(b) Are all affiliates included? ∐Yes L∐No 4947(a)(1) or I Tax-exempt status X 501(c)(3) ___ 501(c) () ◀ (insert no.) If "No," attach a list (see instructions) J Website: ► WWW.CFNEIA.ORG H(c) Group exemption number K Form of organization; X Corporation Other > Year of formation: 1956 M State of legal domicile: IA Part I Summary 1 Briefly describe the organization's mission or most significant activities: THE COMMUNITY FOUNDATION Activities & Governance RESPONDS TO THE CURRENT AND FUTURE CHARITABLE NEEDS OF NORTH Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) 16 Number of independent voting members of the governing body (Part VI, line 1b) 9 5 Total number of individuals employed in calendar year 2010 (Part V, line 2a) 450 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue from Part VIII, column (0)-line 12 0. 0. b Net unrelated business taxable income from Form 990-1, line 34 SS **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) 5,884,405 7,391,3<u>99.</u>/ 8 0. Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d) 401,879 208,966. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 6,286,284 8,600,365. 4,466,257 3,561,446. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. n Benefits paid to or for members (Part IX, column (A), line 4) 386,055. 370,028 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 127,353. 119,317 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 4,955,602. 4,074,854. 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 4,525,511. 1,330,682 Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 47,754,864. 55,604,361. 20 Total assets (Part X, line 16) 3,869. 21 Total liabilities (Part X, line 26) 750,995. Net assets or fund balances. Subtract line 21 from line 20 | Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign MARY ANN BURK, PRESIDENT Here Type or print name and title Date Preparer's signature Print/Type preparer's name 9/16/11 setf-employed Paid STEVEN K. DUGGAN STEVEN K. DUGGAN Firm's name - HOGAN - HANSEN, P.C. Firm's EIN Preparer Firm's address 3128 BROCKWAY RD., P.O. BOX 240 Use Only Phone no. 319-233-5225 WATERLOO, IA 50704-0240

May the IRS discuss this return with the preparer shown above? (see instructions)

	art III Statement of Program Service Accomplishments	Page 2							
1.0		(T-							
_	Check if Schedule O contains a response to any question in this Part III	<u> </u>							
1	Briefly describe the organization's mission THE COMMUNITY FOUNDATION RESPONDS TO THE CURRENNT AND FUTURE								
	CHARITABLE NEEDS OF NORTH AND EAST IOWA; SECURES AND SERVES AS THE								
	CUSTODIAN ENDOWMENT FUNDS CONTRIBUTED BY MANY DONORS TO BENEFIT								
	CHARITABLE CAUSES; SERVES IN A LEADERSHIP ROLE TO CONVENE, EXAMINE,								
2	Did the organization undertake any significant program services during the year which were not listed on								
_	the prior Form 990 or 990-EZ?	Y No							
	If "Yes," describe these new services on Schedule O.	140							
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	X No							
	If "Yes," describe these changes on Schedule O.								
4									
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and								
	allocations to others, the total expenses, and revenue, if any, for each program service reported.								
4a)							
	CHOSEN BY THE BOARD OF DIRECTORS, DISTIBUTIONS ARE MADE IN THE								
	FOLLOWING AREAS; ARTS & CULTURE, COMMUNITY AFFAIRS & DEVELOPMENT,								
	EDUCATION, ENVIRONMENTAL EDUCATION & PROTECTION, HEALTH, HISTORICAL								
	PRESERVATION & HUMAN SVCS.								
46	(O-1)								
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)							
									
									
									
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)							
4d	Other program services (Describe in Schedule O.)								
	(Expenses \$ including grants of \$) (Revenue \$)								
4e	Total program service expenses ► 3,561,446.								
	Form 990 ((2010)							

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
_	If "Yes," complete Schedule A	1_	X	-
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			٠,,
4	public office? If "Yes," complete Schedule C, Part I	3_	 	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	١.		
_	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_ ا		ŀ
6	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to	5		
Ü	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	x	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	-		
	Schedule D, Part III	8	x	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide			-
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI .	11a	Х	
þ	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	1		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	ļ	X
đ	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	Х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e		^
•	the organization's separate or consolidated initialicial statements for the tax year include a roomote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	'''		
	Schedule D, Parts XI, XII, and XIII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	[]		
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		<u> X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	i I		
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	_		4,-
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	ا ۔ ا		v
~ -	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		
D	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that	201-		
	operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 30 X 31 X					
United States on Part IX, column (A), ine 17 if "res," complete Schedule I, Parts and II 21 Did the organization report more than \$5,000 or grants and other assistance to individuals in the United States on Part IX, column (A), line 27 if "res," complete Schedule I, Parts I and III 23 Did the organization answer "res" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, frustees, key employees, and injects compensated employees? if "res," complete Schedule I, Parts I and III 24 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? if "res," answer lines 24th through 24d and complete Schedule Is "though 24d and complete Is "though 24d and complete Schedule Is "though 24d and complete Is "though 24d and complete Is "though 24d and complete Schedule Is "though 24d and complete Is "though 24d a	04	Did the ergenization report move than 65 000 of events and other conditions and other conditions.		Yes	No
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, coclium (A), line 2? If 'vs., "complete Schedule I, Parts I and IX and former officer, director, trustees, key employees, and highest compensation of the organization's current and former officers, director, trustees, key employees, and highest compensated employees? If 'Yes, 'complete Schedule Schedule II' 'yes, 'complete	21			v	
column (A), line 27 if "Yes," complete Schedule I, Parts I and III Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule III Interest III Section A, line 25 24a Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule III Interest	22	· · · · · · · · · · · · · · · · · · ·	21	Λ.	
23 Dd the organization answer "Yes" to Part VII, Section A, Ine 3.4, or 5 about compensation of the organization's current and former officers, directors, furstees, key employees, and highest compensated employees? // "Yes," complete Schedule / 24a Dd the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? // "Yes," enswer lines 24b through 24d and complete Schedule K // "No", go to line 25 Dd the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization maintain an escrow account other than a refunding escrow at any time during the year? 24d Dd the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Dd the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Dd the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Dd the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Dd the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I I State organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organizations with a disqualified person in a prior year, and that the transaction has not been reported on any of the organizations with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not or former officer, director, trustee, key employee, highly compensated employee, or disqualified person during the part of the organization aparty to a business transaction with one of t	~~		00		v
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 23	23	·			^
Schedule J 24a Dd the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If 'No', go to line 25 5 D of the organization maintain an escrow account other than a refunding secrow at any time during the year to defease any tax exempt bonds? 6 D off the organization maintain an escrow account other than a refunding secrow at any time during the year to defease any tax exempt bonds? 7 D off the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year to defease any tax exempt bonds? 8 D off the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year to defease any tax exempt bonds? 9 D off the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 10 D off the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year to defease any tax exemptions of the disqualified person during the year? If 'Yes, 'complete Organization with a disqualified person during the year? If 'Yes, 'complete Organization and that the transaction with a disqualified person during the year? If 'Yes, 'complete Schedule L, Part II the organization and year of the organization's tax year? If 'Yes, 'complete Schedule L, Part II the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV anstructions for applicable filing thresholds, conditions, and exceptions) 1 A Caminy interest or applicable filing thresholds, conditions, and exceptions? 1 A Caminy interest organization and party to a business transaction with one of the following parties (see Schedule L, Part IV A A Emily interest, endirect or indirect owner? If 'Yes, 'complete Schedule L, Part IV A A Emily interest, endirect or indirect owner? If 'Yes, 'complete Schedule L, Part IV A A Emily interest,					
24a Dd the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K if "No", go to line 25 b Dd the organization invest any proceeds of tax-exempt bonds beyond a temporary peniod exception? Dd the organization invest any proceeds of tax-exempt bonds beyond a temporary peniod exception? Dd the organization invest any proceeds of tax-exempt bonds beyond a temporary peniod exception? 24b			22		v
is ast day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No", go to line 25 b Did the organization mental an a restrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds? d Did the organization maintain an escrive account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization and 50 1c(s)4 organizations. Did the organization is not put a current or former officer, director, trustee, key employees benefit transaction with a disqualified person in a prior year, and that the transaction has not or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II/ D Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, bushing and the person outstanding as of the end of the organization is accomplication of the following parties (see Schedule L, Part IV a National Part III and the current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV D A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV D D D D D D D D D D D D D D D D D D D	24a				_21
Schedule K if No., go to line 25 b Did the organization invest any proceeds of tax exempt bonds beyond a temporary penod exception? c Did the organization invest any proceeds of tax exempt bonds beyond a temporary penod exception? c Did the organization invest any proceeds of tax exempt bonds beyond a temporary penod exception? c Did the organization area as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d					
b Did the organization invest any proceeds of tax exempt bonds beyond a temporary penod exception? c Did the organization maintain an escrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an "on behalf of "issuer for bonds outstanding at any time during the year? 24d 25a Section 501(a)(3) and 501(c)(4) organizations. Did the organization excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part II Was a loan to or by a current or former officer, director, frustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part III Was the organization provide a grant or other assistance to an officer, director, frustee, key employee, substantial contribution, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part IV instructions for applicable filing throsholds, conditions, and exceptions? a A current or former officer, director, frustee, or key employee? If "Yes," complete Schedule L, Part IV A mentity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 510 (17) and 50 (17) or 17 o			242		x
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "xes," complete Schedule L, Part I I I I I I I I I I I I I I I I I I I	b	• • •			
any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part I 25b	_				
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part II 25c Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part IV 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 28 was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 29 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 29 A nentity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 29 Dut the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Dut the organization iliquidate, terminate, or dissolve and cease operations? 29 If "Yes," complete Schedule M, Part I II 30 Did the organization iliquidate, terminate, or dissolve and cease operations? 30 If "Yes," complete Schedule R, Part II, III, N, and V, Ime 1 31 Did the organization oward of the organization make any transaction with a controlled entity within the meani	•		240		
Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	d	·			
disqualified person during the year? If "Yes," complete Schedule L, Part I b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I 25b X 25b X 2 8 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26b X 2 9 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 27c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 27c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 27c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 27c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule M 29c X 27c M 27c					
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 if "Yes," complete Schedule L, Part II 25b X 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part III 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part IV 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 28a X 28a X 28b X 27 A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28c Complete Schedule Complete Schedule L, Part IV 28c Did the organization receive more than \$25,000 in non-ash contributions? If "Yes," complete Schedule M 30 Did the organization receive more than \$25,000 in non-ash contributions? If "Yes," complete Schedule M 30 Did the organization receive more than \$25,000 in non-ash contributions? If "Yes," complete Schedule N, Part II 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 31 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 T701.2 and 301.7701.37 If "Yes," complete Schedule R, Part I iii Pyes, "complete Schedule R, Part V, line 2 32 Did the organization re			25a		х
that the transaction has not been reported on any of the organization's pnor Forms 990 or 990-E27 // "Yes," complete Schedule L, Part I / 25b	b				
Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV B to dit the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M D dit the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M, Part I D d the organization sel, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I D d the organization own 100% of an entity dicregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part I II Was the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13					
Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 X 26 X 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributior, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III 27 X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization includate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule R, Part II 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 77012 and 301.77013? If "Yes," complete Schedule R, Part II. 32 Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes,			25b		х
person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26	26	·			
Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A nentity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I Did the organization inquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization own 100% of an entity dicregarded as separate from the organization under Regulations sections 301 7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I, III, IV, and V, Inne 1 Say related organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iine 2 To Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for feder			26		Х
Schedule L, Part III 27 X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28 X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 29 Did the organization injudate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 20 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 21 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 22 Did the organization related to any tax exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, Ime 1 23 Is any related organization are controlled entity within the meaning of section 512(b)(13)? 24 Was the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Ime 2 35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? 16 Yes, "complete Schedule R, Part V, Ime 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a	27				
Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filling thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee? If "Yes," complete Schedule M 2b Id the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 2p IX 30 Did the organization inquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 30 IX 31 Did the organization or lough of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part I 32 IX 31 Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 501(c)(3)? Tiles," complete Schedule R, Part V, line 2 31 Did the organization conduct more than 5% of its activities through an entity		contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X 29		Schedule L, Part III	27		X
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee? If "Yes," complete Schedule M 29 X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 31 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 31 X 32 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 32 Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization? If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax pu	28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 31 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 31 A X 32 Schedule N, Part II 33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, Ine 1 34 Is any related organization a controlled entity within the meaning of section 512(b)(13)? 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iine 2 36 Section 501(c)(3) organizations. Did the organization make any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iine 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization? If "Yes," complete Schedule R, Part V, Iine 2 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note, All Form 990 filers are required to complete Schedule O		instructions for applicable filing thresholds, conditions, and exceptions).			
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31	а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 30 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 31 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 31 X 32 X 33 X 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, IIV, and V, line 1 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note, All Form 990 filers are required to complete Schedule O	b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		<u>X</u> _
Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, Iine 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)? Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iine 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note, All Form 990 filers are required to complete Schedule O	C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note, All Form 990 filers are required to complete Schedule O		director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<u> </u>
contributions? If "Yes," complete Schedule M 30	29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)? Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes," complete Schedule R, Part V, line 2 Tod the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Tod the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 Bis any related organization a controlled entity within the meaning of section 512(b)(13)? Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O		contributions? If "Yes," complete Schedule M	30	X	
Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	31	Did the organization liquidate, terminate, or dissolve and cease operations?			
Schedule N, Part II 32 X 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 34 Was the organization related to any tax-exempt or taxable entity? 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? 36 Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes," complete Schedule R, Part V, line 2 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O		·	31		<u> </u>
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 X 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 34 X 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Yes X No 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes," complete Schedule R, Part V, line 2 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	32				
sections 301 7701·2 and 301.7701·3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 34 X 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes," complete Schedule R, Part V, line 2 36 X Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O 38 X			32		<u> </u>
Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O 38 X	33				77
If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O 38 X			33		<u> X</u>
Is any related organization a controlled entity within the meaning of section 512(b)(13)? a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O 38 X	34	·		. ,	
a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O 38 X					
section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes," complete Schedule R, Part V, line 2 36 X Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O 38 X			35	<u> </u>	
Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes," complete Schedule R, Part V, line 2 36 X Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O 38 X	а				
If "Yes," complete Schedule R, Part V, line 2 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O 38 X	00				
Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	36	• • • • • • • • • • • • • • • • • • • •	_		v
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O 38 X	~		36		
Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	J/				v
Note. All Form 990 filers are required to complete Schedule O	20		3/		
	<i>3</i> 8		20	, l	
		Note. All Form 950 mers are required to complete Schedule O			2010)

42-6060414

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 11			
b				
С				
	(gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 9			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	If "Yes," has it filed a Form 990 T for this year? If "No," provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
ь	If "Yes," enter the name of the foreign country.			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a_		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	· · · · · · · · · · · · · · · · · · ·	7g		X
h	· · · · · · · · · · · · · · · · · · ·	7h		X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			- T
_	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8_		X
9	Sponsoring organizations maintaining donor advised funds.			х
		9a_		X
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b_		
10	Section 501(c)(7) organizations. Enter. Initiation fees and capital contributions included on Part VIII, line 12			
a	5 000 D 1/4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			,
a	Gross income from other sources (Do not net amounts due or paid to other sources against			
D	amounts due or received from them)			
122	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	to the annual to the second to	13a		
а	Note. See the instructions for additional information the organization must report on Schedule O.	,		
h	Enter the amount of reserves the organization is required to maintain by the states in which the			· .
J	organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			L
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		Earm	agn	(2010)

Form 990 (2010) COMMUNITY FOUNDATION OF NORTHEAST IOWA 42-6060414 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. \mathbf{x} Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year b Enter the number of voting members included in line 1a, above, who are independent 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 X Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Does the organization have members or stockholders? 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the 7a governing body? X 7b b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a Х b Each committee with authority to act on behalf of the governing body? a8 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the X organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No 10a X 10a Does the organization have local chapters, branches, or affiliates? b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with those of the organization? X 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise X 12b to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 12c .. . X 13 13 Does the organization have a written whistleblower policy? X 14 14 Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a X **b** Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a

Section C. Disclosure

taxable entity during the year?

- 17 List the states with which a copy of this Form 990 is required to be filed ► ____ NONE
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available Check all that apply.

b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's

X Own website

X Another's website

X Upon request

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

50703

State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► STACY PAUL - 319-287-9106

425 CEDAR STREET, WATERLOO, IA

exempt status with respect to such arrangements?

Form **990** (2010)

X

16a

	(2010)	

COMMUNITY FOUNDATION OF NORTHEAST IOWA

42-6060414

Page 7

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organi	(B)	J. g.			C)			(D)	(E)	(F)	
Name and Title	Average			Pos		,		Reportable	Reportable	Estimated	
Name and The	hours per	(c				app	ly)	compensation	compensation	amount of	
	week (describe hours for related organizations in Schedule O)	rustee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations	
MARY ANN BURK											
PRESIDENT AND CEO	40.00	X		X		L		97,216.	0.	4,112.	
DEE VANDEVENTER											
PAST CHAIR	0.10	X	_	X				0.	0.	0.	
JOHN MONAGHAN			•		İ					_	
TREASURER	0.10	X		X	L.,			0.	0.	0.	
GARY BERTCH									_		
1ST VICE CHAIR	0.10	X		X				0.	0.	0.	
DENNIS CLARK											
DIRECTOR	0.10	Х				H		0.	0.	0.	
DAWN DUVEN	0.10				l					•	
2ND VICE CHAIR	0.10	X		X	_			0.	0.	0.	
MARLENE BEHN	0.10	x						0.	0.	0.	
DIRECTOR	0.10	Λ						0.	0.		
JAY BULLERMAN DIRECTOR	0.10	v						0.	0.	0.	
MARK ROLINGER		Λ		_		Н		0.		•	
DIRECTOR	0.10	$ \mathbf{x} $						0.	0.	0.	
LOIS RUPKEY-COHRT		••				Н					
DIRECTOR	0.10	x						0.	0.	0.	
CHUCK SHIREY											
CHAIR	0.10	х		x				0.	0.	0.	
ROBERT SMITH											
DIRECTOR	0.10	X						0.	0.	0.	
LORI JOHNSON											
DIRECTOR	0.10	X						0.	0.	0.	
KATY WILLIAMS			1								
DIRECTOR	0.10	X						0.	0.	0.	
KYLE CHRISTIASON											
SECRETARY	0.10	X		X				0.	0.	0.	
CARL HAUSER							į	_		_	
DIRECTOR	0.10	X			-			0.	0.	0.	
JIM DAVIES								_	ا ۾	^	
DIRECTOR	0.10	X						0.	0.	0 . Form 990 (2010)	

Total number of independent contractors (including but not limited to those listed above) who received more than

Form 990 (2010)

\$100,000 in compensation from the organization

Pa	irt VI	II Statement of Reve	nue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts s	1 a	Federated campaigns	1a					_
E Z	b	Membership dues	1b		1			1
°,E	c	: Fundraising events	1c		1			
Contributions, gifts, grants and other similar amounts		Related organizations	1d		1			
S, E	e	Government grants (contribu		336,082.				
	f	All other contributions, gifts, grain		000,002.	1			
the st	•	similar amounts not included abo		055,317.	1			1
d of Ti		Noncash contributions included in line		658,190.	1			
Së	. E	Total. Add lines 1a-1f	3 14-11 \$		7,391,399.			
	<u></u>	Total resemble 12 1.		Business Code				
ģ	2 a	l		Egginoss code	1			-
Š	b							
Ser	c							
an eve	d						<u>-</u>	
Program Service Revenue	9							
Pre	f	All other program service rev	enue –			-		
		Total. Add lines 2a-2f		>				
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)	,		1,154,114.			1154114.
	4	Income from investment of ta	x-exempt bond r					
	5	Royalties .		>				
		•	(ı) Real	(ii) Personal				
	6 a	Gross Rents] -		-	
	b				1			
	c	Rental income or (loss)] ,]			
		Net rental income or (loss)		. •				
		Gross amount from sales of	(i) Securities	(ii) Other	*		-	
		assets other than inventory	12104256		1	, '		
	ь	Less: cost or other basis				-		
		and sales expenses	12049404	ļ				
	С	Gain or (loss)	54,852.					
		Net gain or (loss)		>	54,852.	54,852.		İ
a		Gross income from fundraisin	a events (not					
ğ		including \$			1		-	
ě		contributions reported on line						
Other Revenue		Part IV, line 18	а					
ŧ.	b	Less: direct expenses	b]			
0	С	Net income or (loss) from fund	draising events	. •				
		Gross income from gaming a	_					
		Part IV, line 19	а					
	b	Less: direct expenses	b]			•
	c	Net income or (loss) from gan	ning activities	. >				
Į	10 a	Gross sales of inventory, less	returns					
		and allowances	а		j i			
	b	Less: cost of goods sold]			
	с	Net income or (loss) from sale	s of inventory	▶				
		Miscellaneous Revenu		Business Code				
	11 a							
- 1	b							l
- 1	c							
- }	d	All other revenue						
1	e	Total. Add lines 11a-11d	•					
	12	Total revenue. See instructions.		<u>▶</u>	8,600,365.	54,852.	0 .	1154114.
03200	9							Form 990 (2010)

Form 990 (2010)

032010 12-21-10

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

7b,	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	3,561,446.	3,561,446.		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	3,301,110.	3/301/1100		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	101,327.		50,664.	50,663.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	221 062		162,073.	69,789
7	Other salaries and wages	231,862.		102,013.	09,109
8	Pension plan contributions (include section 401(k)	7,111.		4,622.	2,489
9	and section 403(b) employer contributions) Other employee benefits	19,891.		12,929.	6,962
10	Payroll taxes	25,864.		16,807.	9,057
11	Fees for services (non-employees)	20,0010			
а					
b	Legal	187.		187.	
С	, · .	15,020.		15,020.	
d	Lobbying				··
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other .				
12	Advertising and promotion .	20,179.			20,179
13	Office expenses .	21,913.		11,855.	10,058
14	Information technology				
15	Royalties	10 654		10 674	
16	Occupancy	18,674.		18,674.	
17	Travel				
18	Payments of travel or entertainment expenses	•			
40	for any federal, state, or local public officials	5,899.		5,470.	429
19	Conferences, conventions, and meetings	3,033.		5,470.	727
20 21	Interest Payments to affiliates				
22	Depreciation, depletion, and amortization	8,543.		8,543.	
23	Insurance	4,960.		4,960.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule 0.)	273000			
а	EQUIPMENT RENTAL AND MA	16,029.		16,029.	
b	DUES AND MEMBERSHIPS	6,702.		6,702.	
С	CONSULTING	2,753.		2,753.	
d	LICENSE FEES/DUES/SUBSC	1,900.		1,900.	
е	MISCELLANEOUS	1,729.		1,729.	
f	All other expenses	2,865.		1,940.	925.
25	Total functional expenses. Add lines 1 through 24f	4,074,854.	3,561,446.	342,857.	170,551.
26	Joint costs. Check here 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet (A) (B) Beginning of year End of year 1,459. 295. 1 Cash - non-interest-bearing 3,913,507. 2,397,341. 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 4 Accounts receivable, net 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 6 Assets 7 Notes and loans receivable, net Inventories for sale or use 8 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 99,621. 10a 68,233. 29,952. 10c 31,388. b Less. accumulated depreciation 10b 41,600,415. 47,242,651. Investments - publicly traded securities 11 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 3,726,861. Other assets. See Part IV, line 11 15 4,415,356. 15 47,754,864 16 55,604,361. 16 Total assets. Add lines 1 through 15 (must equal line 34) 3,869. Accounts payable and accrued expenses 17 17 18 18 Grants payable 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, 22 highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities. Complete Part X of Schedule D 25 3,869 3,131. 26 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here > X and complete Net Assets or Fund Balances lines 27 through 29, and lines 33 and 34. 26,231,794. 21,850,910. Unrestricted net assets 27 27 29,369,436. 25,900,085. Temporarily restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here complete lines 30 through 34. Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 47,750,995. <u>55,601,230.</u> 33 33 Total net assets or fund balances

55,604,361. Form **990** (2010)

754.864.

Total liabilities and net assets/fund balances

~orm	1990 (2010) COMMUNITY FOUNDATION OF NORTHEAST IOWA	42-0	000414	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	_1	8,60		
2	Total expenses (must equal Part IX, column (A), line 25)	2	<u>4,07</u>		
3	Revenue less expenses Subtract line 2 from line 1	3	<u>4,52</u>		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	47,75		
5	Other changes in net assets or fund balances (explain in Schedule O)	5	3,32		
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	<u>55,60</u>	<u>1,2</u>	<u>30.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII	<u> </u>			ᆜ
				Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		_2a		X
b	Were the organization's financial statements audited by an independent accountant?		_2b	X	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	ļ
	If the organization changed either its oversight process or selection process during the tax year, explain in Scho	edule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued	d on a			
	separate basis, consolidated basis, or both				
	Separate basis X Consolidated basis Both consolidated and separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	igle Audit		ĺ	
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b	<u></u>	<u></u>

Form **990** (2010)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Employer identification number Name of the organization 42-6060414 COMMUNITY FOUNDATION OF NORTHEAST IOWA Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi), (Complete Part II) A community trust described in section 170(b)(1)(A)(vi), (Complete Part II.) An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h ___ Type III - Other c Type III - Functionally integrated al Type I b ____ Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, 11g(i) the governing body of the supported organization? 11g(ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? h Provide the following information about the supported organization(s). (iii) Type of (iv) is the organization (v) Did you notify the (vi) Is the (vii) Amount of (i) Name of supported (ii) EiN organization in col. organization organization in col. in col. (i) listed in your support organization (i) organized in the (described on lines 1-9 (i) of your support? governing document? U.S.? above or IRC section Yes (see instructions)) No No Total

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2010

Schedule A (Form 990 or 990-EZ) 2010 COMMUNITY FOUNDATION OF NORTHEAST IOWA 42-6060414 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Calendar year (or fixed year beginning in) Gits, grants, contributions, and memberarity fees received (Do not include any "unusual grants") 2 Tax revenues leved for the organization's benefit and either paid to ore expended on its behalf or expended or	Se	ction A. Public Support						
I Gilts, grants, contributions, and membership fees received (0 not include any "unusual grants") 2 Tax revenues leved for the organization's hencelf and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization's hencelf and either paid to or expended on its behalf 4 Total. Add lines 1 through 3 The potion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (i) 6 Public support agriculture in the standard of the services of t	Cale	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
Race Race	1	Gifts, grants, contributions, and						
2 Tax revenues leveed for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge a furnished by a governmental unit to the organization without charge 4 Total. Add inter 3 through 3 8361104. 7931844. 7131786. 5884405. 7391399. 36700538. 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Selection B. Total Support Calindary pay (or fiscal year beginning in) 6 8361104. 7931844. 7131786. 5884405. 7391399. 36700538. Section B. Total Support Calindary pay (or fiscal year beginning in) 8 8361104. 7931844. 7131786. 5884405. 7391399. 36700538. Section B. Total Support Calindary pay (or fiscal year beginning in) 8 8361104. 7931844. 7131786. 5884405. 7391399. 36700538. Section B. Total Support Calindary pay (or fiscal year beginning in) 9 8361104. 7931844. 7131786. 5884405. 7391399. 36700538. Section B. Total Support Calindary pay (or fiscal year beginning in) 9 8361104. 7931844. 7131786. 5884405. 7391399. 36700538. Section B. Total Support Calindary pay (or fiscal year beginning in) 9 8361104. 7931844. 7131786. 5884405. 7391399. 36700538. 1171797. 1158857. 764,846. 401,879. 1208966. 4706345. 1171797. 1158857. 764,846. 401,879. 1208966. 4706345. 1171797. 1158857. 764,846. 401,879. 1208966. 4706345. 1171797. 1158857. 764,846. 401,879. 1208966. 4706345. 1171797. 1158857. 764,846. 401,879. 1208966. 4706345. 1171797. 1158857. 764,846. 401,879. 1208966. 4706345. 1171797. 1158857. 764,846. 401,879. 1208966. 4706345. 1171797. 1158857. 764,846. 401,879. 1208966. 4706345. 1171797. 1158857. 764,846. 401,879. 1208966. 4706345. 1171797. 1158857. 764,846. 401,879. 1208966. 4706345. 1171797. 1158857. 764,846. 401,879. 1208966. 4706345. 1171797. 1158857. 764,846. 401,879. 1208966. 4706345. 1171797. 1158857. 764,846. 401,879. 120		membership fees received (Do not						
2 Tax revenues leved for the organization to prefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge for the part of the portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Sebosit test showless a south of the amounts from line 14 and stope from related activities, etc. (see instructions) 7 Amounts from line 4 8 361104. 7931844. 7131786. 5884405. 7391399. 36700538. Section B. Total Support 7 Amounts from line 4 8 361104. 7931844. 7131786. 5884405. 7391399. 36700538. Section B. Total Support 8 361104. 7931844. 7131786. 5884405. 7391399. 36700538. Section B. Total Support 7 Amounts from line 4 8 361104. 7931844. 7131786. 5884405. 7391399. 36700538. Section B. Total Support 8 361004. 7931844. 7131786. 5884405. 7391399. 36700538. Section B. Total Support 8 361104. 7931844. 7131786. 5884405. 7391399. 36700538. Section B. Total Support 8 361104. 7931844. 7131786. 5884405. 7391399. 36700538. Section B. Total Support 8 361104. 7931844. 7131786. 5884405. 7391399. 36700538. Section B. Total Support 9 Not income from income from income from unrelated business activities, whether or not the business is regularly carried on the business is regularly carried on the business is regularly carried on the business is regularly carried on the business is regularly carried on the business is regularly carried on the business is regularly carried on the business is regularly carried on Pont include gain or loss from the sale of capital assatic (Explain in Part IV.) 10 Total support. Add lines 7 through 10 11 Total support. Add lines 7 through 10 12 Gross recepts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section SOI(c)(c) organization. Post		include any "unusual grants ")	8361104.	7931844.	7131786.	5884405.	7391399.	36700538.
ization's benefit and either paid to or expended on its behalf 3. The value of services or facilities furnished by a governmental unit to the organization without charge 4. Total, Add lines 1 through 3 5. The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6. Public support Selectives From line 4 8. Gross income from ine 4 8. Gross income from unrelated business and income from unrelated business and income from unrelated business activities, whether or not the business are regularly carried on 10 10. Other income Do not include gain or loss from the sale of capital assats (Explain in Part IV) 11. Total support. Add lines 7 through 10 25. Gross receipts from related activities, etc. (see instructions) 15. First five years. If the Form 980 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation or Public Support Percentage 16. 33 1/3% support test - 2010, if the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 15. 10% -facts-and-circumstances test - 200. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization organization me	2	Tax revenues levied for the organ-						
3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 \$361104. 7931844. 7131786. 5884405. 7391399. 36700538. The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Setzet beginning in) (a) 2006 (b) 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total support. Setzet beginning in) (a) 2006 (b) 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total 36361104. 7931844. 7131786. 5884405. 7391399. 36700538. Setzion B. Total Support or first organization from line 4 (b) 2008 (d) 2009 (e) 2010 (f) Total 36361104. 7931844. 7131786. 5884405. 7391399. 36700538. Setzion B. Total Support organization from line 4 (b) 2008 (d) 2009 (e) 2010 (f) Total 36361104. 7931844. 7131786. 5884405. 7391399. 36700538. Setzion B. Total Support from line 4 (b) 2008 (d) 2009 (e) 2010 (f) Total 2008 (d) 2009 (e) 2010 (f) Total 2009 (e) 2010 (f) Total 2009 (e) 2010 (f) Total 2009 (e) 2010 (f) Total 2009 (e) 2010 (f) Total 2009 (e) 2010 (f) Total 2009 (e) 2010 (f) Total 2009 (f		_						j
furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceede 256 of the amount shown on line 11, column (f) 6 Public support Seators time 5 from line 4 8 Gross income from increst, dividends, payments received on securities loans, rents, royalties and increase dividends, payments received on securities loans, rents, royalties and increase from increase dividends, payments received on securities loans, rents, royalties and increase from increase dividends, payments received on securities loans, rents, royalties and increase from increase dividends, payments received on securities loans, rents, royalties and income from increase sucrees have the organization of loss from the sale of capital assess (Explain in Part IV) 11 Total support. Add lines 7 through 10 12 Gross receipts from related business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assess (Explain in Part IV) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years, if the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. The organization qualifies as a publicly supported organization 14 Public support percentage from 2009 Schedule A. Part II, line 14 15 Public support percentage from 2009 Schedule A. Part II, line 14 16 39.68 173 173% support test - 2010, if the organization did not check a box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 15 10% -facts-and-circumstances test - 2000. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-ci		or expended on its behalf						
furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceede 256 of the amount shown on line 11, column (f) 6 Public support Seators time 5 from line 4 8 Gross income from increst, dividends, payments received on securities loans, rents, royalties and increase dividends, payments received on securities loans, rents, royalties and increase from increase dividends, payments received on securities loans, rents, royalties and increase from increase dividends, payments received on securities loans, rents, royalties and increase from increase dividends, payments received on securities loans, rents, royalties and income from increase sucrees have the organization of loss from the sale of capital assess (Explain in Part IV) 11 Total support. Add lines 7 through 10 12 Gross receipts from related business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assess (Explain in Part IV) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years, if the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. The organization qualifies as a publicly supported organization 14 Public support percentage from 2009 Schedule A. Part II, line 14 15 Public support percentage from 2009 Schedule A. Part II, line 14 16 39.68 173 173% support test - 2010, if the organization did not check a box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 15 10% -facts-and-circumstances test - 2000. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-ci	3	The value of services or facilities						
the organization without charge 4 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6. Public support. Subteat lines 1 the 11, column (f) 7. Amounts from line 4 6. Public support (fiscal year beginning in) 8. Public support (fiscal year beginning in) 8. Representation of the first state of the								
4 Total Add lines 1 through 3 5 The potion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 trentings 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from unrelated business activities, whether or not the business is regularly carried on 10 Other income from unrelated business activities, whether or not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support daffines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization of Public Support Percentage Section C. Computation of Public Support Percentage 14 Public support percentage from 2009 Schedule A. Part II, line 14 16 Public support percentage from 2009 Schedule A. Part II, line 14 16 Public support percentage from 2009 Schedule A. Part II, line 14 17 Signal support support percentage from 2009 Schedule A. Part II, line 14 18 Public support percentage from 2009 Schedule A. Part II, line 14 19 First five years. If the Form 990 is for the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2000. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how th		• •				İ		
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 3 from lete 4 8 Gross income from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from smillar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10. Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years, if the Form 980 is for the organization's first, second, third, fourth, or fifth tax year as a section 501c(x)3 organization, chack this box and stop here. Section C. Computation of Public Support Percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 14 88.63 % 15 Public support percentage for 2010 (line 6, column (f) divided by line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization when the racts and circumstances' test, check this box and stop here. The organization qualifies as a publicly supported organization lines the "facts and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the "facts and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and-circumstances" test, check this box and stop here. Explain in Part IV how the organization means the "facts an	4		8361104.	7931844.	7131786.	5884405.	7391399.	36700538.
by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2006 (b) 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total Support Governmental unit or publicly supported organization or loss from tine 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 1171797. 1158857. 764,846. 401,879. 1208966. 4706345. 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10. Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 22 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage 14 Public support percentage from 2009 Schedule A, Part II, line 14 15 Public support percentage from 2009 Schedule A, Part II, line 14 15 B 33 1/3% support test 2-009. If the organization did not check a box on line 13, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization and into here. The organization qualifies as a publicly supported organization meets the "facts and-circumstances" test. The organization qualifies as a publicly supported organization meets the "facts and-circumstances" test, check this box and stop here. Explain in Part IV how the organization more, and if the organization meets the "facts and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and-circumstances" test, the ck this box and stop here. Explain in Part IV how the organization m	5	-						
governmental unt or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support Subtract line 5 from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalities and income from similar sources 9 Net income from uniterated business activities, whether or not the business is regularly carried on Of Other income Do not include gian or loss from the sale of capital assets (Explain in Part IV) in 1 Total support. Add lines 7 librough 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years, if the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage 14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 16 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% - facts-and-circumstances' test. The organization qualifies as a publicly supported organization 18 in the organization meets the "facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization measts the "facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organizat	•	-						
supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subsectine 5 tom line 4 8 Public support. Subsectine 5 tom line 4 8 A Gross income from line 8 6 Gross income from line 9 7 Amounts from line 9 8 A Gross income from line 9 8 A Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of card activities, etc. (see instructions) 11 Total support. 3dd lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 12 If If the years. If the Form 990 is for the organization is first, second, third, fourth, or fifth tax year as a section 501(c)(3) 7 Expection C. Computation of Public Support Percentage 14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 16 33 1/3% support test - 2010, If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization and if the organization qualifies as a publicly supported organization meets the "facts and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and-circumstances" test. The organization qualifies as a publicly supported organization in Part IV how the organization meets the "facts and-circumstances" test. The organization qualifies as a publicly supported organization in Part IV how the organization meets the "facts and-circumstances" test. The organization qualifies as a publicly supported organization in Part IV how the organization meets the "facts and-circumstances" test. The organization qualifies as a publicly supported organization in Part IV								
on line 1 that exceeds 2% of the amount shown on line 11, column (f) 8 Public support. Subtract line 5 from line 3 8 Cross in C								
amount shown on line 11, column (f) 6 Public support. Subtact line 5 hom line 4 Section B. Total Support Calendar year (or fiscal year beginning in) 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, entits, royalities and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital asserts (Explain in Part IV.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization of the organization of the business and stop here. The organization qualifies as a publicly supported organization 13 1/3% support test - 2009. If the organization did not check the box on line 13 or 16a, and line 14 is 10% or more, and if the organization meets the "facts and-circumstances" test. The organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts and-circumstances" test. The organization did not check be box and stop here. Explain in Part IV how the organization meets the "facts and-circumstances" test. The organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts and-circumstances" test. The organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 0% or more, and if the organization meets the "facts and-circumstances" test. The organization did not check be box and stop here. Explain in Part IV how the organization meets the "facts and-circumstances" test. The organization dualifies as a publicly supported organization 15 10% -facts-and-circumstances test the "facts-and-circumstances" test. The organization dualifies as a publicly supported organization 15 10% -facts-and-circumstances test the "facts-and-circumstances" test. The organization dualifies as a publicly s								ļ
column (f) 6 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage 14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 16 33 1/3% support test - 2010. If the organization did not check the box on line 13 and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test. The organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test. The organization did not check abox on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test. The organization did not check abox on so and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization did not check abox on so and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization dualifies as a publi								
Section B. Total Support Calendar year (or liscal year beginning in) Calendar year (or liscal year year) Calendar year (or liscal year year year year year year year year		·						
Section B. Total Support Callendar year (or fiscal year beginning in) (a) 2006 (b) 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total 8 361104 7931844 7131786 5884405 7391399 36700538. 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage 14 Public support percentage from 2009 Schedule A, Part II, line 14 15 Public support percentage from 2009 Schedule A, Part III, line 14 16 33 1/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 16 Public support percentage from 2009 Schedule A, Part III, line 14 17 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10% -facts-and-circumstances test - 2009. If the organi	6	,,						36700538
Calendar year (or fiscal year beginning in) (a) 2006 (b) 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total 8361104. 7931844. 7131786. 5884405. 7391399. 36700538. Ross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Not income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. Add lines 7 through 10 2 Gross receipts from related activities, etc. (see instructions) 12 Gross receipts from related activities, etc. (see instructions) 12 Interest for the organization, check this box and stop here. Computation of Public Support Percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 14 88.63 % 15 Public support percentage from 2009 Schedule A, Part II, line 14 15 89.68 % 16a 33 1/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization be organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization in meet it he "facts-and-circumstances" test. The organization qualifies as a publicly supported organization in more, and if the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization in meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization in meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization in meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization in meets the "facts-and-circumstances" test. The organization qualifies as a publicly	Sec	ction B Total Support				<u>. </u>		30700330.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage 14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 16 33 1/3% support test - 2010. If the organization did not check the box on line 13 and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, the organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10			(a) 2006	(b) 2007	(a) 2008	(4) 2009	(a) 2010	(f) Total
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources and income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 11 Total support. Add lines 7 through 10 2 Gross receipts from related activities, etc. (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage from 2009 Schedule A, Part II, line 14 15 89.68 % 16a 33 1/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2009. If the organization did not check a box on line 13, if a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2009. If the organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2010. If the organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2010. If the organization qualifies as a publicly supported organization b 10% -facts-and-circumstanc							7391399	36700538
dividends, payments received on securities loans, rents, royalties and income from similar sources and income from similar sources and income from similar sources and income from unrelated business activities, whether or not the business is regularly carried on 10. Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 11. Total support. Add lines 7 through 10. 12. Gross receipts from related activities, etc. (see instructions) 13. First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. 14. Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 15. Public support percentage for 2010 (line 6, column (f) divided by line 11, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 16. 33 1/3% support test - 200.If the organization did not check a box on line 13, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a. 10% -facts-and-circumstances test - 2010.If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization more, and if the organization meets the "facts-and-circumstances test - 200.If the organization qualifies as a publicly supported organization 10. 10% -facts-and-circumstances test - 200.If the organization qualifies as a publicly supported organization 11a. 10% -facts-and-circumstances test - 200.If the organization qualifies as a publicly supported organization 11b. 10% organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organi	•		0301104.	7731044.	7131700.	20044021	1331333.	307003301
secunties loans, rents, royalties and income from similar sources Net income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Cther income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. Add lines 7 through 10 Gross receipts from related activities, etc. (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 13 3 1/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 15 3 1/3% support test - 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization meets the "facts-and-circumstances" test. The organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10 the organization meets the	0	, , , , , , , , , , , , , , , , , , ,						
and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 11 Total support. Add lines 7 through 10 2 Gross receipts from related activities, etc. (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 15 Rection C. Computation of Public Support Percentage 14 Public support percentage from 2009 Schedule A, Part II, line 14 15 89 68 % 16 33 1/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17 a 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test. The organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, Check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 11 a 10% organization meets the "facts-and-circumstances" test		· · · · · · · · · · · · · · · · · · ·						
9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 11 Total support. Add lines 7 through 10 41.40 6883. 12 Gross receipts from related activities, etc. (see instructions) 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage 14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 14 88.63 % 15 Public support percentage from 2009 Schedule A. Part II, line 14 15 89.68 % 16a 33 1/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how t		· •	1171707	1150057	761 916	101 979	1208966	4706345
activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 11 Total support. Add lines 7 through 10 41.40 6883. 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2009 Schedule A, Part II, line 14 16 a 33 1/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17 a 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization more, and if the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10 10% -facts-and-circumstances test - 2009. If the organization qualifies as a publicly supported organization 11 10% -facts-and-circumstances test - 2009. If the organization qualifies as a publicly supported organization 12 10% -facts-and-circumstances the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 13 10% organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 14 15 16 18 16 18 16 16 16 16 16 16 16 16 16 16 16 16 16	^		11/1/9/	1130037.	704,040.	401,079.	1200300.	4700343.
business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 15 Crganization, check this box and stop here. Section C. Computation of Public Support Percentage 14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2009 Schedule A, Part II, line 14 16 a 33 1/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 16 b 33 1/3% support test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 17 b 10% -facts-and-circumstances test - 2009. If the organization qualifies as a publicly supported organization 18 b 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 19 c 10 c 10 c 10 c 10 c 10 c 10 c 10 c	9							
of loss from the sale of capital assets (Explain in Part IV.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2009 Schedule A, Part II, line 14 16 a 33 1/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 15 10% -facts-and-circumstances test - 2009. If the organization qualifies as a publicly supported organization 16 10% -facts-and-circumstances test -		•						İ
or loss from the sale of capital assets (Explain in Part IV.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2009 Schedule A, Part II, line 14 16 a 33 1/3% support test - 2010.If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2009.If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2010.If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 15a 10% -facts-and-circumstances test - 2009.If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 15a 10% -facts-and-circumstances test - 2009.If the organiza	40							
assets (Explain in Part IV.) 11 Total support. Add lines 7 through 10 41406883. 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2009 Schedule A, Part II, line 14 16 33 1/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2010. If the organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2010. If the organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2010. If the organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2010. If the organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2009. If the organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2009. If the organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2009. If the organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2009. If the organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2009. If the organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2009. If the organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2009. If the organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test	10	<u>-</u>						
11 Total support. Add lines 7 through 10 41406883. 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2009 Schedule A, Part II, line 14 16 33 1/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10		•						
12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2009 Schedule A, Part II, line 14 16 a 33 1/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10% -facts-and-circumstances test - 2009. If the organization qualifies as a publicly supported organization 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 1		` ` ' ' '			, •			11106003
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2009 Schedule A, Part II, line 14 16 33 1/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17 a 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organizati		• • • • • • • • • • • • • • • • • • • •						41400002.
Section C. Computation of Public Support Percentage 14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2009 Schedule A, Part II, line 14 16a 33 1/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18		•	•	•				
Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) Public support percentage from 2009 Schedule A, Part II, line 14 15 88.63 % 16a 33 1/3% support test - 2010.If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2009.If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2010.If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	13	· · · · · · · · · · · · · · · · · · ·	-	first, second, thir	d, fourth, or fifth ta	ix year as a section	n 501(c)(3)	
Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) Public support percentage from 2009 Schedule A, Part II, line 14 15 89.68 Media 33 1/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	500	organization, check this box and stop	here	rcontago				
15 Public support percentage from 2009 Schedule A, Part II, line 14 16a 33 1/3% support test - 2010.If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2009.If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2010.If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization In the context of the context					-1 (0)		44	00 63 0/
16a 33 1/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization D 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization D 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		,, ,		•	olumn (t))			
stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization D 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization D 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization D 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization meets the "facts-and-circumstances" test.				•		4 00 4 6004		
b 33 1/3% support test - 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization In the context of	16a	्रिक्						
and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Image: Part of the image: Part of the		- ·		_				=
17a 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.	b					line 15 is 33 1/3%	or more, check th	is dox
and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization D 10% -facts-and-circumstances test - 2009. If the organization qualifies as a publicly supported organization.		•	•			10.1010!		
meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	17a							
b 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.							t IV how the organ	nization
more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization								. ▶∟
organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization	b							
· ·								,
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions								▶⊨
Schodulo A (Form 990 or 990, F7) 2010	18	Private foundation. If the organization	n did not check a t	oox on line 13, 16a	a, 16b, 17a, or 17b			

Schedule A (Form 990 or 990-EZ) 2010 Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to

Section A. Public Support	now, please com	piete Fait II)				
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and		(4) ===-	1=7_			<u> </u>
membership fees received (Do not						
Include any "unusual grants ")				Ì		
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the						
organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
rzation's benefit and either paid to						
5 The value of services or facilities		 				
furnished by a governmental unit to						
the organization without charge		1		1		
5 Total. Add lines 1 through 5		\				
7a Amounts included on lines 1, 2, and						· · -
3 received from disqualified persons	,			1		
b Amounts included on lines 2 and 3 received		 			-	
from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						-
amount on line 13 for the year						
c Add lines 7a and 7b	 .	-			 	
Public support (Subtract line 7c from line 6) Pection B. Total Support			_	l		
lendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
Amounts from line 6	(a) 2000	(6) 2007	(6) 2000	(d) 2003_	(e) 2010	(i) iotai
Da Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						-
2 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
Total support (Add lines 9, 10c, 11, and 12)				L		
First five years. If the Form 990 is for the	the organization'	s first, second, thir	d, fourth, or fifth ta	ax year as a secti	on 501(c)(3) organız	ation,
check this box and stop here .		<u> </u>	<u> </u>	·		<u>▶</u> ∟
ection C. Computation of Public	c Support Pe	rcentage			· · · · · · · · · · · · · · · · · · ·	
Public support percentage for 2010 (lir	ne 8, column (f) d	livided by line 13, c	olumn (f))	••	15	
Public support percentage from 2009	Schedule A, Part	: III, line 15 <u>.</u>		· '	16	
ction D. Computation of Inves					. <u>. </u>	
Investment income percentage for 201	iO (line 10c, colu	mn (f) dıvıded by İir	e 13, column (f))		17	
Investment income percentage from 20	•				18	
9a 33 1/3% support tests - 2010. If the c			on line 14, and line	15 is more than	33 1/3%, and line 1	7 is not
more than 33 1/3%, check this box and						. ▶□
b 33 1/3% support tests - 2009. If the c						and
line 18 is not more than 33 1/3%, chec						▶ □
Deivete foundation If the expensation						

SCHEDULE D

(Form 990)

Supplemental Financial Statements
► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047 Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

	COMMUNITY FOUNDATI	ON OF NORTHEAST IOWA	42-6060414
Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or A	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	e 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	80	704
2	Aggregate contributions to (during year)	379,557.	6,602,475.
3	Aggregate grants from (during year)	238,938.	3,749,841.
4	Aggregate value at end of year	9,142,997.	45,777,048.
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised ful	nds
	are the organization's property, subject to the organization's	exclusive legal control?	X Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be used	only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose confe	
	impermissible private benefit?		X Yes No
Pa	rt II Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990, Part IV	, line 7
1	Purpose(s) of conservation easements held by the organizat	on (check all that apply)	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of an historica	illy important land area
	Protection of natural habitat	Preservation of a certified h	nistoric structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a c	onservation easement on the last
	day of the tax year		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str		2c
ď	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the orga	nization during the tax
	year ▶		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe	- · · · · · · · · · · · · · · · · · · ·	
_	violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(n)(4)(i	Yes No
_	and section 170(h)(4)(B)(ii)?		
9	in Part XIV, describe how the organization reports conservat		
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes the or	ganization's accounting for
Par	conservation easements. † III Organizations Maintaining Collections o	f Art Historical Treasures, or Other	Similar Assets
	Complete if the organization answered "Yes" to Form		
12	If the organization elected, as permitted under SFAS 116 (AS		and halance sheet works of art.
	historical treasures, or other similar assets held for public ext		
	the text of the footnote to its financial statements that descri		, , , , , , , , , , , , , , , , , , , ,
b	If the organization elected, as permitted under SFAS 116 (AS		balance sheet works of art, historical
-	treasures, or other similar assets held for public exhibition, e		
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$ 658,190.
	(ii) Assets included in Form 000, Bort V		► \$ 658,190. ► \$ 4,058,003.
2	If the organization received or held works of art, historical tre	 asures, or other similar assets for financial gain.	
-	the following amounts required to be reported under SFAS 1		· •
а	Revenues included in Form 990, Part VIII, line 1		> \$
	Assets included in Form 990. Part Y		> \$
-	Assets included in Form 550, Fall A	• • • • • • • • • • • • • • • • • • • •	

		TY FOUNDAT				42-6060414 Page						
Pa	rt III Organizations Maintaining (Collections of A	rt, Historical Tr	reasures, or Ot	her Simil	ar Assets (continued)						
3	Using the organization's acquisition, access	ion, and other record	ds, check any of the	following that are a	a significant	use of its collection items						
	(check all that apply)											
а	Public exhibition	c	I ☐ Loan or exc	change programs								
b	Scholarly research	e	Other									
С	Preservation for future generations											
4	Provide a description of the organization's c	offections and explai	n how they further t	the organization's e	xempt purpo	ose in Part XIV.						
5	During the year, did the organization solicit of											
	to be sold to raise funds rather than to be m					Yes X N						
Pa	rt IV Escrow and Custodial Arran				to Form 990), Part IV, line 9, or						
	reported an amount on Form 990, Pa		•			·						
1a	is the organization an agent, trustee, custod	lian or other intermed	diary for contribution	ns or other assets r	ot included							
	on Form 990, Part X?											
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing table	•								
	, ,		g			Amount						
С	Beginning balance				1c							
					1d							
е	Distributions during the year				1e							
f	Ending balance				1f							
2a												
	b If "Yes," explain the arrangement in Part XIV											
Pai			swered "Yes" to Fo	orm 990, Part IV, line	e 10.							
		(a) Current year	(b) Pпоr year	(c) Two years back		years back (e) Four years back						
1a	Beginning of year balance	37,573,080,	30,792,359,	35,033,150								
Ь	Contributions	3 128 106	2,326,843,	3,796,058								
c	Net investment earnings, gains, and losses	4 371 713,	6,138,545	-7,126,069								
d	Grants or scholarships	990 409.	1,036,871,	677,486								
	Other expenditures for facilities	330,103,			1							
_	and programs											
f		-1,033,897,	647,796,	233,294		`						
g	End of year balance	45,116,387	37,573,080,									
2	Provide the estimated percentage of the year				,	· · · · · · · · · · · · · · · · · · ·						
а	Board designated or quasi-endowment		%									
b	Permanent endowment	%	_^									
C		%		-								
	Are there endowment funds not in the posse	· -	ation that are held a	and administered fo	r the organiz	zation						
_	by:				ŭ	Yes No						
	(i) unrelated organizations					3a(i) X						
	(ii) related organizations		•		•	3a(ii) X						
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	n Schedule R?	•	•	3b						
4	Describe in Part XIV the intended uses of the											
Par												
	Description of investment	(a) Cost or o		t or other (c)	Accumulate	ed (d) Book value						
		basis (investr		1	depreciation	1						
1a	Land											
	Buildings											
c	Leasehold improvements	28	874.		18,6	55. 10,219						
d	Equipment		277.		11,4							
	Other		470.		38,1							
	. Add lines 1a through 1e (Column (d) must e			10(c).)		▶ 31,388						

► 31,388. Schedule D (Form 990) 2010

032053 12-20-10

	rt XI Reconciliation of Change in Net Assets from Form 990 to Audited Finan				<u>5000414</u> S	Page 4
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1				,365.
2		-				,854.
	Total expenses (Form 990, Part IX, column (A), line 25)	2				
3	Excess or (deficit) for the year Subtract line 2 from line 1	3				,511.
4	Net unrealized gains (losses) on investments	4			3,344	124.
5	Donated services and use of facilities	5				
6	Investment expenses ,	6				
7	Prior period adjustments	7				
8	Other (Describe in Part XIV.)	8				
9	Total adjustments (net) Add lines 4 through 8	9	-			724.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	au Dat			,235.
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue	nue p		\neg		000
1	Total revenue, gains, and other support per audited financial statements		<u> </u>	1	11,925	,089.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			-		
а	Net unrealized gains on investments 2a 3,32	4,7	24.	ľ		
b	Donated services and use of facilities 2b					
С	Recoveries of prior year grants					
d	Other (Describe in Part XIV)					
е	Add lines 2a through 2d		2	е		,724.
3	Subtract line 2e from line 1		<u> </u>	3	<u>8,600</u>	,365.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1					
а	Investment expenses not included on Form 990, Part VIII, line 7b					
b	Other (Describe in Part XIV.)					
C	Add lines 4a and 4b .		4	c		<u> </u>
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5		,365.
Pa	t XIII Reconciliation of Expenses per Audited Financial Statements With Expe	nses	per Re	<u>etur</u>		
1	Total expenses and losses per audited financial statements .		<u> </u>	<u>- </u>	4,074	<u>,854.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.		İ			
а	Donated services and use of facilities . 2a					
b	Prior year adjustments 2b					
c	Other losses 2c 2c					
d	Other (Describe in Part XIV)					
е	Add lines 2a through 2d	•	. 2	e		0.
3	Subtract line 2e from line 1		. Li	3	4,074	,854.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b					
b	Other (Describe in Part XIV.)					
C	Add lines 4a and 4b		4	c		0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	4,074	,854.
Pa	t XIV Supplemental Information					
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Pa	ırt IV, 1ır	nes 1b a	nd 2	b; Part V, line	e 4, Part
X, line	e 2, Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to pro	vide an	y additio	nal	information	
PAF	RT III, LINE 4: COLLECTIONS CONSIST OF WORKS OF ART	DON	ATED	TC), AND	
PUF	CHASED BY, THE FOUNDATION. THE FOUNDATION ACCEPTS	DON	OITA	<u>1S</u>	OF ART	ON
BEI	IALF OF THE CITY OF WATERLOO AND THEN LOANS THE ART	<u>TO]</u>	<u> LOCAI</u>	<u>. M</u>	<u>IUSEUMS</u>	FOR
<u>PU</u> E	BLIC EXHIBITION.					·
D 3 F	THE TAXE A MURITURE OF MURITURE ENDOUGHER TRACE TO REFER	uen	TTMTD I	2 С.Ц	nd t amer	
PAF	TT V, LINE 4: THE USE OF THE ENDOWMENT INCOME IS EIT	nek	UNKI	19.1	TRICTED	·
<u>OR</u>	TEMPORARILY RESTRICTED BASED UPON THE WISHES OF THE	DOI	NOR.	ľ	THE COR	PUS
Λ.Ε.	THE ENDOWMENT IS AVAILABLE FOR SPENDING BASED UPON	mue.	DOM	י פו	C TMME	יאיי
UP	THE ENTITOWMENT IS AVAILABLE FOR SPENDING BASED UPON	IDF	אווטער	л	O TIVIE	74 T *

Schedule D (Form 990) 2010

Schedule D (Form 990) 2010 COMMUNITY FOUNDATION OF NORTHEAST IOWA 42-6060414 Page 5 [Part XIV] Supplemental Information (continued)
PART X, LINE 2: MANAGEMENT ANNUALLY MAKES AN APPROPRIATE EVALUATION OF
ANY UNCERTAIN INCOME TAX POSITIONS BASED UPON CURRENT STATUTES IN
COMPLETING THESE FINANCIAL STATEMENTS AND THE NOTES TO THE FINANCIAL
STATEMENTS. AT DECEMBER 31, 2010, MANAGEMENT BELIEVES THAT THERE WERE NO
UNCERTAIN INCOME TAX POSITIONS FOR WHICH A MATERIAL CHANGE IN THE
UNRECOGNIZED EFFECT WOULD BE REASONABLY POSSIBLE WITHIN THE NEXT 12
MONTHS. THE OPEN YEARS FOR AUDIT OF THE FOUNDATION'S FORM 990 ARE
2007-2010.

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States 2010

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

Open to Public Inspection

Name of the organization	COMMUNITY	FOUNDATI	ON OF NORTH	EAST IOWA				Employer identification nur 42-60604	
Part I General Inform	nation on Grants a	nd Assistance							
Does the organization criteria used to award Describe in Part IV the Part II Grants and Otl	f the grants or assis e organization's pro	tance? cedures for monr	toring the use of grant	funds in the Unite	d States		sistance, and the selections of the selections of the selection of the sel	X Yes	No
							additional space is nee	-	
1 (a) Name and addres or governn	s of organization	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant	
SEE ATTACHED SCHEDULE	Ε			2,410,172.	0,			<u> </u>	
2 Enter total number of	f section 501(c)(3) a	nd government o	rganizations	.l	1	<u> </u>	·L	b 1	86.
3 Enter total number of			34						17.
LHA For Paperwork Red			tions for Form 990.					Schedule I (Form 990) (2010)

(L) 51N	(a) IBC	(d) Amount	(e) Amount of non-cash	(f) Method of valuation (book, FMV, appraisal,	(g) Description of non-cash	
(B) EIN	(c) IKC section	or cash grant	assistance	otner)	assistance	(h) Purpose of grant or assistance
42-6005304	170(c)(1)	\$8,419.31				Hannen Park Shoreline Protection
42-6021395	170(c)(1)	\$1,500.00				Summer Discovery camps - Benton County
42-6005238	170(c)(1)	\$10,000 00				Shadow Boxing (Youthful Offender Diversion Program)
42-0788230	170(c)(1)	\$184.00				General Charitable Support
42-0788230	170(c)(1)	\$8,921 00				General Charitable Support
42-6005345	170(c)(1)	\$2,500.00			Ü	Fremont Township Cemetery - Grave restoration for former Bremer County Home residents
42-6005345	170(c)(1)	\$3,500.00				Bremer County Fair Association Gate Security and Wildlife education project
42-6004204	170(c)(1)	\$750.00				Fire Department- High Visibility Safety Vests
42-6004204	170(c)(1)	\$2,000.00				Wilder Park Board- Expansion of Wilder Park playground equipment
42-6004204	170(c)(1)	\$4,000.00				Allison Little League- Concession Stand with Restrooms
42-6004204	170(c)(1)	\$2,000.00				New Computers with installation and workstation updates
42-6004208	170(c)(1)	\$5,000.00				Replace side line fence at City's ball diamond
42-6004237	170(c)(1)	\$800.00				Aplington Ambulance- Computer charting of ambulance runs
42-6004237	170(c)(1)	\$2,000.00				Historical Society- Start up costs, preservation of artifacts
42-6004237	L70(c)(1)	\$2,000.00			,	Park Shelter House
42-6004240	L70(c)(1)	\$10,000.00				Community Center roof repair
42-1180199	170(c)(1)	\$5,000 00				House Rehab Program
42-6004277	170(c)(1)	\$2,500.00				Water Treatment Plant back up generator
42-6004277	170(c)(1)	\$6,000.00				Blairstown EMS- Have a Heart project
42-1184885	170(c)(1)	\$5,000 00				Fire Department- Bunker gear
42-6004304	170(c)(1)	\$3,024 00				Heritage Town Center- kitchen appliances
42-6004304	170(c)(1)	\$7,000.00				City Park playground equipment
42-6004304	170(c)(1)	\$260 00				Summer Reading Program Materials
	12-6005238 12-6005238 12-0788230 12-0788230 12-6005345 12-6005345 12-6004204 12-6004204 12-6004204 12-6004204 12-6004237 12-6004237 12-6004237 12-6004237 12-6004237 12-6004237 12-6004237 12-6004237 12-6004237 12-6004237 12-6004237	12-6005304 170(c)(1) 12-6005238 170(c)(1) 12-6005238 170(c)(1) 12-0788230 170(c)(1) 12-0788230 170(c)(1) 12-6005345 170(c)(1) 12-6005345 170(c)(1) 12-6004204 170(c)(1) 12-6004204 170(c)(1) 12-6004204 170(c)(1) 12-6004204 170(c)(1) 12-6004204 170(c)(1) 12-6004204 170(c)(1) 12-6004204 170(c)(1) 12-6004207 170(c)(1) 12-6004237 170(c)(1) 12-6004237 170(c)(1) 12-6004237 170(c)(1) 12-6004237 170(c)(1) 12-6004237 170(c)(1) 12-6004237 170(c)(1) 12-6004240 170(c)(1) 12-6004277 170(c)(1) 12-6004277 170(c)(1) 12-6004277 170(c)(1) 12-6004204 170(c)(1) 12-6004304 170(c)(1) 12-6004304 170(c)(1)	(b) EIN (c) IRC section of cash grant 12-6005304 170(c)(1) \$8,419.31 12-6021395 170(c)(1) \$1,500.00 12-6005238 170(c)(1) \$10,000 00 12-6005238 170(c)(1) \$184.00 12-0788230 170(c)(1) \$8,921 00 12-6005345 170(c)(1) \$2,500.00 12-6005345 170(c)(1) \$750.00 12-6004204 170(c)(1) \$2,000.00 12-6004204 170(c)(1) \$4,000.00 12-6004204 170(c)(1) \$5,000.00 12-6004204 170(c)(1) \$5,000.00 12-6004203 170(c)(1) \$2,000.00 12-6004237 170(c)(1) \$2,000.00 12-6004237 170(c)(1) \$2,000.00 12-6004237 170(c)(1) \$5,000.00 12-6004240 170(c)(1) \$5,000.00 12-6004277 170(c)(1) \$5,000.00 12-6004277 170(c)(1) \$5,000.00 12-6004277 170(c)(1) \$5,000.00 <td< td=""><td>(b) EIN (c) IRC section of cash grant 22-6005304 170(c)(1) \$8,419.31 (2-6021395 170(c)(1) \$1,500.00 (2-6005238 170(c)(1) \$10,000 00 (2-0788230 170(c)(1) \$184.00 (2-0788230 170(c)(1) \$2,500.00 (2-6005345 170(c)(1) \$2,500.00 (2-6005345 170(c)(1) \$750.00 (2-6004204 170(c)(1) \$2,000.00 (2-6004204 170(c)(1) \$2,000.00 (2-6004204 170(c)(1) \$2,000.00 (2-6004204 170(c)(1) \$2,000.00 (2-6004204 170(c)(1) \$2,000.00 (2-6004204 170(c)(1) \$2,000.00 (2-6004204 170(c)(1) \$2,000.00 (2-6004204 170(c)(1) \$2,000.00 (2-6004204 170(c)(1) \$2,000.00 (2-6004207 170(c)(1) \$2,000.00 (2-6004207 170(c)(1) \$2,000.00 (2-6004237 170(c)(1) \$2,000.00 (2-6004237 170(c)(1) \$2,000.00 (2-6004237 170(c)(1) \$2,000.00 (2-6004237 170(c)(1) \$2,000.00 (2-6004240 170(c)(1) \$5,000.00 (2-6004240 170(c)(1) \$5,000.00 (2-6004240 170(c)(1) \$5,000.00 (2-6004277 170(c)(1) \$5,000.00 (2-6004277 170(c)(1) \$5,000.00 (2-6004277 170(c)(1) \$5,000.00 (2-6004277 170(c)(1) \$5,000.00 (2-6004277 170(c)(1) \$5,000.00 (2-6004277 170(c)(1) \$5,000.00 (2-6004204 170(c)(1) \$5,000</td><td>(b) EIN (c) IRC section of cash grant of non-cash assistance (d) Amount of non-cash assistance (d) Amount of non-cash assistance (d) Amount of non-cash assistance (d) Amount of non-cash assistance (d) Amount of non-cash assistance (d) Amount of non-cash assistance (d) Amount (d) Amount of non-cash assistance (d) Amount (d) Amount of non-cash assistance (d) Amount (d) Amou</td><td>(b) EIN (c) IRC section of cash grant of non-cash assistance of cash grant of non-cash assistance of cash grant of non-cash assistance of</td></td<>	(b) EIN (c) IRC section of cash grant 22-6005304 170(c)(1) \$8,419.31 (2-6021395 170(c)(1) \$1,500.00 (2-6005238 170(c)(1) \$10,000 00 (2-0788230 170(c)(1) \$184.00 (2-0788230 170(c)(1) \$2,500.00 (2-6005345 170(c)(1) \$2,500.00 (2-6005345 170(c)(1) \$750.00 (2-6004204 170(c)(1) \$2,000.00 (2-6004204 170(c)(1) \$2,000.00 (2-6004204 170(c)(1) \$2,000.00 (2-6004204 170(c)(1) \$2,000.00 (2-6004204 170(c)(1) \$2,000.00 (2-6004204 170(c)(1) \$2,000.00 (2-6004204 170(c)(1) \$2,000.00 (2-6004204 170(c)(1) \$2,000.00 (2-6004204 170(c)(1) \$2,000.00 (2-6004207 170(c)(1) \$2,000.00 (2-6004207 170(c)(1) \$2,000.00 (2-6004237 170(c)(1) \$2,000.00 (2-6004237 170(c)(1) \$2,000.00 (2-6004237 170(c)(1) \$2,000.00 (2-6004237 170(c)(1) \$2,000.00 (2-6004240 170(c)(1) \$5,000.00 (2-6004240 170(c)(1) \$5,000.00 (2-6004240 170(c)(1) \$5,000.00 (2-6004277 170(c)(1) \$5,000.00 (2-6004277 170(c)(1) \$5,000.00 (2-6004277 170(c)(1) \$5,000.00 (2-6004277 170(c)(1) \$5,000.00 (2-6004277 170(c)(1) \$5,000.00 (2-6004277 170(c)(1) \$5,000.00 (2-6004204 170(c)(1) \$5,000	(b) EIN (c) IRC section of cash grant of non-cash assistance (d) Amount of non-cash assistance (d) Amount of non-cash assistance (d) Amount of non-cash assistance (d) Amount of non-cash assistance (d) Amount of non-cash assistance (d) Amount of non-cash assistance (d) Amount (d) Amount of non-cash assistance (d) Amount (d) Amount of non-cash assistance (d) Amount (d) Amou	(b) EIN (c) IRC section of cash grant of non-cash assistance of cash grant of non-cash assistance of cash grant of non-cash assistance of

.

City of Burt, PO Box 197, 119 Walnut St, Burt, IA				
50522	42-6004313	170(c)(1)	\$1,900.00	Swimming pool improvements
City of Burt, PO Box 197, 119 Walnut St, Burt, IA				Jovenning poor improvements
50522	42-6004313	170(c)(1)	\$3,000.00	Community Center improvements
City of Burt- Public Library, PO Box 128, 119 Walnut				
St., Burt, IA 50522	42-6004313	170(c)(1)	\$1,000.00	Summer reading program
City of Charles City- Fire Department, 704 South				
Grand Ave , Charles City, IA 50616	42-6004360	L70(c)(1)	\$2,000 00	Life Vests for Water Rescue
City of Charles City- Foster Grandparent Program, 105	42-6004360	170(c)(1)	\$2,000 00	
Milwaukee Mall, Charles City, IA 50616		, , , ,		Foster Grandparent Tutors/Mentors
City of Charles City- Parks & Recreation Dept , 105	42 6224262	470/ 1/41	47.500.00	
Milwaukee Mall, Charles City, IA 50616	42-6004360	170(c)(1)	\$7,500.00	Riverfront Ravine Area Walkways
City of Chelsea, Box 125, 600 Station St., Chelsea, IA	42.5004255	470(-)(4)	¢5.157.00	
52215	42-6004366	170(c)(1)	\$5,167.00	Purchasing a computer and software for the City
City of Chester, Box 86, Chester, IA 52134	42-1171784	170(c)(1)	\$2,500 00	Chester/Lime Springs Community Club Furnace
City of Chester, Box 86, Chester, IA 52134	42-1171784	170(c)(1)	\$3,000.00	Chester Fire & Rescue- Radio Communication Equipment
City of Clarksville, 115 W. Superior St , Clarksville, IA	42-6004391	170(c)(1)	\$800 00	
50619	42-0004391	170(0)(1)	\$800 00	Clarksville Commercial Club- Holiday street decorations
City of Clarksville, 115 W. Superior St , Clarksville, IA	42-6004391	170(c)(1)	\$1,310.00	Clarksville Ambulance- Laptop computers, blood pressure cuffs, stethoscopes,
50619	42-0004331	170(0)(1)	\$1,310.00	training defibrillator
City of Clarksville, 115 W. Superior St , Clarksville, IA	42-6004391	1.70(c)(1)	\$2,800.00	
50619	42-0004331	1.70(c)(1)	\$2,000.00	Recreation Committee- Ball Diamond Complex - for the Scoreboard
City of Clarksville- Public Library, PO Box 39, 103 W.	42-6004391	170(c)(1)	\$2,000 00	
Greene St., Clarksville, IA 50619	42-0004331		\$2,000 00	K-6 Reading Counts Computer Center
City of Conrad - Park Board, PO Box 429, Conrad, IA	42-6004412	170(c)(1)	\$5,900.00	
50621	42 000 4412	170(0)(1)	\$5,500.00	Park Board- Chemical storage room at Aquatic Center
	42-6004485	170(c)(1)	\$100.00	Reimbursement to City of Decorah for Construction of Masonic Wall for the
City of Decorah, P O Box 138, Decorah, IA 52101			72000	TRT project
	42-6004485	170(c)(1)	\$5,000 00	
City of Decorah, P O Box 138, Decorah, IA 52101				Parks & Rec Department- Pulpit Rock road resurfacing
	42-6004485	170(c)(1)	\$8,473.60	Reimbursement to City of Decorah for Construction of Masonic Wall for the
City of Decorah, P O Box 138, Decorah, IA 52101	42.5224524		45.000.00	TRT project
City of Dumont, PO Box 303, Dumont, IA 50625	42-6004604	170(c)(1)	\$5,000.00	Fire Department- Purchase equipment
City of Dumont- Dumont Community Library, P O Box	42-6004604	170(c)(1)	\$2,000.00	Durch and a service many 8 and about about
159, 602 2nd St , Dumont, IA 50625				Purchase equipment & safety items Reimbursement for payment to Huff contracting - Library building
City of Dunkerton, PO Box 100, Dunkerton, IA 50626-	42-6004605	170(c)(1)	\$1,877.36	
0100 City of Dunkerton, PO Box 100, Dunkerton, IA 50626-				
0100	42-6004605	170(c)(1)	\$33,849.00	caulk/sealants, drywall, electrical
0100	<u>-</u> -			Laury Scalarits, Grywan, Ciectrical
City of Dunkerton, PO Box 100, Dunkerton, IA 50626-	42-6004605	170(c)(1)	\$36,416.85	Reimbursement to City for Library Building Construction Retaining wall, Finish
0100	42-0004003	170(0)(1)	750,410.05	carpentry, Caulk/sealants, Doors/frams, Plumbing, Electrical, Change orders
City of Dunkerton, PO Box 100, Dunkerton, IA 50626-				Reimbursement to City of Dunkerton for Library building contruction: asphalt,
0100	42-6004605	170(c)(1)	\$67,065.20	concrete, countertops, flooring, etc
City of Elberon, 106 Main Stc Elberon, IA 52225	42-6006434	170(c)(1)	\$4,000.00	New furnaces for the Elberon Community Building
City of Elberon- Elberon Public Library, 106 Main St,				
Elberon, IA 52225	42-6006434	170(c)(1)	\$1,200 00	Purchase 6 new computers for library
City of Elma, PO Box 497, Elma, IA 50628	42-6004637	170(c)(1)	\$100 00	Elma Memorial Hall Improvement Project (Mini-Grant)
City of Elma, PO Box 497, Elma, IA 50628	42-6004637	170(c)(1)	\$100.00	Elma Museum Board (Mini-Grant)
City of Elma, PO Box 497, Elma, IA 50628	42-6004637	170(c)(1)	\$400.00	Elma Museum Board- Sidewalk project
City of Elma, PO Box 497, Elma, IA 50628	42-6004637	170(c)(1)	\$900 00	Elma Memorial Hall Improvement Project
	1		· · · · · · · · · · · · · · · · · · ·	

æ

City of Elma, PO Box 497, Elma, IA 50628	42-6004637	170(c)(1)	\$1,000.00	Elma Museum Board- Sidewalk project
City of Elma, PO Box 497, Elma, IA 50628	42-6004637	170(c)(1)	\$3,000.00	Elma Memorial Hall Board- Expansion & Improvement plan
City of Elma- Elma Public Library, P O Box 287, Elma, IA 50628	42-6004637	170(c)(1)	\$100.00	Encyclopedias (Mini-Grant)
City of Elma- Elma Public Library, P O Box 287, Elma, IA 50628	42-6004637	170(c)(1)	\$175 00	Additional General Support for Organizations which have an Endowment with EACF (Elma Public Library Fund)
City of Floyd,PO Box 159, Floyd, IA 50435	42-6036479	170(c)(1)	\$3,000.00	Floor Scrubber/Polisher for Community Center gym
City of Floyd,PO Box 159, Floyd, IA 50435	42-6036479	170(c)(1)	\$20,000.00	Community Center Roof Coating & Insulation
City of Fort Atkinson, PO Box 36, Ft. Atkinson, IA 52144	42-1021689	170(c)(1)	\$3,000.00	Fire Department- Upgrades
City of Fort Atkinson, PO Box 36, Ft. Atkinson, IA	42-1021689	170(c)(1)	\$7,000.00	Friends of Fort Atkinson- Rendezvous Storage shed upgrade
City of Fort Atkinson, PO Box 36, Ft. Atkinson, IA 52144	42-1021689	170(c)(1)	\$10,000.00	Little League Concession Stand
City of Fort Atkinson - Library, PO Box 277, Ft. Atkinson, IA 52144	42-1021689	L70(c)(1)	\$2,000.00	Circulation Software
City of Gladbrook, PO Box 309, Gladbrook, IA 50635	42-6004706	170(c)(1)	\$1,000.00	Fire Department- Furnace replacement
City of Gladbrook,PO Box 309, Gladbrook, IA 50635	42-6004706	1.70(c)(1)	\$1,350.00	Tama County Livestock & Fair Association - Computers, printer/scanner and software
City of Gladbrook, PO Box 309, Gladbrook, IA 50635	42-6004706	170(c)(1)	\$3,000.00	Vision Gladbrook - Electronic digital message sign on Hwy 96
City of Gladbrook, PO Box 309, Gladbrook, IA 50635	42-6004706	170(c)(1)	\$3,200.00	Gladbrook Theater- Handicapped entrances, heating improvements and coat rack
City of Gladbrook, PO Box 309, Gladbrook, IA 50635	42-6004706	170(c)(1)	\$4,000.00	Crayon Corner Learning Center - Appliances for New Daycare and learning center
City of Grinnell, 927 4th Ave., Grinnell, IA 50112	42-6004734	170(c)(1)	\$1,079.11	Parks and Rec Dept - Disc Golf course at Miller Park- for Disc Baskets & Signage
City of Grinnell, 927 4th Ave., Grinnell, IA 50112	42-6004734	170(c)(1)	\$1,500.00	Grinnell Skate Park- For Signage
City of Grinnell, 927 4th Ave., Grinnell, IA 50112	42-6004734	170(c)(1)	\$2,500.00	Grınnell Mutual Famıly Aquatıc Center - Automated external defibrıllator
City of Grundy Center, 703 F Ave., Grundy Center, IA 50638	42-6004737	170(c)(1)	\$306 00	Grundy Center Theatre Association- Digital Cinema Initiative
City of Grundy Center, 703 F Ave., Grundy Center, IA 50638	42-6004737	170(c)(1)	\$1,000.00	Park Board- Park Restroom/shelter house renovations
City of Grundy Center, 703 F Ave , Grundy Center, IA 50638	42-6004737	170(c)(1)	\$2,000 00	Kiwanis Park- Prairie Grass Restoration
City of Grundy Center, 703 F Ave., Grundy Center, IA 50638	42-6004737	170(c)(1)	\$7,673.31	Grundy Center Theatre Association- Digital Cinema Initiative
City of Grundy Center- Chamber of Commerce, 705 F Ave., Grundy Center, IA 50638	42-6004737	170(c)(1)	\$825 00	Summer Bandstand Entertainment
City of Grundy Center- Chamber of Commerce, 705 F Ave., Grundy Center, IA 50638	42-6004737	170(c)(1)	\$3,500.00	Outdoor Electrical Improvements
City of Grundy Center- Kling Memorial Library, 708 7th St., Grundy Center, IA 50638	42-6004/3/	170(c)(1)	\$1,500.00	New computers & table
City of Gruver, 201 First Ave., Gruver, IA 51334	42-1178426	170(c)(1)	\$5,000.00	Playground equipment for City Park
City of Hampton- Public Library, 4 Federal Street S., Hampton, IA 50441	42-6004750	170(c)(1)	\$5,000 00	Carnegie front entrance repair and renewal
City of Hartwick,315 Vine St , Hartwick, IA 52232	42-0959201	170(c)(1)	\$6,000 00	Volunteer Fire Dept - for 6 sets of turnout gear

				
City of Jesup, 531 1/2 Prospect St., Jesup, IA 50648	42-6004822	170(c)(1)	\$10,000 00	Jesup Soccer Club - 7 5 Acre Soccer Complex and public green space
City of Lime Springs, PO Box 296, Lime Springs, IA 52155	42-6004885	170(c)(1)	\$1,000.00	Summer Beautification
City of Lime Springs, PO Box 296, Lime Springs, IA 52155	42-6004885	170(c)(1)	\$1,785.00	Community Center- Safety stairs & railing
City of Lime Springs, PO Box 296, Lime Springs, IA	42-6004885	170(c)(1)	\$3,000 00	Swimming Pool grates
City of Marshalltown- Parks & Recreation, 24 North Center St., Marshalltown, IA 50158	42-6004934	170(c)(1)	\$1,500.00	Parks & Recreation- Dog Park
City of Marshalltown- Parks & Recreation, 24 North Center St , Marshalltown, IA 50158	42-6004934	170(c)(1)	\$5,000.00	Parks & Recreation - Skate Park
City of Marshalltown- Public Library, 105 W. Boone St., Marshalltown, IA 50158	42-6004934	170(c)(1)	\$422 00	"Kill A Watt" Electricity Monitor Kits
City of Mason City, 10 First St. N, Mason City, IA 50401	42-6004948	170(c)(1)	\$2,000 00	Mason City Parks Dept - replacement of playground equipment in the Georgia Hanford Park
City of Mason City- Police Department, 78 S Georgia, Mason City, IA 50401	42-6004948	170(c)(1)	\$2,700 00	Police Dept- Emergency rapid response vehicle equipment- Night Vision Binoculars
City of Mason City-Fire Department, 10 1st Street NW, Mason City, IA 50401	42-6004948	170(c)(1)	\$10,000.00	Fire Dept- Rescue boat for Mason City Fire Dept.
City of Meservey, PO Box 246, Meservey, IA 50457- 0246	42-6024587	170(c)(1)	\$7,000.00	Automated standby backup generator for sewer lagoon, lift station and installation
City of Meservey- Meservey Fire Department, P O Box 152, Meservey, IA 50457	42-6024587	170(c)(1)	\$950.00	Fire & Rescue- Replace 1974 truck-mounted generator with new portable generator
City of New Hampton, 112 E. Spring St., New Hampton, IA 50659	42-6005030	170(c)(1)	\$3,200 00	Fire Department- Purchase 2 sets of personal protective equipment (firefighter pants and coat)
City of New Hampton, 112 E. Spring St., New Hampton, IA 50659	42-6005030	170(c)(1)	\$3,624.40	Parks & Recreation Department- Playground 2010
City of New Hartford, PO Box 212, 503 Packwaukee, New Hartford, IA 50660	42-6005033	170(c)(1)	\$1,500 00	New Hartford Fire & EMS- Laptop, projector & speakers for training
City of New Hartford, PO Box 212, 503 Packwaukee, New Hartford, IA 50660	42-6005033	170(c)(1)	\$2,500.00	Park Improvements
City of New Hartford, PO Box 212, 503 Packwaukee, New Hartford, IA 50660	42-6005033	170(c)(1)	\$4,000 00	Park Improvement Committee- new basketball court, playground equipment, shelter house/concession stand/restroom
City of New Hartford- Martin Memorial Library, PO Box 292, 405 Packwaukee, New Hartford, IA 50660	42-6005033	170(c)(1)	\$2,000 00	Media Room
City of New Hartford- Martin Memorial Library, PO Box 292, 405 Packwaukee, New Hartford, IA 50660	42-6005033	170(c)(1)	\$2,500.00	Media Room
City of Ossian, P O Box 295, Ossian, IA 52161	42-6005091	170(c)(1)	\$7,500.00	Little League Ball Diamond Improvements
City of Ossian, P O Box 295, Ossian, IA 52161	42-6005091	170(c)(1)	\$10,000.00	Tri-Township Ossian Fire Dept- Turnout Gear
City of Parkersburg, PO Box 489, Parkersburg, IA 50665	42-6005112	170(c)(1)	\$1,000.00	Parkersburg Ambulance- Rescue & Training Equipment
City of Parkersburg, PO Box 489, Parkersburg, IA 50665	42-6005112	170(c)(1)	\$2,000.00	Professional Health Care Civic Center- Siding for medical building & food pantry
City of Parkersburg- Kothe Memorial Lirary, P O Box 160, Parkersburg, IA 50665	42-6005112	170(c)(1)	\$2,000 00	Purchase computer and tables
City of Plainfield, P O Box 222, Plainfield, IA 50666	42-6038458	170(c)(1)	\$2,502.00	First Responders- Six new hand portable radios
City of Plainfield, P O Box 222, Plainfield, IA 50666	42-6038458	170(c)(1)	\$5,000.00	Fire Dept- Thermal imaging camera for firefighter safety and damage control.

City of Plainfield-Plainfield Public Library, PO Box 327,				
723 Main St., Plainfield, IA 50666	42-6038458	170(c)(1)	\$3,385.00	Install Besam Automatic PowerSwing Door
City of Ringsted, 112 W. Maple Street, P O Box 278, Ringsted, IA 50578	42-6005153	170(c)(1)	\$10,000.00	Re-roofing Community Center (American Legion Building)
iningsted, iA 30370				the rooming continuity center (interneur explorit samoning)
City of Rockwell- Rockwell Community Fire Service, Box 626, Rockwell, IA 50469	42-6005163	170(c)(1)	\$5,521.96	Rockwell Community Fire Service- Renovaton and upgrades, including installing insulation and steel covering to the interior walls of Fire Station
City of Rockwell- Rockwell Public Library, 307 Main St.	40.5005450	170/ 1/41	£200.00	
E., PO Box 419, Rockwell, IA 50469	42-6005163	170(c)(1)	\$300.00	Summer Reading program
City of Searsboro, PO Box 674, Searsboro, IA 50242	90-0299553	170(c)(1)	\$5,000 00	Fire & EMS Department- Early warning siren replacement
City of Sheffield,110 S. 3rd St , Sheffield, IA 50475	42-6005192	L70(c)(1)	\$5,000 00	Bicycle, hiking and snowmobile trail
City of Sheffield- Public Library, 123 S. 3rd St., Box 616, Sheffield, IA 50475	42-6005192	L70(c)(1)	\$3,000.00	Computer and technology upgrades
City of Shell Rock, 303 S Cherry Street, Shell Rock, IA 50670	42-6005197	170(c)(1)	\$1,000.00	Fire Department- Portable Fire Pump & Accessories
City of Shell Rock, 303 S Cherry Street, Shell Rock, IA 50670	42-6005197	170(c)(1)	\$2,500 00	Boyd Commumnity Building- Commercial Refrigerator
City of Shell Rock, 303 S. Cherry Street, Shell Rock, IA 50670	42-6005197	L70(c)(1)	\$3,500.00	Youth Sports Association
City of Shell Rock- Benny Gambaiani Public Library, 104 S. Cherry St., Shell Rock, IA 50670	42-6005197	170(c)(1)	\$2,000.00	Computer server, patron door counter
City of Spillville, PO Box 276, Spillville, IA 52168	42-0869418	L70(c)(1)	\$6,000 00	South Winn Area Community Group- Pyrotechnic firing & safety equipment for 4th of July
City of St. Lucas, PO Box 244, St. Lucas, IA 52166	42-1078037	L70(c)(1)	\$6,750 00	St Lucas Community Action Club - restroom and concession stand for St. Lucas Ballpark
City of St Lucas, PO Box 244, St Lucas, IA 52166	42-1078037	.170(c)(1)	\$10,000 00	Fire Department- purchase of a used late model pumper truck
City of Swaledale, PO Box 7, Swaledale, IA 50477	42-1188440	170(c)(1)	\$6,500 00	Town Hall renovation- Furnace
City of Swaledale Fire Department, PO Box 81, Swaledale, IA 50477	42-1188440	L70(c)(1)	\$3,341.41	Fire department energy efficiency and apparatus filling improvements
City of Swaledale- Swaledale Public Library	42-1188440	L70(c)(1)	\$700 00	Chairs for meeting table
City of Thompson, 167 2nd Ave West, Thompson, IA 50478	42-6005276	170(c)(1)	\$5,754.00	Thompson Fire Department- Update equipment (hoses on second pumper truck)
City of Thompson- Public Library,142 N. Jackson St.,	42-6005276	170(c)(1)	\$2,500 00	
Thompson, IA 50478	42-0003270	170(0)(1)	\$2,500 00	Library Remodeling Project
City of Traer, 649 Second Street, Traer, IA 50675	42-6005289	L70(c)(1)	\$639.00	Traer Public Library/Kupka Cultural Center - Purchase of projector
City of Traer, 649 Second Street, Traer, IA 50675	42-6005289	L70(c)(1)	\$1,100 00	Traer Ambulance Service- Improved portable radios to meet new Federal requirements
City of Traer, 649 Second Street, Traer, IA 50675	42-6005289	170(c)(1)	\$3,000.00	Traer Chamber of Commerce - Traer Entrance sign project
City of Traer, 649 Second Street, Traer, IA 50675	42-6005289	170(c)(1)	\$4,500 00	Traer Salt and Pepper Shaker Gallery - establishing "Video Corner" and adding additional shelving and displays
City of Tripoli, 303 S Main, Tripoli, IA 50676	42-6005291	170(c)(1)	\$3,500.00	Police Dept- Squad car laptop
City of Victor, 707 2nd St , Victor, IA 52347	42-6005297	170(c)(1)	\$5,600 00	Victor Community Park
City of Wallingford, PO Box 365, Wallingford, IA 51365	42-6038393		\$7,385.00	Community Center renovations
City of Wallingford- Fire Department, P O Box 307, Wallingford, IA 51365	42-6038393	170(c)(1)	\$3,480.00	Wallingford Fire Department- Pagers

				<u> </u>
City of Waterloo, 715 Mulberry Street, Waterloo, IA 50703	42-6005327	170(c)(1)	\$7,765 00	For overtime paid to Waterloo Police on 7-29-10 for RAGBRAI
City of Whittemore, 315 Fourth St , Whittemore, IA 50598	42-6005372	170(c)(1)	\$1,531.31	Community Center- Folding Chairs
City of Whittemore, 315 Fourth St., Whittemore, IA 50598	42-6005372	170(c)(1)	\$3,500 00	Fire & EMS- Handicap Restrooms for Station
City of Whittemore, 315 Fourth St., Whittemore, IA 50598	42-6005372	170(c)(1)	\$4,000 00	Seely-Walsh American Legion Post 425- Building addition
Decorah Public Library, 202 Winnebago Street, Decorah, IA 52101	42-6004485	170(c)(1)	\$299.00	Purchase of Books
Decorah Public Library, 202 Winnebago Street, Decorah, IA 52101	42-6004485	170(c)(1)	\$2,000 00	Photocopy machine
Decorah Public Library, 202 Winnebago Street, Decorah, IA 52101	42-6004485	1.70(c)(1)	\$600.00	RSVP Program for Howard County
Decorah Public Library, 202 Winnebago Street, Decorah, IA 52101	42-6004485	170(c)(1)	\$2,705 00	RSVP Volunteer Support
Dike-New Hartford Community Schools, 330 Main St., Dike, IA 50624	42-1450047	170(c)(1)	\$1,000 00	Light the Night- Baseball/Softball Lighting project
Dike-New Hartford Community Schools, 330 Main St., Dike, IA 50624	42-1450047	170(c)(1)	\$1,000.00	Control Booth monitor speaker system
Dike-New Hartford Community Schools, 330 Main St., Dike, IA 50624	42-1450047	170(c)(1)	\$2,000.00	Dike New Hartford Baseball/Softball lighting
Dike-New Hartford Community Schools, 330 Main St., Dike, IA 50624	42-1450047	170(c)(1)	\$2,000.00	Dike New Hartford High School - Control Booth Monitor System
Dike-New Hartford Community Schools, 330 Main St., Dike, IA 50624	42-1450047	170(c)(1)	\$3,700.00	DNH Baseball/Softball Lighting project "Light the Night"
Emmet County Conservation Board, 2303 - 450th Avenue, Wallingford, IA 51365	42-6004648	170(c)(1)	\$8,134.81	Restoration of Peterson Point Historic Farmstead
Emmet County Extension, 26 S. 17th St., Estherville, IA 51334	42-6021421	170(c)(1)	\$3,761 00	Summer Day Camps
Emmet County Extension, 26 S. 17th St., Estherville, IA 51334	42-6021421	170(c)(1)	\$5,195 00	Estherville Meteors 4H Club- NXT Robots
Emmet County Extension, 26 S. 17th St., Estherville, IA 51334	42-6021421	170(c)(1)	\$8,000.00	PROSPER Team- Strenthening Families
Estherville-Lincoln Central Elementary, P O Box 477, Estherville, IA 51334-0118	39-1886795	170(c)(1)	\$3,300.00	Parent Action Team- Playground Equipment
Estherville-Lincoln Central Elementary, P O Box 477, Estherville, IA 51334-0118	39-1886795	170(c)(1)	\$8,960.00	Tutoring
Estherville-Lincoln Central School District-Regional Wellness Ctr, 315 North 6th St., Estherville, IA 51334-0118	39-1886795	170(c)(1)	\$2,500 00	Senior Fitness Program
Fayette County Board of Supervisors, PO Box 267, West Union, IA 52175	42-6005367	170(C)(1)	\$22,500 00	Oran Community Fire Department - New Fire Truck pumper
Gladbrook-Reinbeck Community School,300 Cedar, Reinbeck, IA 50669	42-1469071	170(C)(1)	\$710.00	Elementary School- ELMO Projector for 2nd Grade
Gladbrook-Reinbeck Community School,300 Cedar, Reinbeck, IA 50669	42-1469071	170(C)(1)	\$710 00	Elementary School- ELMO Projector for 1st Grade
Gladbrook-Reinbeck Community School,300 Cedar, Reinbeck, IA 50669	42-1469071	170(C)(1)	\$1,295.00	High School- Clickers in the Classroom
Gladbrook-Reinbeck Community School,300 Cedar, Reinbeck, IA 50669	42-1469071	170(C)(1)	\$1,317.00	High School- Mimeo Whiteboard & Pad

Gladbrook-Reinbeck Community School,300 Cedar, Reinbeck, IA 50669	42-1469071	170(C)(1)	\$1,549.00	Elementary School- Guided Reading Materials
Gladbrook-Reinbeck Community School,300 Cedar, Reinbeck, IA 50669	42-1469071	170(C)(1)	\$2,000 00	Promotional Video highlighting Education at GR
Grundy Center Community Schools, 1301 12th St, Grundy Center, IA 50638	42-6001931	170(C)(1)	\$239 00	How Full is Your Bucket Project
Grundy Center Community Schools, 1301 12th St, Grundy Center, IA 50638	42-6001931	170(C)(1)	\$2,400 00	Middle School- Graphics Tablet Math Portfolio
Grundy Center Community Schools, 1301 12th St, Grundy Center, IA 50638	42-6001931	170(C)(1)	\$4,500.00	Elementary- Rubber Mulch Surface for Playground
Grundy County Board of Supervisors, 706 G Ave., Grundy Center, IA 50638	42-6004738	170(C)(1)	\$1,000.00	Cemetery Information Project
Grundy County Board of Supervisors, 706 G Ave., Grundy Center, IA 50638	42-6004738	170(C)(1)	\$5,000 00	Agricultural Society- Completion of Judging/exhibition building
Hawkeye Community College, PO Box 8015, Waterloo, IA 50704	42-0925362	170(C)(1)	\$2,500 00	Metro Center- Family Literacy Program
Hawkeye Community College, PO Box 8015, Waterloo, IA 50704	42-0925362	170(C)(1)	\$4,000.00	Hawkeye Celebrates the Arts! Artist Series
Hawkeye Community College, PO Box 8015, Waterloo, IA 50704	42-0925362	170(C)(1)	\$8,000.00	Metro Center- Family Literacy Program
Hawkeye Community College - Martin Luther King Center, 515 Beech St., Waterloo, IA 50703	42-0925362	170(C)(1)	\$358.25	General Charitable Support
Howard County Conservation Board, 11562 Valley Ave, PO Box 157 Cresco, IA 52136	42-6004442	170(C)(1)	\$2,545 00	Skı Equipment for public use
Howard County Conservation Board, 11562 Valley Ave, PO Box 157 Cresco, IA 52136	42-6004442	170(C)(1)	\$2,550.00	Information Kiosk
lowa County Board of Supervisors, PO Box 126, Marengo, IA 52301	42-6004930	170(C)(1)	\$8,000 00	Amana Colonies Convention and Visitors Bureau - Comprehensive Marketnig incl web redesign, signage and TV
lowa County Conservation Board, 2550 G Avenue, Ladora, IA 52251	42-6004930	170(C)(1)	\$3,256.25	Lake lowa Bird Blind - provide sanctuaries and feeding stations for the bird or ground at Lake lowa Park
lowa State University, 0210 Beardshear Hall, Ames, IA 50011-2028	42-6004224	170(C)(1)	\$250 00	2010 Union Community Scholarship (LaPorte City Chamber of Commerce Award) for Becky Connolly SS#
lowa State University, 0210 Beardshear Hall, Ames, IA 50011-2028	42-6004224	170(C)(1)	\$250.00	2010 Union Community Scholarship (Union Booster Club Award) for Stephanie Freeland SS#:
Iowa State University, 0210 Beardshear Hall, Ames, IA 50011-2028	42-6004224	170(C)(1)	\$250.00	2010 Union Community Scholarship (Union Education Association Award) for Kristin Kavalier SS#
Iowa State University, 0210 Beardshear Hall, Ames, IA 50011-2028	42-6004224	170(C)(1)	\$350.00	"Jim" Zehr Memorial Scholarship for Kelsey Pi
Iowa State University, 0210 Beardshear Hall, Ames, IA 50011-2028	42-6004224	170(C)(1)	\$350.00	Clauer Ketter Memorial Scholarship for Kelsey
Iowa State University, 0210 Beardshear Hall, Ames, IA 50011-2028	42-6004224	170(C)(1)	\$400.00	Community Scholarship (Dysart General Wom Wauters SS#
lowa State University, 0210 Beardshear Hall, Ames, IA 50011-2028	42-6004224	170(C)(1)	\$500 00	e Phillips Delta Legacy Scholarship for Davonik
lowa State University, 0210 Beardshear Hall, Ames, IA 50011-2028	42-6004224	170(C)(1)	\$500.00	er Moon Service Scholarship for Christopher W
lowa State University, 0210 Beardshear Hall, Ames, IA 50011-2028	42-6004224	170(C)(1)	\$500 00	er Moon Service Scholarship for Lucy O'Connor
Iowa State University, 0210 Beardshear Hall, Ames, IA 50011-2028	42-6004224	170(C)(1)	\$500.00	er Moon Service Scholarship for Allison Duchm

Iowa State University, 0210 Beardshear Hall, Ames, IA

50011-2028

42-6004224

170(C)(1)

\$750.00

ıs Club of Algona Scholarship for JoHanna Degi

		T	
42-6004224	170(C)(1)	\$750 00	2010 Kiwanis Club of Algona Scholarship for Collin Fett SS# ;
42-6004224	170(C)(1)	\$800 00	2010 Jessie H. Fowler Memorial Scholarship for Abigail Foote SS#
42-6004224	170(C)(1)	\$1,000.00	Danielson SS#
42-6004224	170(C)(1)	\$1,000 00	2010 Charles W Shirey Scholarship for Jordan Boyenga SS#
42-6004224	170(C)(1)	\$1,000 00	2010 James W & Jvone E. Maxwell Memorial Scholarship for Linden Terpstra SS#
42-6004224	170(C)(1)	\$1,000.00	2010 M Elizabeth Naebers Scholarship for Ryan Thurman SS#
42-6004224	170(C)(1)	\$1,000.00	2010 James W & Jvone E. Maxwell Memorial Scholarship for Kelsey Mumm SS#
42-6004224	170(C)(1)	\$1,000 00	2010 Community Foundation Opportunity Scholarship for Julia Anderson SS#
42-6004224	170(C)(1)	\$1,000 00	2010 Grant Wheeler Memorial Scholarship for Joseph Sevcik SS#
42-6004224	170(C)(1)	\$1,000 00	2010 Charles W Shirey Scholarship for Bret Renz S
42-6004224	170(C)(1)	\$1,000.00	2010 James W. & Jvone E Maxwell Memorial Scho Knutson SS#478-21-3494
42-6004224	170(C)(1)	\$1,000 00	2010 Marjorie F Laubscher Scholarship for Ja'Mar
42-6004224	170(C)(1)	\$1,000.00	2010 Marjorie F Laubscher Scholarship for Gaige I
42-6004224	170(C)(1)	\$1,000 00	2010 Marjorie F Laubscher Scholarship for Jasmin
42-6004224	170(C)(1)	\$1,000 00	2010 Community Foundation Opportunity Scholar SS#
42-6004224	170(C)(1)	\$1,500.00	2010 Harold & Mercedes Cessford Memorial Scho
42-6004224	170(C)(1)	\$2,500 00	2010 Dennis & Holly Kruger Family Scholarship for 0182
42-6036800	170(C)(1)	\$8,000.00	Iowa Valley Elementary PTO - Iowa Valley Element
42-6024071	170(C)(1)	\$5,500.00	Lake Mills Task Force- Substance Abuse day camp
42-6004936	L70(C)(1)	\$5,000.00	American Discoveries Trail Connection
42-6002901	170(C)(1)	\$10,500.00	Creating digital classrooms for the digital world
42-6004976	170(C)(1)	\$8,000.00	Poweshiek County Firemans Assoc - Radio equipm public safety radios
42-6021469	170(C)(1)	\$500 00	Combined 4-H community service project - acoust
42-6021469	170(C)(1)	\$2,500.00	Entrepreneur for a Day (E4D) Program
42-6021469	170(C)(1)	\$3,000 00	Poweshiek County 4H - First Lego League Clubs- Fo
42-6021469	170(C)(1)	\$3,000.00	4-H Youth Program - laptops for record keeping, p workshops
	42-6004224 42-6004224 42-6004224 42-6004224 42-6004224 42-6004224 42-6004224 42-6004224 42-6004224 42-6004224 42-6004224 42-6004224 42-6004224 42-6004224 42-6004204 42-6004204 42-6004204 42-6004204 42-6004204 42-6004204 42-6004204 42-6004204 42-6004000000000000000000000000000000000	42-6004224 170(C)(1) 42-600424 170(C)(1)	42-6004224 170(C)(1) \$800 00 42-6004224 170(C)(1) \$1,000.00 42-6004224 170(C)(1) \$1,500.00 42-6004224 170(C)(1) \$1,500.00 42-6004224 170(C)(1) \$2,500.00 42-6036800 170(C)(1) \$5,000.00 42-6024071 170(C)(1) \$5,000.00 42-6004936 170(C)(1) \$5,000.00 42-6004976 170(C)(1) \$8,000.00 42-6021469

Death Village 51 Death Co.						
Readlyn Volunteer Fire Department, 111 Main Street, Readlyn, IA 50668	42-6005139	170(C)(1)	\$2,500 00			
Readlyn Volunteer Fire Department, 111 Main Street,					 	
Readlyn, IA 50668	42-6005139	170(C)(1)	\$2,500.00			1
Tama County Conservation Board, 2283 Park Rd., Toledo, IA 52342	42-6005285	170(C)(1)	\$9,500.00			
Town of Morrison, PO Box 34 210 Sycamore St, Morrison, IA 50657	42-1186525	170(C)(1)	\$5,000.00			
Turkey Valley Community School, 3219 State Hwy 24, Waucoma, IA 52154	42-6039110	170(C)(1)	\$1,596.00			
Turkey Valley Community School, 3219 State Hwy 24, Waucoma, IA 52154	42-6039110	170(C)(1)	\$3,630 00	*****		
University of Iowa, 208 Calvin Hall, Iowa City, IA 52242	42-6004813	170(C)(1)	\$ 1			
University of Iowa, 208 Calvin Hall, Iowa City, IA 52242	42-6004813	170(C)(1)	\$.			
University of Iowa, 208 Calvin Hall, Iowa City, IA 52242	42-6004813	170(C)(1)	\$,			
University of Iowa, 208 Calvın Hall, Iowa Cıty, IA 52242	42-6004813	170(C)(1)	\$500 00			
University of Iowa, 208 Calvin Hall, Iowa City, IA 52242	42-6004813	170(C)(1)	\$			
University of Iowa, 208 Calvin Hall, Iowa City, IA 52242	42-6004813	170(C)(1)	\$500.00			
University of Iowa, 208 Calvin Hall, Iowa City, IA 52242	42-6004813	170(C)(1)	\$500 00			
University of Iowa, 208 Calvin Hall, Iowa City, IA 52242	42-6004813	170(C)(1)	\$			
University of Iowa, 208 Calvin Hall, Iowa City, IA 52242	42-6004813	170(C)(1)	\$500.00			
University of Iowa, 208 Calvin Hall, Iowa City, IA 52242	42-6004813	170(C)(1)	\$500 00			
University of Iowa, 208 Calvin Hall, Iowa City, IA 52242	42-6004813	170(C)(1)	\$			
University of Iowa, 208 Calvin Hall, Iowa City, IA 52242	42-6004813	170(C)(1)	\$1,000.00			
University of Iowa, 208 Calvin Hall, Iowa City, IA 52242	42-6004813	170(C)(1)	\$1,000.00			
University of Iowa, 208 Calvin Hall, Iowa City, IA 52242	42-6004813	170(C)(1)	\$1,000 00			
University of Iowa, 208 Calvin Hall, Iowa City, IA 52242	42-6004813	170(C)(1)	\$1,000.00			
University of Iowa, 208 Calvin Hall, Iowa City, IA 52242	42-6004813	170(C)(1)	\$,		
University of Iowa, 208 Calvin Hall, Iowa City, IA 52242	42-6004813	170(C)(1)	\$1,000 00			
University of Iowa, 208 Calvin Hall, Iowa City, IA 52242	42-6004813	17'0(C)(1)	\$			
University of Iowa, 208 Calvin Hall, Iowa City, IA 52242	42-6004813	170(C)(1)	\$			
University of Iowa, 208 Calvın Hall, Iowa Cıty, IA 52242	42-6004813	170(C)(1)	\$2,500 00			

	Communication Center/Radio
	Two complete SCBA units
-	TWO complete SCBA units
	Tama County Nature Center - Main Exhibit Room Construction
	Town Park Renovation Phase 3
	lowa History Enrichment Program - 5th and 6th graders
	After School activities- Supplies & Teacher stipend
	Fund for Excellence: F. Marjorie Anderson Scholarship for Jarrett
	McGuigan SS#:
	Union Community Scholarship (LaPorte City Women's Club Award) for
	Winston Downing SS#
	'Grundy Center Class of 1966' Scholarship for Jacob Delagardelle- SS#

2010 Fund for Excellence Walter Cunningham Scholarship for Ai-Chi Hong

University of Iowa, 208 Calvin Hall, Iowa City, IA 52242	42-6004813	170(C)(1)	\$			
University of Northern Iowa, 103 Gilchrist, Cedar Falls, IA 50614-0008	42-6004333	L70(C)(1)	\$467.35			
University of Northern Iowa, 103 Gilchrist, Cedar Falls, IA 50614-0008	42-6004333	170(C)(1)	\$945.00		 	
University of Northern Iowa, 103 Gilchrist, Cedar Falls, IA 50614-0008	42-6004333	170(C)(1)	\$27,000.00	· · · · · · · · · · · · · · · · · · ·		
University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024	42-6004333	170(C)(1)	\$250 00		<u> </u>	
University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024	42-6004333	170(C)(1)	\$250 00			<u> </u>
University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024	42-6004333	170(C)(1)	\$250 00			-
University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024	42-6004333	170(C)(1)	\$300 00			
University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024	42-6004333	1.70(C)(1)	\$,			
University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024	42-6004333	170(C)(1)	\$500 00			
University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024	42-6004333	170(C)(1)	\$			
University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024	42-6004333	170(C)(1)	\$			
University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024	42-6004333	170(C)(1)	\$500 00			
University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024	42-6004333	170(C)(1)	\$500 00			
University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024	42-6004333	170(C)(1)	\$			
University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024	42-6004333	170(C)(1)	\$650 00			
University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024	42-6004333	170(C)(1)	\$			
University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024	42-6004333	170(C)(1)	\$			
University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024	42-6004333	170(C)(1)	\$1,000 00			
University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024	42-6004333	170(C)(1)	\$1,000 00			
University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024	42-6004333	170(C)(1)	\$1,000 00			
University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024	42-6004333	170(C)(1)	\$1,000.00			
University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024	42-6004333	170(C)(1)	\$1,000.00			
University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024	42-6004333	170(C)(1)	\$1,000.00			
University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024	42-6004333	170(C)(1)	\$			

Union Community Scholarship (LaPorte City Police Dept. Award) for
Jordyn Fischels SS#
2010 Berdena J Nelson Beach Family Scholarship for Vanessa Horstman
SS#
Fund for Excellence: Walter Cunningham Scholarship for Holly Bass
SS#
Fund for Excellence Wendell Koch West High Scholarship for Morgan
Kosar SS#
2009 Mother Moon Service Scholarship for Sarah Bair SS#
2009 Mother Moon Service Scholarship for Holly Bass SS#
Union Community Schools- Trowel Lodge #216 Scholarship for Lindsey
Petersen SS#
2010 Danica A. Smock Momorial Scholarchin for Israh Toolo SCH

University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024	y Coselman fer Gibbs
University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Fall	fer Gibbs
Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Fina	fer Gibbs
Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar	
University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024	
Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 University of Northern Iowa- Financial Aid Office, 225 University of Northern Iowa- Financial Aid Office, 225	
University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern lowa- Financial Aid Office, 225	n Schell
Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 University of Northern Iowa- Financial Aid Office, 225 University of Northern Iowa- Financial Aid Office, 225 University of Northern Iowa- Financial Aid Office, 225 University of Northern Iowa- Financial Aid Office, 225 University of Northern Iowa- Financial Aid Office, 225 University of Northern Iowa- Financial Aid Office, 225	n Schell
University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 University of Northern Iowa- Financial Aid Office, 225 University of Northern Iowa- Financial Aid Office, 225 University of Northern Iowa- Financial Aid Office, 225 University of Northern Iowa- Financial Aid Office, 225	n Schell
Gilchrist, Cedar Falls, IA 50614-0024 42-6004333 170(C)(1) \$1,000 00 SS# University of Northern lowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 42-6004333 170(C)(1) \$1,000 00 2010 Marjorie F Laubscher Scholarship for Ariel Morrison SS# University of Northern lowa- Financial Aid Office, 225 Scholarship for Ariel Morrison SS#	on Schell
University of Northern Iowa- Financial Aid Office, 225 Gilchrist, Cedar Falls, IA 50614-0024 University of Northern Iowa- Financial Aid Office, 225 University of Northern Iowa- Financial Aid Office, 225 University of Northern Iowa- Financial Aid Office, 225 University of Northern Iowa- Financial Aid Office, 225	
Gilchrist, Cedar Falls, IA 50614-0024 42-6004333 170(C)(1) \$1,000 00 2010 Marjorie F Laubscher Scholarship for Ariel Morrison SS# University of Northern Jowa- Financial Aid Office 225	
University of Northern Jowa- Financial Aid Office 225	
	Morrison
Gilchrist, Cedar Falls, IA 50614-0024 42-6004333 170(C)(1) \$	VIOLITISON
University of Northern Iowa- Financial Aid Office 225	
Gilchrist, Cedar Falls, IA 50614-0024 42-6004333 170(C)(1) \$	
University of Northern Iowa- Financial Aid Office, 225	
Gilchrist, Cedar Falls, IA 50614-0024 42-6004333 170(C)(1) \$1,000.00 2010 POS Corporation Scholarship for Callie Bergen SS#	,
University of Northern Iowa- Financial Aid Office 225	tney
Gilchrist, Cedar Falls, IA 50614-0024 42-6004333 170(C)(1) \$1,000 00 Elsbernd SS#	
University of Northern Iowa- Financial Aid Office, 225 42-6004333 170(C)(1) \$ Louise Vincent Conklin & Robert Conklin Scholarship for Jos	ua
Dunkelberger SS#	
University of Northern Iowa- Financial Aid Office, 225 James W & Jvone E Maxwell Memorial Scholarship for Sar	Cartney
Glichrist, Cedar Falls, IA 50614-0024	
University of Northern Iowa- Financial Aid Office, 225 42-6004333 170(C)(1) \$	√lauldın SS#
Glichrist, Cedar Falls, IA 50614-0024	
Waterloo Center for the Arts, 225 Commercial St., 42-6005327 170(C)(1) \$960.00	
Waterioo, IA 50701 General Charitable Support	
Waterloo Center for the Arts, 225 Commercial St., 42-6005327 170(C)(1) \$1,000.00	lexico -
Wateriob, IA 50701 Jerry Grier gift	
Waterloo Center for the Arts, 225 Commercial St, Waterloo, IA 50701 To purchase an acquisition for the permanent collection using the funds in Mexico	memoriai
Waterloo Center for the Arts, 225 Commercial St ,	
Waterloo, IA 50701 Upkeep & Maintenance on Artwork Owned by the Community Fo	and at an
Wingebago County Extension, PO Box 47. Thompson	
IA 50478 42-6021485 170(C)(1) \$349.46 awards ceremony	ind grant
Winnehago County Extension, PO Box 47, Thompson	
1A 50478 42-6021485 170(C)(1) \$1,905.00 4-H Sharp Shooters- Archery targets & shooting range	1
Winnebago County Extension, PO Box 47, Thompson	
IA 50478 42-6021485 170(C)(1) \$2,100.00 Summer program- basic life skills instruction	1
Winnebago County Extension, PO Box 47, Thompson, 12 COLLAGE 170(C)(4) CAD COLLAGE 170(C)(4)	
1A 50478 42-6021485 170(C)(1) \$13,000.00 Winnebago County Fair Association- Building a hoop building	i
Winnebago County Sheriff, 216 S. Clark St., Forest 42-6004670 170(C)(1) \$5,130 00	
City, IA 50436 Digital video recorders in squad cars	
Winneshiek County Auditor, 201 W. Main St , 42-6004486 170(C)(1) \$5,000.00	
Decorah, IA 52101 County Recycling Department- Collection bins	
Winneshiek County Conservation Board, 2546 Lake 42-6004486 170(C)(1) \$5,100 00	
Meyer Rd., Ft. Atkinson, IA 52144	
Access Incorporated, PO Box 268, 20 5th St. NW, 42-1045275 501(C)(3) \$500.00	
Hampton, IA 50441 Public Transit Fees for Day Habilitation Program	11

Access Incorporated, PO Box 268, 20 5th St NW, Hampton, IA 50441	42-1045275	501(C)(3)	\$5,000.00	Mechanis	al lift, 2 automatic door openers and 4 high rise toilets
Algona Family YMCA,2101 East McGregor , Algona, IA 50511	42-1225829	501(C)(3)	\$2,000.00	Y-Pals Me	
Algona Family YMCA,2101 East McGregor , Algona, IA 50511	42-1225829	501(C)(3)	\$3,534 00		stribution from the Endowment Fund- General Charitable Support
Allen College of Nursing, 1990 Heath Street, Waterloo, IA 50703	42-1351526	501(C)(3)	\$350 00		
Allen College of Nursing, 1990 Heath Street, Waterloo, IA 50703	42-1351526	501(C)(3)	\$650.00		
Allen College of Nursing, 1990 Heath Street, Waterloo, IA 50703	42-1351526	501(C)(3)	\$850 00		
Allen College of Nursing, 1990 Heath Street, Waterloo, IA 50703	42-1351526	501(C)(3)	\$900.00		
Allen College of Nursing, 1990 Heath Street, Waterloo, IA 50703	42-1351526	501(C)(3)	\$1,000.00		
Allen College of Nursing, 1990 Heath Street, Waterloo, IA 50703	42-1351526	501(C)(3)	\$1,000.00		
Allen Health Systems, Inc., 1825 Logan Avenue, Waterloo, IA 50703	42-0698265	501(C)(3)	\$16,701.00	Creation o	f a half-time Family Advocate Position
Allen Health Systems, Inc., 1825 Logan Avenue, Waterloo, IA 50703	42-0698265	501(C)(3)	\$175.24	Funds to b	e used for printing YLA materials for spring 2010 conference
ASPIRE-TRP, Inc , 8100 Kimball Avenue, Waterloo, IA 50701	42-1477803	501(C)(3)	\$1,000 00	Sponsorsh	ip of "Let's Dance so They can Ride" Event
ASPIRE-TRP, Inc., 8100 Kimball Avenue, Waterloo, IA 50701	42-1477803	501(C)(3)	\$1,200 00	Rider scho	larships
ASPIRE-TRP, Inc , 8100 Kimball Avenue, Waterloo, IA 50701	42-1477803	501(C)(3)	\$3,000 00	Therapeut	ic Riding for Buchanan County
ASPIRE-TRP, Inc., 8100 Kimball Avenue, Waterloo, IA 50701	42-1477803	501(C)(3)	\$6,000 00	Camp Hop	e
Benton County Volunteer Program Vinton, 1309 - 5th Ave, Belle Plaine, IA 52208	42-1023730	501(C)(3)	\$4,000.00	Benton Co	unty Volunteer Program transportation
Big Brothers/Big Sisters of Northeast Iowa, Inc., 2530 University Avenue, Suite 8, Waterloo, IA 50701-3330	42-0885714	501(C)(3)	\$947.00	Enhancing	BB/BS Matches in Waverly
Big Brothers/Big Sisters of Northeast Iowa, Inc., 2530 University Avenue, Suite 8, Waterloo, IA 50701-3330	42-0885714	501(C)(3)	\$1,000 00	Mentoring	g Match Activities
Big Brothers/Big Sisters of Northeast Iowa, Inc., 2530 University Avenue, Suite 8, Waterloo, IA 50701-3330	42-0885714	501(C)(3)	\$25,000.00	Communi	ry- and School-Based Mentoring in BHC
Bill Finn House Inc., PO Box 555, Algona, IA, 50511	20-8720969	501(C)(3)	\$5,000.00	Completio	n of Building
Boys and Girls Club of Black Hawk County, 515 Lime Street, Waterloo, IA 50703	42-6083723	501(C)(3)	\$185.00	General C	naritable Support
Boys and Girls Club of Black Hawk County, 515 Lime Street, Waterloo, IA 50703	42-6083723	501(C)(3)	\$237.50	General C	naritable Support
Boys and Girls Club of Black Hawk County, 515 Lime Street, Waterloo, IA 50703	42-6083723	501(C)(3)	\$358.25	General C	naritable Support

Boys and Girls Club of Black Hawk County, 515 Lime Street, Waterloo, IA 50703	42-6083723	501(C)(3)	\$749.00	Constal Charachla Susana
Boys and Girls Club of Black Hawk County, 515 Lime	42 6002722	504(0)(2)	4007.04	General Charitable Support
Street, Waterloo, IA 50703	42-6083723	501(C)(3)	\$987.81	General charitable support made possible by a gift from Dr. William Drier
Boys and Girls Club of Black Hawk County, 515 Lime Street, Waterloo, IA 50703	42-6083723	501(C)(3)	\$1,000.00	Shelving/Storage Units for North Cedar Club Site
Boys and Girls Club of Black Hawk County, 515 Lime Street, Waterloo, IA 50703	42-6083723	501(C)(3)	\$1,000.00	General Charitable Support
Boys and Girls Club of Black Hawk County, 515 Lime Street, Waterloo, IA 50703	42-6083723	501(C)(3)	\$1,118.00	General Charitable Support
Boys and Girls Club of Black Hawk County, 515 Lime Street, Waterloo, IA 50703	42-6083723	501(C)(3)	\$5,421.90	General charitable support
Boys and Girls Club of Black Hawk County, 515 Lime Street, Waterloo, IA 50703	42-6083723	501(C)(3)	\$23,478 00	Character & Leadership Development Programs
Bridge Organization, Inc., PO Box 15, Elma, IA 50628	20-2911286	501(C)(3)	\$65.00	Elma Quasquecentennial (Mini-Grant)
Bridge Organization, Inc , PO Box 15, Elma, IA 50628	20-2911286	501(C)(3)	\$100.00	Roundhouse Trail Project (Mini-Grant)
Bridge Organization, Inc., PO Box 15, Elma, IA 50628	20-2911286	501(C)(3)	\$100.00	Welcome Center/Trailhead Project (Mini-Grant)
Bridge Organization, Inc., PO Box 15, Elma, IA 50628	20-2911286	501(C)(3)	\$175 00	Additional General Support for Organizations which have an Endowment with EACF (Elma Trails Fund)
Bridge Organization, Inc., PO Box 15, Elma, IA 50628	20-2911286	501(C)(3)	\$175 00	Additional General Support for Organizations which have an Endowment with EACF (Elma Museums Fund)
Bridge Organization, Inc., PO Box 15, Elma, IA 50628	20-2911286	501(C)(3)	\$680.00	Elma Quasquecentennial
Bridge Organization, Inc., PO Box 15, Elma, IA 50628	20-2911286	501(C)(3)	\$900 00	Roundhouse Trail Project
Bridge Organization, Inc., PO Box 15, Elma, IA 50628	20-2911286	501(C)(3)	\$900 00	Welcome Center/Trailhead Project
Bridge Organization, Inc., PO Box 15, Elma, IA 50628	20-2911286	501(C)(3)	\$2,000 00	Elma Visioning Committee- Trailhead/Welcome Center
Bridge Organization, Inc., PO Box 15, Elma, IA 50628	20-2911286	501(C)(3)	\$3,000.00	Elma Trail Committee- Phase 2 Trail
Brooklyn Community Foundation, PO Box 66, Brooklyn, IA 52211	42-1479364	501(C)(3)	\$2,660 00	BGM Sports Complex expansion- For Dugouts
Brooklyn Community Foundation, PO Box 66, Brooklyn, IA 52211	42-1479364	501(C)(3)	\$3,000 00	Kent Chapel Rehabilitation- For Doors
Brooklyn Community Foundation, PO Box 66, Brooklyn, IA 52211	42-1479364	501(C)(3)	\$5,000.00	BGM Sports Complex expansion- For Dugouts
Brooklyn Community Foundation, PO Box 66, Brooklyn, IA 52211	42-1479364	501(C)(3)	\$5,000 00	Brooklyn Fire Dept/East Poweshiek Ambulance - Base radio/tower
Buchanan County Disaster Recovery Coalition, PO Box 204, 1701 First Street East, Independence, IA 50644	26-3448428	501(C)(3)	\$10,000.00	Individual assistance for Natural disaster victims in Buchanan County
Cedar Falls Lutheran Home,7511 University Ave., Cedar Falls, IA 50613	42-0794364	501(C)(3)	\$3,334.00	"Main Street" Capital Campaign (Grant in two parts, payable in 2010 and 2011)
Cedar Falls Lutheran Home,7511 University Ave., Cedar Falls, IA 50613	42-0794364	501(C)(3)	\$14,300.00	Main Street Building Project
Cedar Valley Friends of the Family, PO Box 784, Waverly, IA 50677	42-1390144	501(C)(3)	\$1,000.00	Butler County Crisis Intervention

Cedar Valley Friends of the Family, PO Box 784, Waverly, IA 50677	42-1390144	501(C)(3)	\$1,421.00	Communication services for CVFF shelter addition
Cedar Valley Friends of the Family, PO Box 784,			· · · · · · · · · · · · · · · · · · ·	Communication Screeces for CVIT Street addition
Waverly, IA 50677	42-1390144	501(C)(3)	\$5,000.00	Renewing the Hope
Cedar Valley Friends of the Family, PO Box 784,	42-1390144	501(C)(3)	\$5,000 00	Sholter Hope and Hosting, general exerctional support
Waverly, IA 50677				Shelter Hope and Healing - general operational support
Cedar Valley Hospice, PO Box 2880, Waterloo, IA 50704	42-1135294	501(C)(3)	\$185 00	General Charitable Support
Cedar Valley Hospice, PO Box 2880, Waterloo, IA 50704	42-1135294	501(C)(3)	\$1,000.00	General Charitable support
Cedar Valley Hospice, PO Box 2880, Waterloo, IA 50704	42-1135294	501(C)(3)	\$1,118.00	General Charitable Support
Cedar Valley Hospice, PO Box 2880, Waterloo, IA 50704	42-1135294	501(C)(3)	\$3,960 00	Caring Connections Project
Cedar Valley Living, Inc. d/b/a Angel House, 110 Wellington Street, Waterloo, IA 50701	26-4572231	501(C)(3)	\$20,000.00	General Operational Support
Cedar Valley Preschool and Child Care Center, 724 Lantz Avenue, Cedar Falls, IA 50613	42-0956806	501(C)(3)	\$750 00	Early reading development- 95 books
Cedar Valley Preschool and Child Care Center, 724 Lantz Avenue, Cedar Falls, IA 50613	42-0956806	501(C)(3)	\$10,000.00	Capital Improvement/Building renovation
Cedar Valley United Way, 425 Cedar Street, Suite 300, Waterloo, IA 50701	42-0801846	501(C)(3)	\$1,000.00	General charitable support
Cedar Valley United Way, 425 Cedar Street, Suite 300, Waterloo, IA 50701	42-0801846	501(C)(3)	\$1,105.00	General Charitable Support
Cedar Valley United Way, 425 Cedar Street, Suite 300, Waterloo, IA 50701	42-0801846	501(C)(3)	\$7,909.00	Annual Distribution from the Endowment Fund- General Charitable Support
City of Tripoli- Tripoli Public Library, 101 4th Avenue SW, Tripoli, IA 50676	42-1474868	501(C)(3)	\$2,500.00	Update lighting fixtures and computers
Communities in Schools, 213 E. 4th Street, Waterloo, IA 50703	42-1444315	501(C)(3)	\$13,500.00	Success Street
Community Foundation of Greater Dubuque, PO Box 902, Dubuque, IA 52004	42-1526614	501(C)(3)	\$3,750.00	NE lowa Funders Network for Regional Collaboration
Community Foundation of Greater Dubuque, PO Box 902, Dubuque, IA 52004	42-1526614	501(C)(3)	\$5,000 00	Northeast Iowa Funders Network
Consumer Credit Counseling Service of NE Iowa, Inc., W. 4th Street, Waterloo, IA 50702	42-1236403	501(C)(3)	\$	Financial Literacy in Marshall County
Consumer Credit Counseling Service of NE Iowa, Inc., W. 4th Street, Waterloo, IA 50702	42-1236403	501(C)(3)	\$	MoneyMap High School Financial Literacy for Students
Cub Cadet Childhood Center, Inc., PO Box 398, Latimer, IA 50452	59-3817703	501(C)(3)	\$5,000 00	Structural/ buliding improvements
Dysart Historical Society, 612 Crisman St., Dysart, IA 52224	42-1501779	501(C)(3)	\$250 00	Mını-grant awarded at TCCF grant workshop- for General Charitable Support
Dysart Historical Society, 612 Crisman St., Dysart, IA 52224	42-1501779	501(C)(3)	\$7,000.00	Dysart Historical Society Agricultural Musuem & Interpretive Center
East Side Ministerial Alliance, 205 Adams Street, Suite 1, Waterloo, IA 50703	39-1893413	501(C)(3)	\$1,500 00	Assistance with water main repair for client Thadine Graham
East Side Ministerial Alliance, 205 Adams Street, Suite 1, Waterloo, IA 50703	39-1893413	501(C)(3)	\$5,000.00	Replace server, workstations, copier & software for EMA office
Emmet County Kinship, Inc., 115 N. 6th Street, Estherville, IA 51334	20-4385603	501(C)(3)	\$5,000 00	Mentoring Programming

Episcopal Diocese of Iowa- Shady Rest Fund, 417 Olive	31-1629166	E01(C)(2)	¢11 000 00	Completion of Shady Rest Motel restoration - low-income housing that was
St., Cedar Falls, IA 50613	31-1029100	501(C)(3)	\$11,000 00	damaged in the Floods of 2008
Eye of the Needle, PO Box 1972, Waterloo, IA 50704	26-1495933	501(C)(3)	\$5,000 00	General Operations Support
Faith Baptist Bible College & Theological Seminary, 1900 NW Fourth St., Ankeny, IA 50023	47-0394397	501(C)(3)	\$1,000 00	2010 Will & Eileen Hitchcock Scholarship for David Craig SS#
Farth Baptist Bible College & Theological Seminary, 1900 NW Fourth St., Ankeny, IA 50023	47-0394397	501(C)(3)	\$1,000 00	2010 Will & Eileen Hitchcock Scholarship for Caleb Reising SS#
Faith Baptist Bible College & Theological Seminary, 1900 NW Fourth St., Ankeny, IA 50023	47-0394397	501(C)(3)	\$1,000 00	2010 Will & Eileen Hitchcock Scholarship for Zachary Dietrich SS#
Faith Baptist Bible College & Theological Seminary, 1900 NW Fourth St., Ankeny, IA 50023	47-0394397	501(C)(3)	\$1,000 00	2010 Will & Eileen Hitchcock Scholarship for David Kreis SS#
Faith Baptist Bible College & Theological Seminary, 1900 NW Fourth St , Ankeny, IA 50023	47-0394397	501(C)(3)	\$	Will & Eileen Hitchcock Scholarship for Jared Segerstrom SS#479-19-7604
Family and Children's Council of Black Hawk County, 500 E 4th Street, Suite 414, Waterloo, IA 50703	42-1307663	501(C)(3)	\$291.00	General Charitable Support- Prevention of Child Sexual Abuse
Family and Children's Council of Black Hawk County, 500 E 4th Street, Suite 414, Waterloo, IA 50703	42-1307663	501(C)(3)	\$300 00	General charitable support - Designated by Cathy Young
Family and Children's Council of Black Hawk County, 500 E 4th Street, Suite 414, Waterloo, IA 50703	42-1307663	501(C)(3)	\$370.00	General Charitable Support
Family and Children's Council of Black Hawk County, 500 E. 4th Street, Suite 414, Waterloo, IA 50703	42-1307663	501(C)(3)	\$802.00	Annual distribution from the Agency Endowment Fund - General Charitable Support
Family and Children's Council of Black Hawk County, 500 E. 4th Street, Suite 414, Waterloo, IA 50703	42-1307663	501(C)(3)	\$1,000.00	Healthy Babies
Family and Children's Council of Black Hawk County, 500 E 4th Street, Suite 414, Waterloo, IA 50703	42-1307663	501(C)(3)	\$1,118.00	General Charitable Support
Family and Children's Council of Black Hawk County, 500 E 4th Street, Suite 414, Waterloo, IA 50703	42-1307663	501(C)(3)	\$12,500.00	Parent Connection Program
Fayette County Food Shelf, Inc., P O Box 711, Fayette, IA 52142	42-1336913	501(C)(3)	\$6,250.00	Purchase and installation of shelving and display racks and updated equipment
First Children's Finance, 212 Third Avenue North, Suite 310, Minneapolis, MN 55401-1437	41-1694837	501(C)(3)	\$1,000.00	Children's Chamber of Commerce Founding membership
First Children's Finance, 212 Third Avenue North, Suite 310, Minneapolis, MN 55401-1437	41-1694837	501(C)(3)	\$10,000 00	First Children's Finance Iowa
First Resources Corporation, 102 S Main, Sigourney, IA 52591	42-1279294	501(C)(3)	\$8,000 00	Benton and Iowa Decategorization Project - Millersburg School Project
Forest City Family YMCA, 916 West Street, Forest City, IA 50436	42-1257332	501(C)(3)	\$5,868.00	Security cameras, pool benches, shower curtains & rods
Fossil & Prairie Center Foundation, PO Box 495, Rockford, IA 50468	39-1904270	501(C)(3)	\$5,000.00	Kiln Restoration Project- Phase III

	,			<u> </u>
Franklin County Arts Council, Inc., 608 2nd Ave. SE, Hampton, IA 50441	42-1114989	501(C)(3)	\$8,500.00	Franklin County Players annual director residency program
Franklin County Historical Society, PO Box 114, Hampton, IA 50441	51-0159225	501(C)(3)	\$5,000.00	Geothermal heating and cooling for the Old Stone House
Fredericksburg Community Education Foundation, PO Box 333, Fredericksburg, IA 50630	35-2202614	501(C)(3)	\$2,400.00	Sumner-Fredericksburg Middle School Booster Club Food Stand canopy
Fredericksburg Community Education Foundation, PO Box 333, Fredericksburg, IA 50630	35-2202614	501(C)(3)	\$5,500.00	Elementary technology
Friends of Chickasaw County Conservation, 1811 240th St., Ionia, IA 50645	42-1462573	501(C)(3)	\$10,000 00	LEAP (Learn, Explore And "Pond"er)
Friends of the Hampton Cemetery, 308 Third Avenue, Hampton, IA 50441-1545	26-1475128	501(C)(3)	\$5,500.00	Preservation and restoration of the Hampton Cemetery
Girl Scouts of Eastern Iowa and Western Illinois, 2011 2nd Avenue, Rock Island, IL 61201	42-1008848	501(C)(3)	\$500.00	General Charitable Support
Girl Scouts of Eastern lowa and Western Illinois, 2011 2nd Avenue, Rock Island, IL 61201	42-1008848	501(C)(3)	\$947.00	Youth Leadership Development in Waverly
Girl Scouts of Eastern Iowa and Western Illinois, 2011 2nd Avenue, Rock Island, IL 61201	42-1008848	501(C)(3)	\$1,000 00	General Charitable Support
Girl Scouts of Eastern Iowa and Western Illinois, 2011 2nd Avenue, Rock Island, IL 61201	42-1008848	501(C)(3)	\$1,000.00	Youth Leadership Development in Grundy County
Girl Scouts of Eastern Iowa and Western Illinois, 2011 2nd Avenue, Rock Island, IL 61201	42-1008848	501(C)(3)	\$2,500 00	Youth Leadership Develpment program
Girl Scouts of Eastern Iowa and Western Illinois, 2011 2nd Avenue, Rock Island, IL 61201	42-1008848	501(C)(3)	\$5,000.00	The Girl Scout Leadership Experience
Greater Des Moines Community Foundation, 1915 Grand Ave., Des Moines, IA 50309-7271	42-6139033	501(C)(3)	\$3,501.73	Community Foundation Legislative Advocate
Greater Poweshiek Community Foundation, PO Box 344, Grinnell, IA 50112	42-6139033	501(C)(3)	\$4,330.00	Imagine Grinnell- Arbor Lake East Shore Trail project
Greater Poweshiek Community Foundation, PO Box 344, Grinnell, IA 50112	42-6139033	501(C)(3)	\$5,000 00	N Skunk River Greenbelt Association - McDowell Bridge Restoration
Grinnell Regional Medical Center, PO Box 344, Grinnell, IA 50112	42-0933383	501(C)(3)	\$10,000 00	Infant security system
Grout Museum District, 503 South Street, Waterloo, IA 50701	42-1333059	501(C)(3)	\$475 00	General Charitable Support
Grout Museum District, 503 South Street, Waterloo, IA 50701	42-1333059	501(C)(3)	\$700 00	Imaginarium
Grout Museum District, 503 South Street, Waterloo, IA 50701	42-1333059	501(C)(3)	\$1,118 00	General Charitable Support
Grout Museum District, 503 South Street, Waterloo, IA 50701	42-1333059	501(C)(3)	\$3,856 00	Renssellaer Russel House
Grout Museum District, 503 South Street, Waterloo, IA 50701	42-1333059	501(C)(3)	\$3,997 00	Rensselaer Russel House Museum
Grout Museum District, 503 South Street, Waterloo, IA 50701	42-1333059	501(C)(3)	\$7,089.00	Renssellaer Russel House
Grout Museum District, 503 South Street, Waterloo, IA 50701	42-1333059	501(C)(3)	\$7,346 00	Rensselaer Russell House Museum
Grout Museum District, 503 South Street, Waterloo, IA 50701	42-1333059	501(C)(3)	\$10,000.00	General Charitable Support (Not capital expenses)
Grout Museum District, 503 South Street, Waterloo, IA 50701	42-1333059	501(C)(3)	\$12,000.00	Museum School registration fees

Hawkeye Community College Foundation, PO Box 8015, PO Box 8015 Waterloo, IA 50704	42-6123782	501(C)(3)	\$,			
Hawkeye Community College Foundation, PO Box 8015, PO Box 8015 Waterloo, IA 50704	42-6123782	501(C)(3)	\$,			
Hawkeye Community College Foundation, PO Box 8015, PO Box 8015 Waterloo, IA 50704	42-6123782	501(C)(3)	\$,			†
Hawkeye Community College Foundation, PO Box 8015, PO Box 8015 Waterloo, IA 50704	42-6123782	501(C)(3)	\$,		<u> </u>	<u> </u>
Hawkeye Community College Foundation, PO Box 8015, PO Box 8015 Waterloo, IA 50704	42-6123782	501(C)(3)	\$,		<u> </u>	
Hawkeye Community College Foundation, PO Box PO Box 8015 Waterloo, IA 50704	42-6123782	501(C)(3)	\$ <i>i</i>			
Hawkeye Community College Foundation, PO Box 8015, PO Box 8015 Waterloo, IA 50704	42-6123782	501(C)(3)	\$500 00			
Hawkeye Community College Foundation, PO Box 8015, PO Box 8015 Waterloo, IA 50704	42-6123782	501(C)(3)	\$:	•	<u> </u>	
Hawkeye Community College Foundation, PO Box 8015, PO Box 8015 Waterloo, IA 50704	42-6123782	501(C)(3)	\$,			
Hawkeye Community College Foundation, PO Box 8015, PO Box 8015 Waterloo, IA 50704	42-6123782	501(C)(3)	\$			
Hawkeye Community College Foundation, PO Box 8015, PO Box 8015 Waterloo, IA 50704	42-6123782	501(C)(3)	\$500 00			
Hawkeye Community College Foundation, PO Box 8015, PO Box 8015 Waterloo, IA 50704	42-6123782	501(C)(3)	\$750 00	-		
Hawkeye Community College Foundation, PO Box 8015, PO Box 8015 Waterloo, IA 50704	42-6123782	501(C)(3)	\$			
Hawkeye Community College Foundation, PO Box PO Box 8015 Waterloo, IA 50704	42-6123782	501(C)(3)	\$			
Hawkeye Community College Foundation, PO Box 8015, PO Box 8015 Waterloo, IA 50704	42-6123782	501(C)(3)	\$			
Hawkeye Community College Foundation, PO Box 8015, PO Box 8015 Waterloo, IA 50704	42-6123782	501(C)(3)	\$1,000 00			
Hawkeye Community College Foundation, PO Box PO Box 8015 Waterloo, IA 50704	42-6123782	501(C)(3)	\$			
Hawkeye Community College Foundation, PO Box 8015, PO Box 8015 Waterloo, IA 50704	42-6123782	501(C)(3)	\$1,000 00			
Hawkeye Community College Foundation, PO Box 8015, PO Box 8015 Waterloo, IA 50704	42-6123782	501(C)(3)	\$			
Hawkeye Community College Foundation, PO Box PO Box 8015 Waterloo, IA 50704	42-6123782	501(C)(3)	\$			
Hawkeye Community College Foundation, PO Box 8015, PO Box 8015 Waterloo, IA 50704	42-6123782	501(C)(3)	\$			
Hawkeye Community College Foundation, PO Box 8015, PO Box 8015 Waterloo, IA 50704	42-6123782	501(C)(3)	\$			
Hawkeye Community College Foundation, PO Box PO Box 8015 Waterloo, IA 50704	42-6123782	501(C)(3)	\$	l 		
Hawkeye Community College Foundation, PO Box PO Box 8015 Waterloo, IA 50704	42-6123782	501(C)(3)	\$			
Hawkeye Community College Foundation, PO Box 8015, PO Box 8015 Waterloo, IA 50704	42-6123782	501(C)(3)	\$1,000 00			

The state of the s				
Hawkeye Community College Foundation, PO Box 8015, PO Box 8015 Waterloo, IA 50704	42-6123782	501(C)(3)	;)) James W. & Jvone E. Maxwell Memorial Scholarship for Kayla Dyer
Hawkeye Community College Foundation, PO Box , PO Box 8015 Waterloo, IA 50704	42-6123782	501(C)(3)	()	
Hawkeye Community College Foundation, PO Box , PO Box 8015 Waterloo, IA 50704	42-6123782	501(C)(3)	\$)	2010 Marjorie F Laubscher Scholarship for Chasity Thiele SSt
Hawkeye Community College Foundation, PO Box	42-6123782	501(C)(3)	\$2,500 00	2010 Iola T Dehrkoop Scholarship for Tabitha Dengler SS‡ 3
8015, PO Box 8015 Waterloo, IA 50704 Hawkeye Community College Foundation, PO Box	42-6123782	501(C)(3)	\$2,616 00	Joe Nelson Scholarship
8015, PO Box 8015 Waterloo, IA 50704	42-0123782	301(C)(3)	\$2,616 00	To be added to the Fleming Sisters Scholarship
Hawkeye Valley Area Agency on Aging, 2101 Kimball Avenue, Waterloo, IA 50702	52-1621262	501(C)(3)	\$20,500 00	Individual Case Management- meeting remaining needs from the Diasasters of 2008
Howard County Local Housing Trust Fund- Economic Development, 101 2nd Ave. SW, Cresco, IA 52136	26-1913690	501(C)(3)	\$1,000 00	Partners in Progress- City Park Electrical Improvements
Howard County Local Housing Trust Fund- Economic Development, 101 2nd Ave. SW, Cresco, IA 52136	26-1913690	501(C)(3)	\$1,100.00	Farmer's Market- Handrail for Steps
Howard County Local Housing Trust Fund- Economic Development, 101 2nd Ave. SW, Cresco, IA 52136	26-1913690	501(C)(3)	\$2,500.00	Prairie Springs Recreational Trail- Lanscaping
Howard County Local Housing Trust Fund- Economic Development, 101 2nd Ave SW, Cresco, IA 52136	26-1913690	501(C)(3)	\$3,000.00	Tourism- Cresco Community Theatre- New Audio Equipment
Howard County Local Housing Trust Fund- Economic Development, 101 2nd Ave. SW, Cresco, IA 52136	26-1913690	501(C)(3)	\$3,000.00	Norman Borlaug DVD
Howard County Local Housing Trust Fund- Economic Development, 101 2nd Ave. SW, Cresco, IA 52136	26-1913690	501(C)(3)	\$3,000 00	Housing Committee- Northeast Iowa Housing Trust Fund
I-Hope Free Medical Clinic, 722 S. Hacket Rd. , Waterloo, IA 50701	61-1499424	501(C)(3)	\$7,000 00	General Operations Support
Independence Area Food Pantry, 201 2nd Ave NE, Independence, IA 50644	42-1267139	501(C)(3)	\$216.00	General charitable support
Independence Area Food Pantry, 201 2nd Ave. NE, Independence, IA 50644	42-1267139	501(C)(3)	\$9,924.00	Purchase and installation of industrial walk-in freezer
Independence Public Library Foundation, 805 1st St East, Independence, IA 50644	20-5528960	501(C)(3)	\$500.00	Purchase of large print books
Independence Public Library Foundation, 805 1st St East, Independence, IA 50644	20-5528960	501(C)(3)	\$5,498 00	IT2AII (Information Technology to All) - Portable computer lab
lowa County Historical Society, PO Box 288, Marengo, IA 52301-0288	23-7043875	501(C)(3)	\$6,500 00	Quonset repair, reroofing and north side
lowa Regular Baptist Camp, PO Box 80, Ventura, IA 50482	42-6006441	501(C)(3)	\$4,000.00	Jenson Project
lowa Regular Baptist Camp, PO Box 80, Ventura, IA 50482	42-6006441	501(C)(3)	\$6,000.00	Jensen Hall remodel project
lowa River Hospice, Inc., 206 W Church St , Marshalltown, IA 50158	42-1400440	501(C)(3)	\$1,500.00	General Charitable Support
lowa River Hospice, Inc., 206 W. Church St., Marshalltown, IA 50158	42-1400440	501(C)(3)	\$3,698.00	SARA Lite

lowa Valley Community School District Foundation, 359 E. Hilton St., Marengo, IA 52301	42-1500325	501(C)(3)	\$8,000.00	Replace seating in the lowa Valley HS Auditorium
Junior Achievement of Eastern Iowa, Inc., 315 Third Avenue SE, Suite 209, Cedar Rapids, IA 52401-1506	42-0919209	501(C)(3)	\$185.00	General Charitable Support of Black Hawk County
Junior Achievement of Eastern Iowa, Inc., 315 Third Avenue SE, Suite 209, Cedar Rapids, IA 52401-1506	42-0919210	501(C)(3)	\$712.50	General Charitable Support of Black Hawk County
Junior Achievement of Eastern Iowa, Inc., 315 Third Avenue SE, Suite 209, Cedar Rapids, IA 52401-1506	42-0919211	501(C)(3)	\$879.00	Annual Distribution from the Endowment Fund- General Charitable Support of Black Hawk County
Junior Achievement of Eastern Iowa, Inc , 315 Third Avenue SE, Suite 209, Cedar Rapids, IA 52401-1506	42-0919212	501(C)(3)	\$1,000.00	Elementary Programs in Grundy County
Junior Achievement of Eastern Iowa, Inc., 315 Third Avenue SE, Suite 209, Cedar Rapids, IA 52401-1506	42-0919213	501(C)(3)	\$1,000.00	General Charitable Support
Junior Achievement of Eastern Iowa, Inc., 315 Third Avenue SE, Suite 209, Cedar Rapids, IA 52401-1506	42-0919214	501(C)(3)	\$3,000.00	JA Financial literarcy programming for Benton County School Districts
Junior Achievement of Eastern Iowa, Inc., 315 Third Avenue SE, Suite 209, Cedar Rapids, IA 52401-1506	42-0919215	501(C)(3)	\$3,500.00	Bremer County 1st - 11th Grade programming
Junior Achievement of Eastern Iowa, Inc., 315 Third Avenue SE, Suite 209, Cedar Rapids, IA 52401-1506	42-0919216	501(C)(3)	\$6,000.00	Black Hawk County "Our Region" Programs
Kossuth Connections Coalition, 107 N. Moore St., Algona, IA 50511	26-1402287	501(C)(3)	\$3,000.00	Building Sustainability for Kossuth Connections
Kossuth Connections Coalition, 107 N. Moore St., Algona, IA 50511	26-1402287	501(C)(3)	\$5,500.00	Kossuth County Agricultural Association- Fairground restroom addition with handicapped access
Kossuth County Agricultural and Motor Sports Museum, 1306 E McGregor, Algona, IA 50511	27-0614976	501(C)(3)	\$5,000.00	Agricultural & Motor Sports Museum- Phase 1 Design
Kossuth Regional Health Care Foundation, 1515 South Phllips St., Algona, IA 50511	42-1324032	501(C)(3)	\$5,000.00	Relocation of Dialysis Unit
Little Island Child Care Center, 101 - 4th Street North, Fairbank, IA 50629	42-1527111	501(C)(3)	\$7,975.00	Helath and Safety Improvements
Lutheran Services in Iowa, Inc., PO Box 848, Waverly, IA 50677	42-0698267	501(C)(3)	\$750.00	HOPES- 300 early childhood books
Lutheran Services in Iowa, Inc., PO Box 848, Waverly, IA 50677	42-0698267	501(C)(3)	\$1,000.00	Families Together II in Grundy County
Lutheran Services in Iowa, Inc., PO Box 848, Waverly, IA 50677	42-0698267	501(C)(3)	\$2,000.00	Families Together II - Grundy County
Lutheran Services in Iowa, Inc , PO Box 848, Waverly, IA 50677	42-0698267	501(C)(3)	\$3,000 00	Families Together
Lutheran Services in Iowa, Inc., PO Box 848, Waverly, IA 50677	42-0698267	501(C)(3)	\$3,000.00	Families together
Lutheran Services in Iowa, Inc., PO Box 848, Waverly, IA 50677	42-0698267	501(C)(3)	\$3,000 00	Families Together II - ongoing program support
Lutheran Services in Iowa, Inc., PO Box 848, Waverly, IA 50677	42-0698267	501(C)(3)	\$5,000 00	HOPES (Health Opportunities for Families to Experience Success)

Marshall County Coalition for Youth, 2500 S. Center St., Suite 2380, Marshalltown, IA 50158	42-1441018	501(C)(3)	\$2,000.00	Possib Out And Possid Marshall Course
Marshall County Coalition for Youth, 2500 S. Center				Reach Out And Read- Marshall County
St., Suite 2380, Marshalltown, IA 50158	42-1441018	501(C)(3)	\$4,000.00	Support Services
Marshall County Coalition for Youth, 2500 S Center				Support Services ,
St., Suite 2380, Marshalltown, IA 50158	42-1441018	501(C)(3)	\$4,000.00	Playing Safe for Quality
Mental Health Clinic of Tama County, 1309 South				Playing Safe for Quality
Broadway, Toledo, IA 52342	42-1229218	501(C)(3)	\$2,000.00	Installation of automatic door openers
Mental Health Clinic of Tama County, 1309 South				installation of automatic door openers
Broadway, Toledo, IA 52342	42-1229218	501(C)(3)	\$10,000 00	General Charitable Support
Mercy Medical Center, 308 North Maple Ave., New				General Charkable Support
Hampton, IA 50659	31-1373080	501(C)(3)	\$8,178 16	Fetal monitoring equipment
Mid-lowa Community Action, Inc., 1001 South 18th				Tetal monitoring equipment
St., Marshalltown, IA 50158	42-0923311	501(C)(3)	\$1,500.00	Start Sooner, Stay Longer, Keep Learning
Mid-lowa Community Action, Inc., 1001 South 18th				Start Sourier, Stay Longer, Acep Learning
St., Marshalltown, IA 50158	42-0923311	501(C)(3)	\$6,000.00	General Charitable Support
Nora Springs Farm Fire Service Company, Box 531,	-			General Chantable Support
Nora Springs, IA 50458	42-1089864	501(C)(3)	\$3,000.00	Bunker Gear for Firefighters
Nora Springs Farm Fire Service Company, Box 531,				bunker Gear for Firefighters
Nora Springs, IA 50458	42-1089864	501(C)(3)	\$3,000 00	Volunteer Ambulance- Retaining Wall project
North Benton Ambulance Service, 704 W 4th Street,				Volunteer Ambulance- Netaining wan project
Vinton, IA 52349	42-0951300	501(C)(3)	\$6,000.00	Cardiac 12-lead monitor acquisition
North Star Community Services, 3420 University				Cardiac 12-lead illollitor acquisition
Avenue, Waterloo, IA 50701	42-1038039	501(C)(3)	\$370.00	General Charitable Support
North Star Community Services, 3420 University			-	General Charkague Support
Avenue, Waterloo, IA 50701	42-1038039	501(C)(3)	\$395.00	General Charitable Support of Waverly Services
North Star Community Services, 3420 University				General Charitable Support of Waverry Services
Avenue, Waterloo, IA 50701	42-1038039	501(C)(3)	\$710 00	Transportation Sponsorships
North Star Community Services, 3420 University				Transportation apprisoration
Avenue, Waterloo, IA 50701	42-1038039	501(C)(3)	\$1,000 00	Newel Post Adult Day Care Sponsorship Project
North Star Community Services, 3420 University		 -		New Control of New Control of Con
Avenue, Waterloo, IA 50701	42-1038039	501(C)(3)	\$1,118.00	General Charitable Support
North Star Community Services, 3420 University	l			Waverly Center Health and Safety Project - outdoor fence, bed repairs,
Avenue, Waterloo, IA 50701	42-1038039	501(C)(3)	\$2,500.00	wheeled recliner, defibrillator
North Star Community Services, 3420 University				- Micela remit, della mata
Avenue, Waterloo, IA 50701	42-1038039	501(C)(3)	\$6,000.00	Newel Post Sponsorship and "Opening Doors" Accessibility Project
Northeast Iowa Center for Independent Living, PO Box	 	-		The tract of opening and opening boots recessionly reject
Waterloo, IA 50704	42-1452251	501(C)(3)	\$	Prime Time Pass
Northeast Iowa Food Bank, PO Box 2397, Waterloo, IA			 -	Time time tass
50704	42-1169648	501(C)(3)	\$35 49	Food for December 2009
Northeast Iowa Food Bank, PO Box 2397, Waterloo, IA	 		<u> </u>	1000 tot occumber 2005
50704	42-1169648	501(C)(3)	\$35 49	Food for January 2010
Northeast Iowa Food Bank, PO Box 2397, Waterloo, IA				1 1000 for January 2010
50704	42-1169648	501(C)(3)	\$76.23	Food for November 2009
Northeast Iowa Food Bank, PO Box 2397, Waterloo, IA				TOOL 101 NOVEMBER 2003
150704	42-1169648	501(C)(3)	\$178 31	Food for February, March and April 2010
Northeast Iowa Food Bank, PO Box 2397, Waterloo, IA	 		 	1 000 for represely, Waren and April 2010
50704	42-1169648	501(C)(3)	\$198.79	Food for May 2010
Northeast Iowa Food Bank, PO Box 2397, Waterloo, IA	 		 	1000101 (114) 2020
50704	42-1169648	501(C)(3)	\$500 00	Operation Family Pack in Butler County
Northeast Iowa Food Bank, PO Box 2397, Waterloo, IA	 		 	Operation Family Fack III Duties County
50704	42-1169648	501(C)(3)	\$1,000 00	Operation Family Pack
	L	·		1 Joperation Fairing Fack 20

Northeast Iowa Food Bank, PO Box 2397, Waterloo, IA 50704	42-1169648	501(C)(3)	\$1,000.00	Back Pack program (formerly Operation Family Pack) - sends shelf-safe, kid- friendly, healthy food home with students
Northeast Iowa Food Bank, PO Box 2397, Waterloo, IA 50704	42-1169648	501(C)(3)	\$1,000.00	
Northeast Iowa Food Bank, PO Box 2397, Waterloo, IA 50704	42-1169648	501(C)(3)	\$1,000.00	Mobile Food Pantry
Northeast Iowa Food Bank, PO Box 2397, Waterloo, IA	42-1169648	501(C)(3)	\$1,300.00	BackPack Program
50704 Northeast Iowa Food Bank, PO Box 2397, Waterloo, IA	42-1169648		63,000,00	Capital Campaign
50704 Northeast Iowa Food Bank, PO Box 2397, Waterloo, IA	· · · · · · · · · · · · · · · · · · ·	501(C)(3)	\$2,000 00	Kıds Cafe'
50704	42-1169648	501(C)(3)	\$3,000.00	Capital Campaign project
Northeast Iowa Food Bank, PO Box 2397, Waterloo, IA 50704	42-1169648	501(C)(3)	\$3,788 00	Waverly area services
Northeast Iowa Food Bank, PO Box 2397, Waterloo, IA 50704	42-1169648	501(C)(3)	\$4,000.00	Operation Family Pack in Winnshiek County
Northeast Iowa Medical Education Foundation, 2055 Kimball Ave., Suite 101, Waterloo, IA 50702-5047	42-1058745	501(C)(3)	\$1,255.00	Annual distribution from the Agency Endowment Fund - General Charitable Support
Northeast Iowa Medical Education Foundation, 2055 Kimball Ave., Suite 101, Waterloo, IA 50702-5047	42-1058745	501(C)(3)	\$4,900.00	Colonoscope purchase
Northeast Iowa Medical Education Foundation, 2055 Kimbali Ave., Suite 101, Waterloo, IA 50702-5047	42-1058745	501(C)(3)	\$7,290.00	Reimbursement for Canon IR 3230
Northeast Iowa Medical Education Foundation, 2055 Kimbali Ave., Suite 101, Waterloo, IA 50702-5047	42-1058745	501(C)(3)	\$13,950 98	Reimbursement for Hematology Analyzer and Sysmex Pochi interface
Northeast Iowa Medical Education Foundation, 2055 Kimball Ave., Suite 101, Waterloo, IA 50702-5047	42-1058745	501(C)(3)	\$42,839.10	Residency program expenses
Northeast Iowa Resource Conservation & Development, 101 E. Greene, Postville, IA 52162	42-1309260	501(C)(3)	\$10,000.00	Fayette County Trails project - Phase 1
Operation Threshold, PO Box 4120 405 Chestnut St., Waterloo, IA 50704	42-0982549	501(C)(3)	\$265.82	From the Heart program expenses
Operation Threshold, PO Box 4120 405 Chestnut St , Waterloo, IA 50704	42-0982549	501(C)(3)	\$529.00	Food Pantry in Grundy County
Operation Threshold, PO Box 4120 405 Chestnut St., Waterloo, IA 50704	42-0982549	501(C)(3)	\$750.00	Nest Programs- 400 early childhood books
Operation Threshold, PO Box 4120 405 Chestnut St , Waterloo, IA 50704	42-0982549	501(C)(3)	\$1,000.00	Stork's Nest
Operation Threshold, PO Box 4120 405 Chestnut St., Waterloo, IA 50704	42-0982549	501(C)(3)	\$1,000.00	Buchanan County Share the Warmth - provides winter coats for low income and individuals in need of winter coats
Operation Threshold, PO Box 4120 405 Chestnut St., Waterloo, IA 50704	42-0982549	501(C)(3)	\$1,000 00	Operation Santa Claus
Operation Threshold, PO Box 4120 405 Chestnut St., Waterloo, IA 50704	42-0982549	501(C)(3)	\$1,027.03	From the Heart Program Expense
Operation Threshold, PO Box 4120 405 Chestnut St., Waterloo, IA 50704	42-0982549	501(C)(3)	\$1,250.00	Holiday Projects
Operation Threshold, PO Box 4120 405 Chestnut St., Waterloo, IA 50704	42-0982549	501(C)(3)	\$1,500 00	Homeless Prevention/Crisis Intervention

Operation Threshold, PO Box 4120 405 Chestnut St , Waterloo, IA 50704	42-0982549	501(C)(3)	\$1,894 52	
Operation Threshold, PO Box 4120 405 Chestnut St.,				Reimbursement for From the Heart 2010 Program Expenses
Waterloo, IA 50704	42-0982549	501(C)(3)	\$2,431.43	From the Heart Program Expenses
Operation Threshold, PO Box 4120 405 Chestnut St.,	42-0982549	501/CV2\	¢2 574 41	8
Waterloo, IA 50704	42-0382343	501(C)(3)	\$2,574.41	Reimbursement for From the Heart Program Expenses
Operation Threshold, PO Box 4120 405 Chestnut St.,	42-0982549	501(C)(3)	\$4,444 03	Rent/Space Assistance on Temporary Agency Office Location due to Flood
Waterloo, IA 50704		(-)(-)	7 1,111 02	Recovery (approx. 1 month of expenses)
Operation Threshold, PO Box 4120 405 Chestnut St., Waterloo, IA 50704	42-0982549	501(C)(3)	\$5,625.54	
Operation Threshold, PO Box 4120 405 Chestnut St.,				From the Heart Program expenses 2010
Waterloo, IA 50704	42-0982549	501(C)(3)	\$7,000.00	Housing & Fair Lending Counseling program
Operation Threshold, PO Box 4120 405 Chestnut St.,	40.00000			Trousing & Fair Lending Courseinig program
Waterloo, IA 50704	42-0982549	501(C)(3)	\$12,491 22	From the Heart Program expenses
Operation Threshold, PO Box 4120 405 Chestnut St.,	42-0982549	E01(C)(2)	\$16,000,60	
Waterloo, IA 50704	42-0382343	501(C)(3)	\$16,988 68	From the Heart program expenses
Operation Threshold, PO Box 4120 405 Chestnut St.,	42-0982549	501(C)(3)	\$19,984.19	
Waterloo, IA 50704				Reimbursement for 2010From the Heart program expenses
Operation Threshold, PO Box 4120 405 Chestnut St., Waterloo, IA 50704	42-0982549	501(C)(3)	\$30,000 00	Contract payment for July 1, 2009 - June 30, 2010 - two 6-month periods for
Operation Warm, 1653 Brintons Bridge Road, Chads				OT Career Mentoring Role and asset building
Ford, PA 19317	37-3663310	501(C)(3)	\$7,898.66	To purchase seats for Codes Valley shildren in pood
Parkersburg Historical Society, 401 5th St. PO Box 142,		·		To purchase coats for Cedar Valley children in need
Parkersburg, IA 50665	42-1161034	501(C)(3)	\$5,000.00	Boiler Replacement
	42.0707447	504/6)(2)	40.000.00	
Quakerdale, PO Box 8, New Providence, IA 50206	42-0707117	501(C)(3)	\$9,382 00	General Charitable Support
Regional Health Services of Howard County, 235 8th	42-1021780	501(C)(3)	\$2,000.00	
Avenue West, Cresco, IA 52136			\$2,000.00	Lime Springs Clinic- sidewalk repair
Regional Health Services of Howard County, 235 8th	42-1021780	501(C)(3)	\$2,100.00	
Avenue West, Cresco, IA 52136 Regional Health Services of Howard County, 235 8th	-			Community Health Services- Tetanus Immunization Initiative
Avenue West, Cresco, IA 52136	42-1021780	501(C)(3)	\$2,125.00	Ambulance Department Education
Salvation Army, PO Box 867 89 Franklin St., Waterloo,				Ambulance Department- Education
IA 50704	36-2167910	501(C)(3)	\$185.00	General Charitable Support
Salvation Army, PO Box 867 89 Franklin St., Waterloo,	36-2167910	F01/CV2)	¢500.00	
IA 50704	36-216/910	501(C)(3)	\$500.00	General charitable support
Salvation Army, PO Box 867 89 Franklin St., Waterloo,	36-2167910	501(C)(3)	\$500.00	
IA 50704		301(0)(3)	\$500.00	Sponsorship of Roy Adams Seminar for professional advisors
Salvation Army, PO Box 867 89 Franklin St., Waterloo,	36-2167910	501(C)(3)	\$1,118.00	
IA 50704 Salvation Army, PO Box 867 89 Franklin St., Waterloo,				General Charitable Support
IA 50704	36-2167910	501(C)(3)	\$5,000 00	D-state
Scarville Firemen's Association, 103 E. 2nd St. PO Box				Reception area renovation
76, Scarville, IA 50473	26-3612991	501(C)(3)	\$10,291.00	Replace tanker truck
Sheffield Little League Association, Inc., 915	43 4350555	504/07/27	640.000.00	TOPICS CONTROL AND AND AND AND AND AND AND AND AND AND
Thompson Street, Sheffield, IA 50475	42-1380355	501(C)(3)	\$10,000 00	Sheffield Little League Diamonds project
Social Action Inc., 227 Madison St., Waterloo, IA	74-3084863	501(C)(3)	\$1,000 00	
50703	, 4-3004003	301(0)(3)	31,000 00	Talk Shop Cafe - Youth Outreach
Social Action Inc., 227 Madison St., Waterloo, IA	74-3084863	501(C)(3)	\$5,000.00	
St. Francis do Salos Parrich, 420 5, Maio, Occion, IA		1-/1-/		Social & Recreational Activities for Disadvantaged Youth
St. Francis de Sales Parrish, 420 E. Main, Ossian, IA 52161	42-0680343	501(C)(3)	\$320 50	Conoral Chartable Support
		····	L	General Charitable Support

St. Francis de Sales Parrish, 420 E. Main, Ossian, IA			4	
52161	42-0680343	501(C)(3)	\$7,000.00	Knights of Columbus Ossian- Heating & Cooling replacement on building
				Transfer of Floyd County Floods & Embrace Iowa Funds to Floyd County Long
St. John Evangelical Lutheran Church, 200 South Main	42-0819458	501(C)(3)	\$25,437.13	Term Recovery Team for meeting remaining Floods of 2008 needs and future
Street, Charles City, IA 50616		(-)(-)	V-0, 1011-0	disaster needs in Floyd County
St. John Evangelical Lutheran Church, 200 South Main				ususter needs in roya county
Street, Charles City, IA 50616	42-0819458	501(C)(3)	\$326.00	Reimbursement for flood recovery services - purchase of sofa
St John Evangelical Lutheran Church, 200 South Main	ļ			Remodracment for nood recovery services - parchase or sora
Street, Charles City, IA 50616	42-0819458	501(C)(3)	\$500.00	Downburg are at facilities of a good account of the state
St. John Evangelical Lutheran Church, 200 South Main				Reimbursement for flood recovery services - plumbing and heating bill
Street, Charles City, IA 50616	42-0819458	501(C)(3)	\$500 00	Combussion of facilities and an arrangement of the second design
St. John Evangelical Lutheran Church, 200 South Main		-		Reimbursement for flood recovery services - washer and dryer
Street, Charles City, IA 50616	42-0819458	501(C)(3)	\$600 00	Downton of God and American Control of Contr
St John Evangelical Lutheran Church, 200 South Main				Reimbursement for flood recovery services - purchase of washing machine
_	42-0819458	501(C)(3)	\$1,000.00	
Street, Charles City, IA 50616				Reimbursement for flood recovery services- utilities for flood victims
St John Evangelical Lutheran Church, 200 South Main	42-0819458	501(C)(3)	\$1,331.04	
Street, Charles City, IA 50616	ļ			Reimbursement for flood recovery services - appliances
St. John Evangelical Lutheran Church, 200 South Main	42-0819458	501(C)(3)	\$1,437 48	Reimbursement for flood recovery services-repaired flooring in basement
Street, Charles City, IA 50616		. , , , ,	. ,	bathroom
St. Vincent DePaul, 320 Broadway St , Waterloo, IA	42-0801845	501(C)(3)	\$10,600.00	
50703			4 = 0,000	General charitable support
Tama County Day Care- Kids' Corner, 403 W.	42-1157747	501(C)(3)	\$5,190.00	
Commercial St., Toledo, IA 52342			\$5,250.00	General Charitable Support
The Learning Center, 404 N. Jackson St., Charles City,	42-1508110	501(C)(3)	\$6,000.00	
IA 50616	42-1300110	301(0)(3)	\$0,000.00	Professional Development
The Old Creamery Theatre Co., 39 38th Ave., Amana,	42-0985212	501(C)(3)	\$8,000.00	
IA 52203	42-0303212	301(0)(3)	38,000.00	Roof and ceiling repair
Together for Youth/Allen Women's Health, 233 Vold	42-0698265	501(C)(3)	\$750.00	
Drive, Waterloo, IA 50703	42-0038203	301(0)(3)	\$730.00	Young Parents Together- 150 early childhood books
Together for Youth/Allen Women's Health, 233 Vold	42-0698265	E01(C)(2)	\$1,000.00	
Drive, Waterloo, IA 50703	42-0098203	501(C)(3)	\$1,000.00	Young Parents Together
Together for Youth/Allen Women's Health, 233 Vold	43 0000300	F01/C)(2)	¢13 500 00	
Drive, Waterloo, IA 50703	42-0698265	501(C)(3)	\$12,500.00	Community Health Education
Toledo Community Theatre Guild, 120 E. High St.,	42 2046525	504(5)(2)	40.500.24	
Toledo, IA 52342	42-0846505	501(C)(3)	\$9,500.31	Weiting Theatre and Opera House - Restoration and Renovation project
University of Northern Iowa Foundation, 205				Waterloo Rotary- Fred Adams/Youth Activity Scholarship for Lynnae
Commons, Cedar Falls, IA 50614-0282	42-6058591	501(C)(3)	\$	McNamee SS#
University of Northern Iowa Foundation, 205				2010 Community Foundation Opportunity Scholarship for Haley Patterson
Commons, Cedar Falls, IA 50614-0282	42-6058591	501(C)(3)	\$1,000 00	SS# [,]
University of Northern Iowa Foundation, 205	 			' ' ' ' '
Commons, Cedar Falls, IA 50614-0282	42-6058591	501(C)(3)	\$	
University of Northern Iowa Foundation, 205		····-	 	
Commons, Cedar Falls, IA 50614-0282	42-6058591	501(C)(3)	\$2,616 00	1/2 to the Fleming Sisters Early Childhood Education
University of Northern Iowa Foundation, 205				1/2 to the retining sisters early emissioned education
Commons, Cedar Falls, IA 50614-0282	42-6058591	501(C)(3)	\$2,800.00	UNI Department of Theatre/Sturgis Youth Theatre- Imagine the Possibilities
University of Northern Iowa Foundation, 205	 		 	ON Department of Theatre/Storgis Touth Theatre- imagine the Possibilities
Commons, Cedar Falls, IA 50614-0282	42-6058591	501(C)(3)	\$3,100.00	Hinson Scholarships- Emily Cornish (oboe) and Michael Sturgeon (cello)
	 		 	minson scholarships- emily Cornish (oboe) and wichael sturgeon (cello)
Valley Lutheran High School, 4520 Rownd Street,	42-1485212	501(C)(3)	\$3,854.00	Annual Distribution for the State of the Comment Charles of the Charles of the Comment Charles of the Comment Charles of the Charles of the Comment Charles of the Charle
Cedar Falls, IA 50613	 	ļ	 	Annual Distribution from the Endowment Fund- General Charitable Support
Valley Lutheran High School, 4520 Rownd Street,	42-1485212	501(C)(3)	\$3,926.00	Annual Distribution from the Agency Endowment Fund - General Charitable
Cedar Falls, IA 50613	<u> </u>	l	I	Support

Virginia Gay Hospital, SO2 N 9th Ave, Vinton, IA 52349	42-1231996	501(C)(3)	\$8,000.00	Simulation Education - delivering quality healthcare to Benton Countý
Wartburg College, 222 Ninth St. NW, Waverly, IA 50677-0903	42-0680351	501(C)(3)	\$1,764.00	General Charitable Support
Wartburg College- Financial Aid Office, 222 Ninth St NW, Waverly, IA 50677-0903	42-0680351	501(C)(3)	\$	Black Hawk County Vietnam Veterans' Scholarship for Brianna Becker
Wartburg College- Financial Aid Office, 222 Ninth St NW, Waverly, IA 50677-0903	42-0680351	501(C)(3)	\$250 00	2010 Union Community Scholarship (Clarence & Eleanor Kavalier Award) for Megan Clark SS#
Wartburg College- Financial Aid Office, 222 Ninth St NW, Waverly, IA 50677-0903	42-0680351	501(C)(3)	\$	Union Community Scholarship (American Lutheran Women Award) for Lauren Bauer SS#
Wartburg College- Financial Aid Office, 222 Ninth St NW, Waverly, IA 50677-0903	42-0680351	501(C)(3)	\$300 00	2010 Union Community Scholarship (Pipho Family Dentistry Award) for Ashley Hager SS#
Wartburg College- Financial Aid Office, 222 Ninth St. NW, Waverly, IA 50677-0903	42-0680351	501(C)(3)	\$	Union Community Scholarship (Dr. Albert C. Hindman Award) for Weston Hennings SS#
Wartburg College- Financial Aid Office, 222 Ninth St. NW, Waverly, IA 50677-0903	42-0680351	501(C)(3)	\$	Union Community Scholarship (Advocare "We Build Champions" Athlete Award) for Megan Clark SS#
Wartburg College- Financial Aid Office, 222 Ninth St. NW, Waverly, IA 50677-0903	42-0680351	501(C)(3)	\$1,000.00	2010 Marjorie F Laubscher Scholarship for Levie Zummak SS#
Wartburg College- Financial Aid Office, 222 Ninth St NW, Waverly, IA 50677-0903	42-0680351	501(C)(3)	\$	Louise Vincent Conklin & Robert Conklin Scholarship for Megan Clark SS#
Wartburg College- Financial Aid Office, 222 Ninth St. NW, Waverly, IA 50677-0903	42-0680351	501(C)(3)	\$1,000.00	2010 M. Elizabeth Naebers Scholarship for Shannon VanEe SS#
Wartburg College- Financial Aid Office, 222 Ninth St. NW, Waverly, IA 50677-0903	42-0680351	501(C)(3)	\$	James W & Jvone E Maxwell Memorial Scholarship for Edward Diemer
Wartburg College- Financial Aid Office, 222 Ninth St. NW, Waverly, IA 50677-0903	42-0680351	501(C)(3)	\$1,000.00	2010 Marjorie F Laubscher Scholarship for Megan Dunn SS#
Wartburg College- Financial Aid Office, 222 Ninth St. NW, Waverly, IA 50677-0903	42-0680351	501(C)(3)	\$1,500.00	2010 Grant Wheeler Memorial Scholarship for Emily Rogers SS#
Waterloo Community Playhouse, PO Box 433, Waterloo, IA 50704	42-6018117	501(C)(3)	\$1,118.00	General Charitable Support
Waterloo Community Playhouse, PO Box 433, Waterloo, IA 50704	42-6018117	501(C)(3)	\$3,000.00	Operational Support
Waterloo Community Playhouse, PO Box 433, Waterloo, IA 50704	42-6018117	501(C)(3)	\$5,329.00	Upkeep & Maintenance on the Walker Building
Waterloo Community Playhouse, PO Box 433, Waterloo, IA 50704	42-6018117	501(C)(3)	\$5,549 00	Upkeep and Maintenance on the Walker Building
Waterloo Community Playhouse, PO Box 433, Waterloo, IA 50704	42-6018117	501(C)(3)	\$6,100.00	Annual distribution from the Agency Endowment Fund - General charitable support
Waterloo Community Playhouse, PO Box 433, Waterloo, IA 50704	42-6018117	501(C)(3)	\$15,000.00	Ticketing System (\$10,000) and Dollar for Drama Program (\$5,000)
Waterloo Community Schools Foundation, PO Box 1896, Waterloo, IA 50704	42-1364293	501(C)(3)	\$7,500 00	General Charitable Support
Waterloo/Cedar Falls Dollars for Scholars, PO Box 23, Waterloo, IA 50704	42-1743066	501(C)(3)	\$2,000 00	2010 Scholarships for 2 students
Waterloo/Cedar Falls Dollars for Scholars, PO Box 23, Waterloo, IA 50704	42-1743066	501(C)(3)	\$3,000 00	2010 Scholarships for 3 West High students
Waterloo-Cedar Falls Symphony Orchestra, Gallagher- Bluedorn PAC 17, Cedar Falls, IA 50614-0803	42-0766745	501(C)(3)	\$218.00	General Charitable Support
Waterloo-Cedar Falls Symphony Orchestra, Gallagher- Bluedorn PAC 17, Cedar Falls, IA 50614-0803	42-0766745	501(C)(3)	\$712.50	General Charitable Support

Waterloo-Cedar Falls Symphony Orchestra, Gallagher- Bluedorn PAC 17, Cedar Falls, IA 50614-0803	42-0766745	501(C)(3)	\$1,105.00	General Charitable Support
Waterloo-Cedar Falls Symphony Orchestra, Gallagher- Bluedorn PAC 17, Cedar Falls, IA 50614-0803	42-0766745	501(C)(3)	\$1,250 00	Sponsorship of Lollipop Concerts
Waterloo-Cedar Falls Symphony Orchestra, Gallagher- Bluedorn PAC 17, Cedar Falls, IA 50614-0803	42-0766745	501(C)(3)	\$1,278.00	General Charitable Support
Waterloo-Cedar Falls Symphony Orchestra, Gallagher- Bluedorn PAC 17, Cedar Falls, IA 50614-0803	42-0766745	501(C)(3)	\$2,000.00	General Charitable Support
Waterloo-Cedar Falls Symphony Orchestra, Gallagher- Bluedorn PAC 17, Cedar Falls, IA 50614-0803	42-0766745	501(C)(3)	\$2,500 00	Annual Fund
Waterloo-Cedar Falls Symphony Orchestra, Gallagher- Bluedorn PAC 17, Cedar Falls, IA 50614-0803	42-0766745	501(C)(3)	\$4,100 00	Hinson Oboe Chair
Waterloo-Cedar Falls Symphony Orchestra, Gallagher- Bluedorn PAC 17, Cedar Falls, IA 50614-0803	42-0766745	501(C)(3)	\$13,500.00	2011 Youth Concerts
Waterloo-Cedar Falls Symphony Orchestra, Gallagher- Bluedorn PAC 17, Cedar Falls, IA 50614-0803	42-0766745	501(C)(3)	\$19,364.00	Semi-Annual Distribution from the Endowment Fund- General Charitable Support
Waterloo-Cedar Falls Symphony Orchestra, Gallagher- Bluedorn PAC 17, Cedar Falls, IA 50614-0803	42-0766745	501(C)(3)	\$20,944.00	Semi-annual distribution from the Agency Endowment Fund-General Charitable Support
Winnebago Council of Boy Scouts, 2929 Airport Blvd., Waterloo, IA 50703	42-0985053	501(C)(3)	\$246 00	General Charitable Support of Black Hawk County
Winnebago Council of Boy Scouts, 2929 Airport Blvd., Waterloo, IA 50703	42-0985053	501(C)(3)	\$370.00	General Charitable Support of Black Hawk County
Winnebago Council of Boy Scouts, 2929 Airport Blvd., Waterloo, IA 50703	42-0985053	501(C)(3)	\$1,000.00	General Charitable Support
Winnebago Council of Boy Scouts, 2929 Airport Blvd., Waterloo, IA 50703	42-0985053	501(C)(3)	\$2,500 00	General Charitable Support
Winnebago Council of Boy Scouts, 2929 Airport Blvd., Waterloo, IA 50703	42-0985053	501(C)(3)	\$3,791.00	Horse Arena remodeled at Camp Ingawanis- Fencing
Winnebago Council of Boy Scouts, 2929 Airport Blvd., Waterloo, IA 50703	42-0985053	501(C)(3)	\$4,500 00	Updating electrical service to pool & shower building
Woods Quality Center, Inc, 1030 5th Ave. SE, Suite 2700, Cedar Rapids, IA 52403	42-1442125	501(C)(3)	\$2,000.00	Workplace Learning Connection- A Butcher, a Baker, a Candlestick Maker Who can help me decide?
Woods Quality Center, Inc, 1030 5th Ave. SE, Suite 2700, Cedar Rapids, IA 52403	42-1442125	501(C)(3)	\$6,795.00	Workplace Learning Connection - Butcher, Baker, Candlestick Maker. Who Can Help Me Decide?
Young Parents Network, 205-12th Street SE, Cedar Rapids, IA 52403	42-1355480	501(C)(3)	\$5,000.00	YPN Prenatal/Prental Support meetings
YWCA of Black Hawk County, 425 Lafayette St., Waterloo, IA 50703	42-0680302	501(C)(3)	\$2,328.00	AED Trainer, CPR Manikins, Pool stairs
YWCA of Black Hawk County, 425 Lafayette St., Waterloo, IA 50703	42-0680302	501(C)(3)	\$15,000 00	Case Management Services for Latinos in the Cedar Valley (the work of El Centro Latinoamericano)
Benton Development Group,303-1st Avenue, Vinton, IA 52349	42-1347303	501(c)(4)	\$3,850 00	BCCF operational reimbursement for 2008 to Benton Development Group

0.1.0.0.00.1				
Benton Development Group,303-1st Avenue, Vinton, IA 52349	42-1347303	501(c)(4)	\$4,539.59	Contract Payment to Benton Development Group for BCCF services and supplies
Benton Development Group,303-1st Avenue, Vinton, IA 52349	42-1347303	501(c)(4)	\$6,580.00	BCCF operational reimbursement for 2009 to Benton Development Group
Hartwick Volunteer Firefighters, 204 Main St , Hartwick, IA 52232	42-6079408	501(C)(4)	\$6,000.00	Volunteer Fire Dept - for 6 sets of turnout gear
Franklin County Fair Board, P O Box 442, Hampton, IA 50441	42-0260495	501(C)(5)	\$6,400.00	Repair of Case steam engine
Greater Cedar Valley Chamber of Commerce -		· · · · · · · · · · · · · · · · · · ·		hepair of case steam engine
Waterloo, 10 West 4th Street, Suite 310, Waterloo, IA 50701	42-0172610	501(C)(6)	\$5,950 00	Remibursement for Chamber Website updates Creation of Special Events page, Discounts page, Modification of the Member Directory pages
Kossuth County Economic Development, 106 South Dodge St , Algona, IA 50511	42-1463607	501(C)(6)	\$12 00	KCCF Chair, Kirk Hayes' meal at KCEDC County Wide breakfast
Kossuth County Economic Development, 106 South Dodge St., Algona, IA 50511	42-1463607	501(C)(6)	\$30 60	Copier charges Jan-June 2010
Kossuth County Economic Development, 106 South Dodge St , Algona, IA 50511	42-1463607	501(C)(6)	\$96.04	Reimbursement to KCEDC for KCCF expenses Copier charges and updating website
Kossuth County Economic Development, 106 South Dodge St., Algona, IA 50511	42-1463607	501(C)(6)	\$1,500.00	Folding Maching
Kossuth County Economic Development, 106 South Dodge St., Algona, IA 50511	42-1463607	501(C)(6)	\$3,500 00	Industrial Park marketing booklets
Lake Mills Chamber Development Corp, 203 N 1st Avenue West, Lake Mills, IA 50450	42-1116685	501(C)(6)	\$560 00	Reimburse LMCDC for WCCF website updates & maintenance
Lake Mills Chamber Development Corp, 203 N 1st Avenue West, Lake Mills, IA 50450	42-1116685	501(C)(6)	\$10,000.00	Marketing for industry & business
Winneshiek County Development, Inc , PO Box 288, Decorah, IA 52101	42-1389522	501(C)(6)	\$93.36	Reimbursement for Copies for WCCF
Winneshiek County Development, Inc., PO Box 288, Decorah, IA 52101	42-1389522	501(C)(6)	\$525.00	Administrative Assistant Contracted Services for December 2009
Winneshiek County Development, Inc., PO Box 288, Decorah, IA 52101	42-1389522	501(C)(6)	\$525.00	Administrative Assistant Contract payment for Jan 2010
Winneshiek County Development, Inc., PO Box 288, Decorah, IA 52101	42-1389522	501(C)(6)	\$575.00	Contract payment for administrative assistant wages for Feb 2010
Winneshiek County Development, Inc., PO Box 288, Decorah, IA 52101	42-1389522	501(C)(6)	\$575.00	Contract payment for WCCF administrative support- September 2010
Winneshiek County Development, Inc., PO Box 288, Decorah, IA 52101	42-1389522	501(C)(6)	\$575.00	Contract payment for Oct. 2010
Winneshiek County Development, Inc., PO Box 288, Decorah, IA 52101	42-1389522	501(C)(6)	\$575 00	Contract payment (November 2010)
Winneshiek County Development, Inc., PO Box 288, Decorah, IA 52101	42-1389522	501(C)(6)	\$1,150 00	Contract payment for Adminstrative Assistant (March and April)
Winneshiek County Development, Inc., PO Box 288, Decorah, iA 52101	42-1389522	501(C)(6)	\$1,150 00	Contract payment for Adminstrative Asst support (May and June)
Winneshiek County Development, Inc., PO Box 288, Decorah, IA 52101	42-1389522	501(C)(6)	\$1,150 00	Contract Payment (July-August 2010)
Chickasaw Township Fire District, 301 West Main, Ionia, IA 50645	42-6148123	501(C)4)	\$5,000.00	Ionia Volunteer Fire Department- Mini pumper/first responder/grass fire vehicle
4C's Consulting, 1408 Oakcrest Ave., Waterloo, IA 50701	02-0809971	Business	\$2,500 00	Contract payment for January 2010
4C's Consulting, 1408 Oakcrest Ave , Waterloo, IA 50701	02-0809971	Business	\$2,500.00	Contract payment for 4C's Consulting - February 2010 work

4Cl- C				
4C's Consulting, 1408 Oakcrest Ave., Waterloo, IA 50701	02-0809971	Business	\$2,500.00	Contract payment for 4C's Consulting work - February 2010
4C's Consulting, 1408 Oakcrest Ave., Waterloo, IA 50701	02-0809971	Business	\$2,500 00	Contract payment for Four Cs Consulting work for March 2010
4C's Consulting, 1408 Oakcrest Ave , Waterloo, IA 50701	02-0809971	Business	\$2,500.00	Contract payment for 4C's Consulting work - April 2010
Baker & Taylor, Inc., PO Box 277930, Atlanta, GA 30384-7930	56-1761729	Business	\$54.30	Adult print
Baker & Taylor, Inc , PO Box 277930, Atlanta, GA 30384-7930	56-1761729	Business	\$140.73	
Baker & Taylor, Inc., PO Box 277930, Atlanta, GA 30384-7930	56-1761729	Business	\$147 75	Adult print Adult print
Baker & Taylor, Inc , PO Box 277930, Atlanta, GA 30384-7930	56-1761729	Business	\$239 54	Adult print
Baker & Taylor, Inc., PO Box 277930, Atlanta, GA 30384-7930	56-1761729	Business	\$299.65	Teen music CD, Spanish music CD
Baker & Taylor, Inc., PO Box 277930, Atlanta, GA 30384-7930	56-1761729	Business	\$801.92	Adult print
Baker & Taylor, Inc., PO Box 277930, Atlanta, GA 30384-7930	56-1761729	Business	\$914 84	Adult print
Baker & Taylor, Inc., PO Box 277930, Atlanta, GA 30384-7930	56-1761729	Business	\$957 22	Adult print
Baker & Taylor, Inc., PO Box 277930, Atlanta, GA 30384-7930	56-1761729	Business	\$1,184.65	Adult print/books
Baker & Taylor, Inc., PO Box 277930, Atlanta, GA 30384-7930	56-1761729	Business	\$3,368.20	Adult print
Baker & Taylor, Inc., PO Box 277930, Atlanta, GA 30384-7930	56-1761729	Business	\$4,908.78	Adult print
Baker & Taylor, Inc., PO Box 277930, Atlanta, GA 30384-7930	56-1761729	Business	\$31 06	Adult and teen DVD
Baker & Taylor, Inc., PO Box 277930, Atlanta, GA 30384-7930	56-1761729	Business	\$240.35	Adult print
Community Renaissance Group, 2335 Oak Hill Road, Decorah, IA 52101		Business	\$360.03	June 2010 Affilliate Pilot program work
Community Renaissance Group, 2335 Oak Hill Road, Decorah, IA 52101		Business	\$1,120.50	Affiliate Pilot Project Contract Payment May 2010
Community Renaissance Group, 2335 Oak Hill Road, Decorah, IA 52101		Business	\$1,176.53	March 2010 Pilot Project contract payment for work with affiliates
Community Renaissance Group, 2335 Oak Hill Road, Decorah, IA 52101		Business	\$1,292.36	January 2010 affiliate pilot program work
Community Renaissance Group, 2335 Oak Hill Road, Decorah, IA 52101		Business	\$1,324.26	February 2010 Affiliate Pilot Program work
Community Renaissance Group, 2335 Oak Hill Road, Decorah, IA 52101		Business	\$1,366.94	April 2010 affiliate pilot program work
Dell Marketing LP, PO Box 802816, Chicago, IL 60680- 2816	74-2616805	Business	\$8,060 66	Eight computers and one notebook computer for youth department
Recorded Books, LLC, PO Box 64900, Baltimore, MD 21264-4900	13-4077163	Business	\$272 14	Teen book on CD
Recorded Books, LLC, PO Box 64900, Baltimore, MD 21264-4900	13-4077163	Business	\$5,033.27	OneClick Audio (downloadable books), teen books on CD
Northwestern Mutual Life Insurance, PO Box 3007, Milwaukee, WI 53201-3007	39-0509570	Business	\$255 34	Premium on policy insuring the life of Pauline Barrett - due June 16, 2010
11111111111111111111111111111111111111	1	,	1	1 Premium on policy insuring the life of Fauline partett - due Julie 16, 2010

- -

[N				
Northwestern Mutual Life Insurance, PO Box 3007, Milwaukee, WI 53201-3007	39-0509570	Business	\$762 85	Payment for premium on policy insuring Charles Dalton which CFNEIA is beneficiary
Northwestern Mutual Life Insurance, PO Box 3007, Milwaukee, WI 53201-3007	39-0509570	Business	\$868 20	Payment of premium on policy insuring Lois Fettkether with CFNEIA as beneficiary
Northwestern Mutual Life Insurance, PO Box 3007,	20.0500570		****	Annual premium for policy insuring life of David Happel which names CFNEIA
Milwaukee, WI 53201-3007	39-0509570	Business	\$905 00	as beneficiary
Northwestern Mutual Life Insurance, PO Box 3007,	39-0509570	Business	\$1,496 00	Insurance premium on policy insuring Larry Betts, benefitting the Community
Milwaukee, WI 53201-3007			V2,130 00	Foundation
Northwestern Mutual Life Insurance, PO Box 3007, Milwaukee, WI 53201-3007	39-0509570	Business	\$2,500 01	Payment of life insurance premium on life of Thomas Taiber
Northwestern Mutual Life Insurance, PO Box 3007.		······································		Payment of the insurance premium on the of Thomas Taiber
Milwaukee, WI 53201-3007	39-0509570	Business	\$4,756 46	Premium on Al Klinger Life Policy benefitting the Foundation
Northwestern Mutual Life Insurance, PO Box 3007,	39-0509570	Pusings	\$5,000.00	
Milwaukee, WI 53201-3007	39-0309370	Business	\$5,000.00	Payment on policy premium due October 2010
Morgan Wortham, 2736 Fairlane Ave., Waterloo, IA 50702	26-2644859	Business/Ind.	\$151.49	Reimbursement for expenses for two Career Ladders meetings 3-22-10 and 5-
Morgan Wortham, 2736 Fairlane Ave , Waterloo, IA				24-10
50702	26-2644859	Business/Ind	\$1,000 00	Contract payment for January 2010 work
Morgan Wortham, 2736 Fairlane Ave., Waterloo, IA	25.2544050	D //	£4.000.00	
50702	26-2644859	Business/Ind	\$1,000 00	Contract payment for Morgan Wortham - April 2010
Morgan Wortham, 2736 Fairlane Ave., Waterloo, IA	26-2644859	Business/Ind	\$2,000 00	
50702				Contract payment for February and March 2010
Morgan Wortham, 2736 Fairlane Ave., Waterloo, IA 50702	26-2644859	Business/Ind.	\$2,000.00	Contract payment for Morgan Wortham - May and June - Final payment
Cammie Scully, 225 Commercial Street, Waterloo, IA	,	Individual	\$752.50	Reimbursement for payment of airline tickets for Bahama Art acquisition trip
50701		moividuai	\$752.50	planned for November 2010
Cammie Scully, 225 Commercial Street, Waterloo, IA 50701		Individual	\$1,255 60	Reimbursement for Mexico Art Acquisition trip expenses
Cammie Scully, 225 Commercial Street, Waterloo, IA 50701		Individual	\$1,572.74	Reimbursement for art research trip November 14-22 to Bahamas
Cammie Scully, 225 Commercial Street, Waterloo, IA 50701		Individual	\$2,400.00	Housing, deposit and car rental for Bahama trip in Nov 2010 to meet with artists and filmmakers in prep for exhibit- receipts to be provided upon return
Cammie Scully, 225 Commercial Street, Waterloo, IA 50701		Individual	\$3,688 45	Reimbursement for travel for Cammie Scully and Kent Shankle to Pittsburgh, NJ, NYC, RI and Mass Oct 14-Oct 27-2010
Wendy Mass, 751 West Shore Trail, Sparta, NJ 07871		Individual	\$270 00	Per diem allowance for author in residence 4/25/10 to 4/30/10
Wendy Mass, 751 West Shore Trail, Sparta, NJ 07871		Individual	\$663.79	Final reimbursement to CVYR Author-in-residence Wendy Mass for car rental, luggage fees, transportation to and from airport in home state
Wendy Mass, 751 West Shore Trail, Sparta, NJ 07871		Individual	\$10,405 90	Author-in-residence fee and reimbursement for plane fare for CVYR
Aurora Historical Society, Inc., PO Box 68, Aurora, IA 50607	42-1449146	Application Pending	\$8,000 00	Remodel and renovate second floor of historical building

(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of non-	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
	recipients	cash grant	cash assistance	(book, Fiviv, appraisal, other)	
Part IV Supplemental Information. Complete this part to prov	ride the information	n required in Part I	line 2, and any other	l additional information	
SCHEDULE I, PART I, LINE 2: THE FO	OUNDATION	REOUIRES	GRANTEES T	O SIGN A	
TERMS OF GRANT AGREEMENT SPECIFYI					
AMOUNT, REPORTING REQUIREMENTS AN	D ACCOUNT	'ING REQUII	REMENTS BEF	ORE THE MONEY	
IS GIVEN. THEN THE FOUNDATION REQ	UIRES A G	RANT REPO	RT FOR ALL	GRANTS OVER	
\$5,000 THAT ARE FOR A SPECIFIC PU	RPOSE. G	RANTEES A	RE SENT REM	IINDER LETTERS	
IF REPORTS ARE NOT FILED ON TIME.	FOR GENE	RAL CHARI	TABLE SUPPO	RT GRANTS	
OVER \$5,000, THE GRANTEE MAY JUST					
PROJECT GRANTS, THE PAYEE IS REQU					
			CIPIC DOCOR	IMITALION DUCIL	
AS BILLS, INVOICES, AND RECEIPTS	OF PURCHA	SE.			

SCHEDULE J (Form 990)

Compensation Information

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

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

Part IV, line 23.

► Attach to Form 990. See separate instructions.

Open to Public Inspection

OMB No 1545-0047

Internal Revenue Service

Name of the organization

Department of the Treasury

COMMUNITY FOUNDATION OF NORTHEAST IOWA

	arti duestions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use	ł		
	Travel for companions Payments for business use of personal residence			ļ
	Tax indemnification and gross-up payments X Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	_1b	Х	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Х	İ .
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply			
	Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			1
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment from the organization or a related organization?	_4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
_	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of.			v
	The organization?	5a	-	X
b	Any related organization?	5b		
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	-		İ
	contingent on the net earnings of		ĺ	
	The organization?	6a		X
b	Any related organization?	6b	<u> </u>	
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments	_		.,
	not described in lines 5 and 6? If "Yes," describe in Part III	7_	 	X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			.,
	initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	_		İ
	Regulations section 53.4958-6(c)?	9	L	<u> </u>

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name		(i) Base (ii) Bonus & incentive compensation		(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	reported in prior Form 990 or Form 990-EZ
	(i)							
1	(ii)							
2	(i) (ii)							
	(i)							
3	(ii)							
	(i)							
4	(ii)						ļ <u> </u>	
	(i)							
5	(11)							
•	(i)					<u></u>		
6	(ii) (i)							
7	(ii)							
·	(i)							
8	(ii)							
	(i)							
9	(ii)					·		
	(i)						 	
10	(ii)							
	(i)							
11	(ii) (i)							
12	(i) (ii)							
12-	(i)							
13	(ii)							
	(i)							
14	(ii)	ļ						
	(i)		<u> </u>				<u> </u>	
15	(ii)						 	
	(i)		 	 		<u> </u>	-	
16	(ii)	<u> </u>	<u> </u>	1	<u> </u>	L	<u></u>	1 1/5 200 004

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Noncash Contributions

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

Attach to Form 990.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization

COMMUNITY FOUNDATION OF NORTHEAST IOWA

Part I Types of Property

Pa	rt I Types of Property							
		(a)	(b)	(c)	(d)			
		Check if	Number of contributions or	Noncash contribution amounts reported on	Method of de		_	^
		applicable		Form 990, Part VIII, line 1	noncash contribi	ution am	iount	S
1	Art - Works of art	X	17					
2	Art - Historical treasures							
3	Art - Fractional interests		-					
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities · Publicly traded							
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate · Commercial .							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy				_			
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other • ()							
26	Other • ()							
27	Other						_	
28	Other ▶ (<u> </u>		<u> </u>				
29	Number of Forms 8283 received by the organic	zation during	g the tax year for o	ontributions				
	for which the organization completed Form 82	83, Part IV, I	Donee Acknowled	gement <u>29</u>				
							Yes	No
30a	During the year, did the organization receive by					1 1	ı	
	at least three years from the date of the initial of	contribution	, and which is not	required to be used for ex	empt purposes for	1 1	İ	
	the entire holding period?					30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	policy that re	equires the review	of any non-standard contr	ibutions?	31	X	
32a	Does the organization hire or use third parties	or related or	ganizations to soli	cit, process, or sell noncas	sh			
	contributions?					32a		X
b	If "Yes," describe in Part II							
33	If the organization did not report an amount in	column (c) f	or a type of prope	ty for which column (a) is	checked,			
	describe in Part II					1 1	ļ	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2010
Open to Public Inspection

Name of the organization

COMMUNITY FOUNDATION OF NORTHEAST IOWA

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
EAST IOWA; SECURES AND SERVES AS THE CUSTODIAN OF ENDOWMENT FUNDS
CONTRIBUTED BY MANY DONORS TO BENEFIT CHARITABLE CAUSES; SERVES IN A
LEADERSHIP ROLE TO CONVENE, EXAMINE, AND DETERMINE COMMUNITY NEEDS AND
FACILITATES THE DEVELOPMENT OF SOLUTIONS TO COMMUNITY PROBLEMS.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
AND DETERMINE COMMUNITY NEEDS AND FACILITATES THE DEVELOPMENT OF
SOLUTIONS TO COMMUNITY PROBLEMS.
FORM 990, PART VI, SECTION B, LINE 11: THE ORGANIZATION'S BOARD WILL
REVIEW THE FORM 990 THIS YEAR BEFORE IT IS FILED.
FORM 990, PART VI, SECTION B, LINE 12C: CONFLICT OF INTEREST STATEMENTS
ARE REQUIRED ANNUALLY. THE CEO/PRESIDENT REVIEWS THE STATEMENTS AND
REPORTS THE RESULTS TO THE BOARD OF DIRECTORS.
FORM 990, PART VI, SECTION B, LINE 15A: THE CEO/PRESIDENT'S SALARY IS VOTED
ON BY THE BOARD OF DIRECTORS ANNUALLY. THERE ARE NO OTHER KEY EMPLOYEES
AND THE BOARD DOES NOT RECEIVE COMPENSATION.
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES THESE
DOCUMENTS AVAILABLE TO THE PUBLIC UPON SPECIFIC REQUEST AND ALSO HAS THE
DOCUMENTS POSTED ON IT'S WEBSITE.

Name of the organization COMMUNITY FOUNDATION OF NORTHEAST IOWA	Employer identification number 42-6060414
NET UNREALIZED GAINS ON INVESTMENTS:	3,324,724.
FORM 990, PART XII, LINE 2C:	
HAS NOT CHANGED.	
	<u> </u>
	· · · · · · · · · · · · · · · · · · ·

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

2010
Open to Public Inspection

Name of the organization

COMMUNITY FOUNDATION OF NORTHEAST IOWA

(a)	(b)	(c)	(d)	(e)	1		(f)		
Name, address, and EIN of disregarded entity	Primary activity	Legal domicile (state of foreign country)	l l			Direct c	Direct controlling entity		
									
Part II Identification of Related Tax-Exempt Organizations during the tax year.)	nizations (Complete if the organization	on answered "Yes" to Form 990), Part IV, line 34 b	ecause it had one	or more re	lated tax-exer	npt		
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section			cont	g) 512(b)(13) rolled tity?	
	- 		-	501(c)(3))	ļ		Yes	No	
COMMUNITY FOUNDATION REALTY HOLDINGS - 42-1444029 P.O. BOX 1176 WATERLOO, IA	SUPPORT CIVIC AND				COMMUNIT	ION OF			
50704-1176	CHAR [TABLE ACTVITIES	AWOI	501(C)(3)	170(B)(1)(A)	NORTHEA:	ST IOWA		X	
								ļ - · · · · ·	

Page 2

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(1)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year assets	Disproportion- ate allocations?		amount in box	managing partner?	
		country)		sections 512-514)		400010	Yes	No		Yes No	
							Ì				
				1			ĺ				Í
							ļ			<u> </u>	
											i
					ļ						
							<u> </u>			 	
										1	
							,				
								İ		1 1	ĺ
								ļ			
						1					
										1 1	
Identification of Roletad Oc	<u> </u>	<u></u>	<u> </u>	J.,	<u> </u>	<u> </u>	1	L		Щ	L

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

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

Page **3**

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

Note	e. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	<u>No</u>		
1	During the tax year, did the organization engage in any of the following transactions	s with one or more re	elated organizations listed in l	Parts II-IV?					
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		•	Ĺ	1a		X		
b	Gift, grant, or capital contribution to other organization(s)			<u> </u>	1b		Х		
С	Gift, grant, or capital contribution from other organization(s)				1c		X		
d	Loans or loan guarantees to or for other organization(s)				1d		X		
е	Loans or loan guarantees by other organization(s)				1e		<u>X</u>		
				-					
	Sale of assets to other organization(s)				1f		X		
-	Purchase of assets from other organization(s)			<u> </u>	1g		X		
	Exchange of assets	•		-	1h		X		
i Lease of facilities, equipment, or other assets to other organization(s)									
i	Lease of facilities, equipment, or other assets from other organization(s)				1j		X		
-	Performance of services or membership or fundraising solicitations for other organic	zation(s)		<u> </u>	1k		X		
	Performance of services or membership or fundraising solicitations by other organizations				11_		X		
	Sharing of facilities, equipment, mailing lists, or other assets				1m		X		
	Sharing of paid employees				1n_		X		
0	Reimbursement paid to other organization for expenses .				10		X		
	Reimbursement paid by other organization for expenses			<u> </u>	1p		X		
•				<u> </u>					
a	Other transfer of cash or property to other organization(s)				1q		X		
	Other transfer of cash or property from other organization(s)				1r		X		
	If the answer to any of the above is "Yes," see the instructions for information on w	ho must complete t	his line, including covered rel	ationships and transaction thresholds					
	(a)	(b)	(c)	(d)					
	Name of other organization	Transaction	Amount involved	Method of determining amount involved					
		type (a-r)		amount involved					
(1)_									
(2)									
<u> </u>									
(3)									
(4)_									
<i>(E</i>)									
(5)			 						
(6)		1							
171		····	 						

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign	reign section s		(e) Share of end-of- year assets	(f) Disproportionate allocations?		(g) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
		country)	Yes	No		Yes No		(Form 1065)	Yes	No
			-							
										ļ
										ļ
			-		 				ļ <u>.</u>	<u>. </u>
					Ì					
	*									
4										
							İ			
]		

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

► Attach to your tax return.

Business or activity to which this form relates

990

OMB No 1545-0172

➤ See separate instructions. Name(s) shown on return

Identifying number

COMMUNITY FOUNDATION C Part Election To Expense Certain Proper					AGE 10	V hefore v	42-6060414
Maximum amount (see instructions)	1, 011401 00011011 1	TO MOLO, II YOU HAVE GITY !	otou pro	porty, o	ompiote i dit	1	500,000.
	2	300,000.					
2 Total cost of section 179 property place3 Threshold cost of section 179 property	3	2,000,000.					
3 Threshold cost of section 179 property4 Reduction in limitation Subtract line 3 f	4	2,000,000.					
		•			•	5	
5 Dollar limitation for tax year Subtract line 4 from line 6 (a) Description of pro	d cost	 					
(a) Description of pro-		(b) Cost (bus			(0) 2.00.0		†
				-			-
				-	***		1
				+	****	·	†
7 Listed granedy. Enter the assess these	l 00	1	- 	-			-
7 Listed property Enter the amount from		un national (a) trans 6 an	, L	7			-
8 Total elected cost of section 179 proper	-	in column (c), lines o an	1 /			8	
9 Tentative deduction Enter the smaller		200 5 4500				9	
10 Carryover of disallowed deduction from	•			_ =		10	
11 Business income limitation. Enter the sr	11	 					
12 Section 179 expense deduction Add lin	•		ine +i	40		12	
13 Carryover of disallowed deduction to 20 Note: Do not use Part II or Part III below for				13			L
Part II Special Depreciation Allowar			ido listes	d proper			
		<u> </u>			· · · · · · · · · · · · · · · · · · ·		<u> </u>
14 Special depreciation allowance for quali	nea property (otr	ier than listed property) p	iaceo in	service	auning	1 44	
the tax year					•	14	
15 Property subject to section 168(f)(1) ele	ction		•			15	
16 Other depreciation (including ACRS) Part III MACRS Depreciation (Do not	transfer de le de el me	anadu) (Caa instructions				16_	
Part III MACRS Depreciation (Do not	include listed pr	Section A	.,			·	
47 MACOO I I I I I						17	8,364.
17 MACRS deductions for assets placed in	-			•	. .	¬	0,304.
18 If you are electing to group any assets placed in servi	ce during the tax year	into one or more general asset ac	counts che				
	Discord in Convic			ha Gana	ral Deprecia	ation Syst	em
Section B - Assets		e During 2010 Tax Year	Using th		eral Deprecia	ation Syst	em
(a) Classification of property	(b) Month and year placed in service	e During 2010 Tax Year (c) Basis for depreciation (business/investment use only - see instructions)	Using the (d) Repe	ecovery eriod	(e) Convention	(f) Method	(g) Depreciation deduction
	(b) Month and year placed	e During 2010 Tax Year (c) Basis for depreciation (business/investment use only - see instructions) 1,169	Using the (d) Repe	ecovery eriod	(e) Convention	(f) Method	(g) Depreciation deduction
(a) Classification of property 19a 3-year property 5-year property	(b) Month and year placed	e During 2010 Tax Year (c) Basis for depreciation (business/investment use only - see instructions)	Using the (d) Repe	ecovery eriod	(e) Convention	(f) Method	(g) Depreciation deduction
(a) Classification of property 19a 3-year property	(b) Month and year placed	e During 2010 Tax Year (c) Basis for depreciation (business/investment use only - see instructions) 1,169	Using the (d) Repe	ecovery eriod	(e) Convention	(f) Method	(g) Depreciation deduction
(a) Classification of property 19a 3-year property 5-year property	(b) Month and year placed	e During 2010 Tax Year (c) Basis for depreciation (business/investment use only - see instructions) 1,169	Using the (d) Repe	ecovery eriod	(e) Convention	(f) Method	(g) Depreciation deduction
(a) Classification of property 19a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property	(b) Month and year placed	e During 2010 Tax Year (c) Basis for depreciation (business/investment use only - see instructions) 1,169	Using the (d) Repe	ecovery eriod	(e) Convention	(f) Method	(g) Depreciation deduction
(a) Classification of property 19a 3-year property b 5-year property c 7-year property d 10-year property	(b) Month and year placed	e During 2010 Tax Year (c) Basis for depreciation (business/investment use only - see instructions) 1,169	Using the (d) Repe	ecovery eriod	(e) Convention	(f) Method S/L S/L	(g) Depreciation deduction
(a) Classification of property 19a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property	(b) Month and year placed	e During 2010 Tax Year (c) Basis for depreciation (business/investment use only - see instructions) 1,169	(d) Repe	ecovery eriod	(e) Convention	(f) Method S / L S / L	(g) Depreciation deduction
(a) Classification of property 19a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property	(b) Month and year placed	e During 2010 Tax Year (c) Basis for depreciation (business/investment use only - see instructions) 1,169	(d) Repe	ecovery eriod TRS TRS	(e) Convention	(f) Method S / L S / L S / L S / L	(g) Depreciation deduction
(a) Classification of property 19a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property	(b) Month and year placed	e During 2010 Tax Year (c) Basis for depreciation (business/investment use only - see instructions) 1,169	(d) Repe	recovery ariod CRS CRS	(e) Convention HY HY	(f) Method S / L S / L S / L S/L S/L S/L S/L	(g) Depreciation deduction
(a) Classification of property 19a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property h Residential rental property	(b) Month and year placed in service	e During 2010 Tax Year (c) Basis for depreciation (business/investment use only - see instructions) 1,169	Using the (d) Reperture (e) Re	ecovery erlod CRS CRS VRS yrs.	(e) Convention HY HY MM	(f) Method S / L S / L S / L S / L	(g) Depreciation deduction
(a) Classification of property 19a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property h Residential rental property i Nonresidential real property	(b) Month and year placed in service	e During 2010 Tax Year (c) Basis for depreciation (business/investment use only - see instructions) 1,169 8,810	25 27.5 39	yrs. 5 yrs. yrs. yrs.	(e) Convention HY HY MM MM MM MM	(f) Method S / L S / L S / L S/L S/L S/L S/L S/L S/L	(g) Depreciation deduction 32. 147.
(a) Classification of property 19a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property h Residential rental property i Nonresidential real property	(b) Month and year placed in service	e During 2010 Tax Year (c) Basis for depreciation (business/investment use only - see instructions) 1,169	25 27.5 39	yrs. 5 yrs. yrs. yrs.	(e) Convention HY HY MM MM MM MM	(f) Method S / L S / L S / L S/L S/L S/L S/L S/L S/L	(g) Depreciation deduction 32. 147.
(a) Classification of property 19a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property h Residential rental property i Nonresidential real property Section C - Assets Pl	(b) Month and year placed in service	e During 2010 Tax Year (c) Basis for depreciation (business/investment use only - see instructions) 1,169 8,810	25 27.5 39	yrs. 5 yrs. yrs. yrs.	(e) Convention HY HY MM MM MM MM	(f) Method S / L S / L S / L S/L S/L S/L S/L S/L S/L	(g) Depreciation deduction 32. 147.
(a) Classification of property 19a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property h Residential rental property i Nonresidential real property Section C - Assets Pl	(b) Month and year placed in service	e During 2010 Tax Year (c) Basis for depreciation (business/investment use only - see instructions) 1,169 8,810	25 27.5 27.5 28 29 29 29 29 29 29 29 29 29 29 29 29 29	yrs. 5 yrs. yrs. yrs.	(e) Convention HY HY MM MM MM MM	S/L S/L S/L S/L S/L S/L S/L S/L S/L S/L	(g) Depreciation deduction 32. 147.
(a) Classification of property 19a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property h Residential rental property i Nonresidential real property Section C - Assets Pl	(b) Month and year placed in service	e During 2010 Tax Year (c) Basis for depreciation (business/investment use only - see instructions) 1,169 8,810	25 27.5 39 sing the	yrs. 5 yrs. yrs.	(e) Convention HY HY MM MM MM MM	S/L S/L S/L S/L S/L S/L S/L S/L S/L S/L	(g) Depreciation deduction 32. 147.
(a) Classification of property 19a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property h Residential rental property i Nonresidential real property Section C - Assets Pl	(b) Month and year placed in service	e During 2010 Tax Year (c) Basis for depreciation (business/investment use only - see instructions) 1,169 8,810	25 27.5 39 sing the	yrs. Syrs. Altern yrs.	MM MM MM MM ative Deprec	S/L S/L S/L S/L S/L S/L S/L S/L S/L S/L	(g) Depreciation deduction 32. 147.
(a) Classification of property 19a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property h Residential rental property i Nonresidential real property Section C - Assets Pl 20a Class life b 12-year c 40-year Part IV Summary (See Instructions.)	(b) Month and year placed in service	e During 2010 Tax Year (c) Basis for depreciation (business/investment use only - see instructions) 1,169 8,810	25 27.5 39 sing the	yrs. Syrs. Altern yrs.	MM MM MM MM ative Deprec	S/L S/L S/L S/L S/L S/L S/L S/L S/L S/L	(g) Depreciation deduction 32. 147.
(a) Classification of property 19a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property h Residential rental property i Nonresidential real property Section C - Assets Pl 20a Class life b 12-year c 40-year Part IV Summary (See instructions.) 21 Listed property.	(b) Month and year placed in service	e During 2010 Tax Year (c) Basis for depreciation (business/investment use only - see instructions) 1,169 8,810 During 2010 Tax Year U	25 27.5 27.5 39 Ising the	yrs. 5 yrs. yrs. e Altern yrs.	MM MM MM MM ative Deprec	S/L S/L S/L S/L S/L S/L S/L S/L S/L S/L	(g) Depreciation deduction 32. 147.
(a) Classification of property 19a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property h Residential rental property i Nonresidential real property Section C - Assets Pl	(b) Month and year placed in service / / / aced in Service / aced in Service	c) Basis for depreciation (business/investment use only - see instructions) 1,169 8,810 During 2010 Tax Year Use only - see instructions)	25 27.5 29.5 sing the 12 40.0 s), and lire	yrs. 5 yrs. yrs. 4 Altern yrs. yrs.	MM MM MM ative Deprec	S/L S/L S/L S/L S/L S/L S/L S/L S/L S/L	(g) Depreciation deduction 32. 147.

Form 45	62 (2010) / Listed Proper		MUNITY utomobiles. c											414 creation.	
<u> </u>	amusement) Note: For any	vehicle for w	hich vou are i	ısına the	standar	d milead	ne rate o		,	-					
	through (c) of S		of Section B on and Other					netnie	tions for li	mits for		or autor	nohiles l		
24a Dov	you have evidence to s					7								Yes	
240 00		(b)	(c)	em use c		<u> </u>	<u>′es </u>	<u> NO</u>	24b lf "Y (f)			T -		T	<u> </u>
Type of property Date Busine		Business, investmen use percenta	it Cost of		l no	Basis for depreciation (business/investment use only)		Recovery period	Me	(g) Method/ Convention		(h) Depreciation deduction		cted on 179 ost	
25 Spec	cial depreciation allo	wance for o	ualified listed	propert	v placed	ın servi	ce dunn	the ta	ax vear an	d.	T				
	more than 50% in				, ,				,		25				
	erty used more tha			ess use											
		ļ	i	%											
				%											
				%											
27 Prop	erty used 50% or le	ess in a quali	fied business	use			-								
				%			-			S/L -					
				%					_	S/L -	_]	
				%						S/L·					
28 Add	amounts in column	(h), lines 25	through 27 B	nter her	e and or	n line 21	, page 1				28			1	
	amounts in column		-										29		
							on Use	of Veh	nicles			-			
	e this section for ve ovided vehicles to y hicles												ing this s	section fo	or
30 Total	30 Total business/investment miles driven during the			1	a) hicle	1	(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle) icle
year (do not include comn	nuting miles)												<u></u>	
31 Total	commuting miles d	lrıven durıng	the year												
32 Total	other personal (no	ncommuting) miles			{									
drive	n	_				İ									
33 Total	miles driven during	the year												1	
Add	lines 30 through 32											<u> </u>			
34 Was the vehicle available for personal use		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No		
dunn	ng off-duty hours?				<u> </u>		ļ								
35 Was	the vehicle used pr	marily by a	more	1		ļ	1					ļ	ļ		
than	5% owner or relate	d person?				<u></u>							ļ		
36 Is an	other vehicle availal	ble for perso	nal		1									'	
use?			<u> </u>	J	<u> </u>		<u> </u>	<u></u>	Ш	l	<u> </u>	<u> </u>	<u> </u>		
			- Questions												
Answer t	hese questions to d	ietermine if y	ou meet an e	exception	n to com	pleting	Section I	3 for v	ehicles us	ed by er	nployee	s who a	re not m	ore than	5%
owners o	r related persons.														т
•	37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?									Yes	No				
38 Do yo	ou maintain a writte	n policy stat	ement that p	ohibits p	oersonal	use of v	vehicles,	ехсер	t commut	ng, by y	our			1	
empl	oyees? See the inst	ructions for	vehicles used	by corp	oorate of	fficers, c	directors,	or 1%	or more	owners		•			<u> </u>
39 Do yo	ou treat all use of ve	hicles by en	nployees as p	ersonal	use?				•••						ļ
40 Do yo	ou provide more tha	ın five vehicl	es to your en	ployees	, obtain	ınforma	tion from	your e	employees	about					1
the u	se of the vehicles, a	and retain th	e information	received	1?										<u> </u>
41 Do yo	ou meet the require	ments conce	erning qualifie	d autom	obile de	monstra	ation use	?							<u> </u>
Note	: If your answer to 3	7, 38, 39, 40	0, or 41 is "Ye	s," do n	ot compl	lete Sec	tion B fo	r the c	overed ve	hıcles.					<u></u>
Part V	Amortization														<u>.</u>
	(a) Description of costs Date:		(b) (c) the amortization Amortizable begins amount			(d) Code section	e Amortization			Ar fo	(f) Amortization for this year				
42 Amor	tization of costs tha	at begins du	ring your 201	0 tax yea	ar:										
								Ш							
43 Amor	tization of costs tha	at began bef	ore your 2010	tax yea	ır							43			
44 Total	. Add amounts in c	olumn (f). Se	e the instruct	ions for	<u>where</u> to	report						44			