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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.

Open to Public

| A | For the | e 2011 c | alendar year, or tax year be | eginning | | , and ending | · · · · · · · · | | |
|-----------------------------|--------------|--|---|---------------------|----------------------|--|--------------------------|-------------------|------------------------------|
| 8 | Check if a | applicable | C Name of organization CC | ST | D Emplo | yer identification number | | | |
| | Address c | change | | WA | | | | | |
| []] | Name cha | ange | Doing Business As Number and street (or P O box if | mail is not deliver | ad to street address | · · · · · · · · · · · · · · · · · · · | Room/suite | | -6060414 |
| | initial retu | mı, | P.O. BOX 1176 | III IS NOT GETTAET | su to suget address | , | Room/suite | 1 | 9-287-9106 |
| $\bar{\cap}$ | Terminate | ed | City or town, state or country, and | ZIP + 4 | _ | | | 31. | 9-207-9100 |
| \Box | Amended | (return | WATERLOO | | TA 507 | 04-1176 | | G Gross rec | eepts\$ 22,172,996 |
| 금 | | | F Name and address of principal off | icer | | | | 1 G Glossia | дры я ——//- |
| ٬ لـــا | Applicatio | on pending | BRAD PATTERS | ON | | | H(a) Is this a | group return fo | raffiliates? Yes X No |
| | | | P.O. BOX 117 | 6 | | | H(b) Are all a | affiliates includ | ed? Yes No |
| | | | WATERLOO | | IA! | 50704 | H "N | lo," attach a lis | t. (see instructions) |
| <u></u> | Tax-exer | mpt status | X 501(c)(3) 501(c) | <u> </u> | (insert no) | 4947(a)(1) or 52 | 7 | | |
| <u>J</u> | Website | : ► W | WW.CFNEIA.ORG | | | | | xemption num | |
| | | organization: | X Corporation Trust | Association | Other > | | L Year of formation | L956 | M State of legal domicale IA |
| _P | art l | | mmary | | | - | | | |
| ĺ | 1 1 | - | scribe the organization's mis | ssion or most | significant activ | rities | | | |
| 92 | ĺ | SEE | SCHEDOLE O | | | | | | |
| 'n | | | | | | | | | |
| Α Α | ١ , , | Chook the | s box ▶ if the organizati | on discontinu | ad ita aparatiar | s or disposed of more | than 25% of its pot or | anto. | |
| õ | l . | | of voting members of the gov | | | | than 25% of its fiet as | 3 | 17 |
| 8 | l | | of independent voting members | • • | | | | 4 | 16 |
| /itie | | | ber of individuals employed | • | • • • | • | | 5 | 9 |
| Activities & Governance | 1 | | ber of volunteers (estimate | - | • | , | | 6 | 450 |
| 1 | 7a | Total unre | elated business revenue from | n Part VIII, co | lumn (C), line 1 | 12 | | 7a | 0 |
| | <u>b1</u> | Net unrel | ated business taxable incom | e from Form | 990-T, line 34 | | | 7b | 0 |
| | ١ | | | 44.5 | | | Prior Yo | | Current Year |
| 8 | • | | ons and grants (Part VIII, lin | | | | 1,39 | 1,399 | 6,980,283 |
| ReyerIDE | ì | • | service revenue (Part VIII, lii nt income (Part VIII, column | | and 7d) | | 1 20 | 8,966 | 1,309,735 |
| Re | | | enue (Part VIII, column (A), | | | 11e) | 1,20 | 0,300 | 2,303,733 |
| C | | | enue – add lines 8 through 1 | | | | 8,60 | 0,365 | 8,290,018 |
| | | | d similar amounts paid (Par | | | - X // / | | 1,446 | |
| DEC | | | paid to or for members (Part | | | | | 0 | 0 |
| g. | 15 3 | Salaries, | other compensation, employ | ree benefits (F | Part IX, column | (A), lines 5-10) | 38 | 6,055 | 424,426 |
| enses | 16a F | Professio | nal fundraising fees (Part IX, | , column (A), l | ine 11e) | | | 0 | . 0 |
| 85 | b 7 | | Iraising expenses (Part IX, c | • • • | • | 197,013 | | - 050 | 150 300 |
| SC基础 | 17 (| - | enses (Part IX, column (A), | | | | | 7,353 | 150,308 |
| S | 18 7 | | enses. Add lines 13-17 (mus | | | | | 4,854 | 4,243,600 |
| - 28 | 19 F | Revenue | less expenses. Subtract line | 18 from vine | BEIVEL | | Beginning of Co | 5,511 | End of Year |
| Net Assets or Fund Balances | 20 7 | Total ass | ets (Part X, line 16) | | | RS-OSC | | 4,361 | 57,661,682 |
| Ass 1 Ba | 21 7 | | lities (Part X, line 26) | ₩ NOV | ' 1 3 2012 | | | 3,131 | |
| Feet | 22 1 | Net asset | s or fund balances. Subtract | line 21_from_ | ine 20 | <u> </u> | 55,60 | 1,230 | 57,656,531 |
| | art # | Sig | nature Block | OG | DEN II | Γ | | | |
| | | | erjury, I declare that I have exa | | | | | | nowledge and belief, it is |
| _tru | ie, corre | ect, and Co | implete Declaration of pheparer | | cer) is based on | all information of which p | preparer has any knowled | ge | 1-1-1- |
| | | |) Talle | 400 | | | | | 0/31/12 |
| Sig | | | gnature of officer | AT. | | C 1 | | Date | , |
| He | re | ₹ | BRAD PATTERSO | <u>N</u> | | | EO AND PRES | IDENT | |
| | | | preparer's name | | Preparer's signati | ure | Date | Check | if PTIN |
| Paic | 1 | 1 | K. DUGGAN, CPA | | 1 ` ` | OUGGAN, CPA | 10/1 | | P00424293 |
| | parer | Firm's nar | | HANSEN | | Joseph CEA | | Firm's EIN | 42-0991212 |
| _ | Only | Funs item | PO BOX | | <u>, </u> | | | , 110 CHT F | |
| | - | Firm's add | . TAR MEDIA | | 50704-0 | 240 | 1 | Phone no | 319-233-5225 |
| May | the IR | | s this return with the prepare | | | | . <u> </u> | | X Yes No |
| For | | | duction Act Notice, see the | | | ······································ | | | Form 990 (2011) |
| DAA | | | | | | | | | |

| Part III S | COMMUNITY FOUNDATE Statement of Program Serv | ice Accomplishments | 060414 Page |
|-------------------|--|--|---|
| | | s a response to any question in this Par | t III X |
| | cribe the organization's mission | | |
| | | | |
| 2 Did the orga | anization undertake any significant | program services during the year which were no | t listed on the |
| prior Form | 990 or 990-EZ? | | Yes X No |
| _ | scribe these new services on Sche | dule O e significant changes in how it conducts, any pro | ogram |
| services? | anization cease conducting, or mak | e significant changes in now it conducts, any pro | Yes X No |
| | scribe these changes on Schedule | | |
| | | ccomplishments for each of its three largest prog anizations and section 4947(a)(1) trusts are requ | |
| | | nses, and revenue, if any, for each program serv | |
| AREAS; ENVIRON | BY THE BOARD OF DARTS & CULTURE, C | IRECTORS, DISTRIBUTIONS OMMUNITY AFFAIRS & DEVE | 68,866) (Revenue \$ ARE MADE IN THE FOLLOWING LOPMENT. EDUCATION, ISTORICAL PRESERVATION & |
| | | | |
| | | | |
| 4b (Code. |) (Expenses \$ | including grants of \$ |) (Revenue \$ |
| | | | |
| | | | |
| | | | |
| | | | |
| 4c (Code. |) (Expenses \$ | including grants of \$ |) (Revenue \$ |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| 4d Other progr | am services. (Describe in Schedule \$ incli | • | Revenue \$) |

| | | | 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 (see instructions)? | 2 | Х | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to | | | |
| | candidates for public office? If "Yes," complete Schedule C, Part I | 3 | | X |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) | | | - |
| | election in effect 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 similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, | | | |
| | Part III | 5 | | X |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors | | | |
| | have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If | | | |
| | "Yes," complete Schedule D, Part I | 6 | X | |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | | | |
| | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | 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 | Х | |
| 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 temporarily restricted | | | |
| | endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | X | |
| 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 | X | |
| b | Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more | | | |
| | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | _X_ |
| C | 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 167 If "Yes," complete Schedule D, Part VIII | 11c | | X |
| d | 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 | |
| е | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | | Х |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | | | |
| | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | X | |
| 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 | X | |
| 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 | | X |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | X |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | X |
| þ | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, | | | |
| | fundraising, business, investment, and program service activities outside the United States, or aggregate | | | ٠, |
| | foreign investments valued at \$100,000 or more? 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 | | | ٠,, |
| | 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 | | | ۱., |
| | to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV | 16 | | X |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on | _ | | |
| | Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) | 17 | | X |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on | ا ا | | |
| | Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | - | X |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? | _ | | . |
| | If "Yes," complete Schedule G, Part III | 19 | | X |
| 20a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | X |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | L |

Form 990 (2011) COMMUNITY FOUNDATION OF NORTHEAST 42-6060414 Checklist of Required Schedules (continued) Yes No 21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization X in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States X on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated X employees? If "Yes." complete Schedule J 23 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 X 24a through 24d and complete Schedule K If "No," go to line 25 b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c to defease any tax-exempt bonds? 24d 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 X with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a 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? 25b X If "Yes," complete Schedule L. Part I 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or Х disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled X 27 entity or family member of any of these persons? If "Yes." complete Schedule L. Part III 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) X 28a 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 Х 28b Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) 28c X was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV X 29 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 X conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 X 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," X 32 complete Schedule N, Part II 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 X 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, 34 IV, and V, line 1 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a Did the organization receive any payment from or engage in any transaction with a controlled entity within the X 35b 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 X related organization? If "Yes," complete Schedule R, Part V, line 2 36 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,

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

X Form 990 (2011)

37

38

X

38

Part V Statements Regarding Other IRS Filings and Tax Compliance

| C | heck if Schedule O contains a response to any question in this Part V | | | | | \Box |
|------------------|---|------------|-------------------|-------------------|----------|----------|
| | | | | | Yes | No |
| 1a Enter the nu | imber reported in Box 3 of Form 1096. Enter -0- if not applicable | 1a | 12 | | | |
| | imber of Forms W-2G included in line 1a Enter -0- if not applicable | 1b | 0 | _] ! | | |
| c Did the orga | inization comply with backup withholding rules for reportable payments to vendors and | | | | | |
| reportable g | aming (gambling) winnings to prize winners? | | | 1c | X | |
| 2a Enter the nu | ımber of employees reported on Form W-3, Transmittal of Wage and Tax | | [| | | İ |
| Statements, | filed for the calendar year ending with or within the year covered by this return | 2a | 9 | _ | | |
| b If at least or | ne is reported on line 2a, did the organization file all required federal employment tax ret | urns? | | 2b | X | |
| Note. If the | sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructio | ns) | | | | l |
| 3a Did the orga | inization have unrelated business gross income of \$1,000 or more during the year? | | | 3a | | X |
| | s it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O | | | _3b | | ļ |
| | during the calendar year, did the organization have an interest in, or a signature or othe | | | 1 ' | | |
| over, a finar | ncial account in a foreign country (such as a bank account, securities account, or other t | inancial | | | | |
| account)? | | | | 4a | | X |
| | er the name of the foreign country | | • | <u> </u> | | |
| | tions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financia | al Accou | unts | | | |
| | ganization a party to a prohibited tax shelter transaction at any time during the tax year? | 4: 0 | | 5a | | X |
| | able party notify the organization that it was or is a party to a prohibited tax shelter trans. | action | | 5b | | |
| | ne 5a or 5b, did the organization file Form 8886-T? | tha | | _ <u>5c</u> _ | | |
| | ganization have annual gross receipts that are normally greater than \$100,000, and did | ıne | | 6a | | х |
| | a solicit any contributions that were not tax deductible? the organization include with every solicitation an express statement that such contribu | ione or | | - Ua | | |
| | of tax deductible? | 10113 01 | | 6b | | |
| - | ons that may receive deductible contributions under section 170(c). | | | ,,,, | | |
| _ | anization receive a payment in excess of \$75 made partly as a contribution and partly fo | r aoods | | | | ŀ |
| | s provided to the payor? | 3 | | 7a | | х |
| | the organization notify the donor of the value of the goods or services provided? | | | 7b | - | |
| | anization sell, exchange, or otherwise dispose of tangible personal property for which it was | vas | | | | |
| · · | file Form 8282? | | • | 7c | | X |
| d If "Yes," ind | cate the number of Forms 8282 filed during the year | 7d | <u> </u> | | | · ' |
| e Did the orga | anization receive any funds, directly or indirectly, to pay premiums on a personal benefit | contrac | t? | 7e | | X |
| f Did the orga | anization, during the year, pay premiums, directly or indirectly, on a personal benefit con | tract? | | 7f | | X |
| | ization received a contribution of qualified intellectual property, did the organization file F | | | 7 g | | <u> </u> |
| h If the organi | ization received a contribution of cars, boats, airplanes, or other vehicles, did the organi | zation fi | le a Form 1098-C? | 7h | ļ | <u></u> |
| | g organizations maintaining donor advised funds and section 509(a)(3) supporting | | | | | l |
| _ | ons. Did the supporting organization, or a donor advised fund maintained by a sponsoring | g | | ļ. _. : | | |
| • | n, have excess business holdings at any time during the year? | | | 8 | | X |
| • | g organizations maintaining donor advised funds. | | | | | |
| _ | anization make any taxable distributions under section 4966? | | | <u>9a</u> | | X |
| • | anization make a distribution to a donor, donor advisor, or related person? | | | 9b | | <u> </u> |
| | 1(c)(7) organizations. Enter | 1400 | 1 | | | |
| | es and capital contributions included on Part VIII, line 12 pts, included on Form 990, Part VIII, line 12, for public use of club facilities | 10a 10b | | - f | | |
| | pts, included on Form 990, Part VIII, line 72, for public use of club facilities 1(c)(12) organizations. Enter: | [100 | <u> </u> | - | | |
| | ne from members or shareholders | 11a | | | | |
| | ne from other sources (Do not net amounts due or paid to other sources | 1 | | ┨ | | İ |
| | ounts due or received from them.) | 116 | | | | |
| | 47(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Fo | | | 12a | . ` | Ī |
| | er the amount of tax-exempt interest received or accrued during the year | 12b | | | | |
| | 1(c)(29) qualified nonprofit health insurance issuers. | | <u> </u> | | | |
| | ization licensed to issue qualified health plans in more than one state? | | | 13a | | |
| • | he instructions for additional information the organization must report on Schedule O. | • | • | | 3 . | 7 |
| | nount of reserves the organization is required to maintain by the states in which | | | ŀ | ` | [|
| | ation is licensed to issue qualified health plans | 13b | | | 名。 | |
| - | mount of reserves on hand | 13c | | <u> </u> | | |
| | | | | | | 37 |
| 14a Did the orga | anization receive any payments for indoor tanning services during the tax year? | | | 14a | | X |

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

| | O. See instructions. Check if Schedule O contains a response to any question in this | Part | : VI | | | X |
|-----|---|--------|-------------|------|-----|----|
| Sec | tion 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 | 1a | 17 | | | |
| | If there are material differences in voting rights among members of the governing body, or | | | | | |
| | if the governing body delegated broad authority to an executive committee or similar | | | | | |
| | committee, explain in Schedule O | - 1 | | | | |
| b | Enter the number of voting members included in line 1a, above, who are independent | 1b | 16 | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with | | |] | | |
| | any other officer, director, trustee, or key employee? | | | 2 | | X |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct | | | | | |
| _ | supervision of officers, directors, or trustees, or key employees to a management company or other person? | | | 3 | | X |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | | | 4 | | X |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | | | 5 | | X |
| 6 | Did the organization have members or stockholders? | | | 6 | | X |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint | | | | | |
| | one or more members of the governing body? | | | 7a | | X |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, | | | | | |
| | stockholders, or persons other than the governing body? | | | 7b | | X |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year | by th | e following | | | |
| а | The governing body? | • | _ | 8a | x | |
| b | Each committee with authority to act on behalf of the governing body? | | | 8b | X | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at | | | | | |
| | the organization's mailing address? If "Yes," provide the names and addresses in Schedule O | | | 9 | | X |
| Sec | tion B. Policies (This Section B requests information about policies not required by the Intern | al Re | evenue Co | de.) | | |
| | | | | | Yes | No |
| 10a | Did the organization have local chapters, branches, or affiliates? | | | 10a | X | |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, | | | | | |
| | affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? | | | 10b | X | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing to | he for | m? | 11a | X | |
| ь | Describe in Schedule O the process, if any, used by the organization to review this Form 990 | | | | | |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | | | 12a | X | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise | to cor | flicts? | 12b | X | |
| С | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," | | | | | |
| | describe in Schedule O how this was done | | | 12c | Х | |
| 13 | Did the organization have a written whistleblower policy? | | | 13 | X | |
| 14 | Did the organization have a written document retention and destruction policy? | | | 14 | X | |
| 15 | Did the process for determining compensation of the following persons include a review and approval by | | | |] | |
| | independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | - | | 1 | |
| а | The organization's CEO, Executive Director, or top management official | | | 15a | X | |
| b | Other officers or key employees of the organization | | | 15b | I | X |
| | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) | | | | 1 | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement | | | | . | |
| | with a taxable entity during the year? | | | 16a | | X |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its | | | | | |
| | participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the | | | | • ‡ | |
| | organization's exempt status with respect to such arrangements? | | | 16b | | |

Section C. Disclosure

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

X Own website X Another's website X Upon request

- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶ STACY PAUL 425 CEDAR STREET, SUITE 310

IA 50703

319-287-9106

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 orga | anization nor an | y rela | ted (| orga | nızai | tions | com | pensated any current office | er, director, or trustee | |
|-------------------------------------|--|-----------------------------------|-----------------------|-------|-------------------------|---|-----|---|--|--|
| (A) Name and Title | (B) Average hours per week (describe hours for related organizations | off | k, unte | ss pe | ntion more rson i | than on s both a r/trusted emplo | an | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related |
| | ın Schedule O) | Individual trustee or director | Institutional trustee | | Key employee | Highest compensated employee | , | | | organizations |
| (1) MARY ANN BURK | | | | | | | | | | |
| PRESIDENT AND CEO | 40.00 | X | | X | | | | 101,096 | 0 | 4,272 |
| (2) GARY BERTCH | | | | | | | | | _ | |
| PAST CHAIR | 0.10 | Х | | Х | | | | 0 | <u> </u> | 0 |
| (3) JOHN MONAGHAN 1ST VICE CHAIR | 0 10 | \ . | | Ţ | | | | o | o | 0 |
| (4) MARK ROLINGER | 0.10 | Х | | Х | | \vdash | _ | 0 | <u> </u> | <u> </u> |
| TREASURER | 0.10 | x | | x | | | | 0 | o | 0 |
| (5) DENNIS CLARK | 0.10 | 1 | - | | - | | | | | |
| CHAIR | 0.10 | x | | | | | | 0 | o | 0 |
| (6) DAWN DUVEN | 0.10 | | | | | | | | | |
| CHAIR, DISTRIBUTION | 0.10 | x | | x | | | | 0 | o | 0 |
| (7) MARLENE BEHN | 0.20 | | | | | | _ | | | |
| DIRECTOR | 0.10 | x | | | | | | 0 | o | 0 |
| (8) JAY BULLERMAN | | | | | | | | | | |
| CHAIR, INVESTMENT | 0.10 | $ \mathbf{x} $ | | | | | | 0 | 0 | 0 |
| (9) AARON SANNES | | | | | | | | | | |
| CHAIR, SCHOLARSHIP | 0.10 | X | | X | | | | 0 | 0 | 0 |
| (10) LOIS RUPKEY-COHE | ₹ T | | | | | | | | | |
| DIRECTOR | 0.10 | X | | | | | | 0 | 0 | 0 |
| (11) GENE DRAPE | | | | | | | | | | |
| DIRECTOR | 0.10 | X | | | | | | 0 | 0 | 0 |
| (12) ROBERT SMITH | | | | | | | | | | |
| DIRECTOR | 0.10 | X | | | | | | 0 | 0 | 0 |
| (13) LORI JOHNSON | | | | | | | | | | _ |
| 2ND VICE CHAIR | 0.10 | X | | | | | | 0 | 0 | 0 |
| (14) KATY WILLIAMS | | | ĺ | | | | | | _ | _ |
| DIRECTOR | 0.10 | Х | | | | | | 0 | 0 | Form 990 (2011) |

Form 990 (2011)

| Part VII Sect | ion A. Officers | , Directors, Tru | stee | s, K | ey E | mpl | oyee | s, a | nd Highest Compensated | Employees (continued) | | | |
|---------------------------------------|--|--|-----------------------------------|-----------------------|----------------------------------|--------------|------------------------------|--------------|--|--|-------------------------|---------------------------------------|--|
| (A) Name and | title | (B) Average hours per week (describe hours for | bo | x, unle | Pos check ess pe nd a c | erson | than o | an ee) | (D) Reportable compensation from the organization | (E) Reportable compensation from related organizations (W-2/1099-MISC) | Est emo o comp | (F) mated punt of ther ensation m the | |
| | | related organizations in Schedule O) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | (W-2/1099-MISC) | (1, 2, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, | orga and | nization related iizations | |
| (15) KYLE CHR | ISTIASO | 0.10 | х | | х | | | | 0 | 0 | | | 0 |
| (16) RUDY JON: DIRECTOR | ES | 0.10 | х | | | | | | 0 | 0 | | | 0 |
| (17) ELLEN YO | UNG | 0.10 | х | | | | | | 0 | 0 | | | 0 |
| (18) | | | | | | | | | | | | | |
| (19) | | | | | | | | | | | | | |
| (20) | | | | | | | | | | | | | |
| (21) | | | | | | | | | | | | | |
| (22) | | | | | | | | | | | | | |
| (23) | | | | | | | | | | | | | |
| (24) | | | | | | | | | | | | | |
| (25) | | | | | | | | | | | | | |
| 1b Sub-total c Total from cor | itinuation she | ets to Part VII, S | Sect | ion A | 4 | | | > | 101,096 | | | 4,27 | |
| | f individuals (in | _ | | | thos | e lıs | ted a | bov | e) who received more than | | | 4,27 | <u>72</u> |
| | | the organization | | | | | | | | | | Yes N | No |
| employee on lir 4 For any individu | ne 1a? If "Yés," ual listed on line | complete Schele 1a, is the sum | dule of re | J for | suc able | h ind | lividi ipens | ıal satio | oyee, or highest compensation complete Schedule J for su | from the | 3 | | <u>x</u> |
| | | | | | | | | | y unrelated organization or for such person | ndıvidual | 5 | | <u>x </u> |
| Section B. Indepen | able for your fiv | ve highest comp | ensa | ited i | inde | pend | lent o | conti | ractors that received more | than \$100,000 of | | | — |
| compensation | | zation Report co (A) business address | omp | ensa | tion | for t | he ca | alend | dar year ending with or with Descrip | in the organization's tax yo (B) tion of services | | (C) Compensation | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | ········ | |
| | | contractors (inclu of compensation | | | | | | | se listed above) who | 0 | | | . : |
| DAA | | | | | | | | | | | 1 | om 990 (2 | 2011) |

| Pa | rt V | III Stater | nent of Reve | nue | | | | | | |
|--|----------|---|--------------------------|---------------|------------|--------------------|----------------------|--------------------------------|---|---|
| | | | | | | | (A) Total revenue | (B) Related or exempt function | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 |
| হ ম | 12 | Federated car | mpaigne | 1a | | | | revenue | <u>.</u> | 312, 313, 01 514 |
| E | 1 a | Membership d | · - | 1b | | | | | | |
| ٥٤ | ٥ | Fundraising ev | | 1c | | | | | | |
| ₹ F | ٦ ، | _ | | $\overline{}$ | | | | | | |
| ΩE | a | Related organ | | 1d | | 244 470 | | | | |
| Sin | e | Government grants | • | 1e | 4, | 244,479 | | | | |
| ĘĘ | ı | All other contribution and similar amounts | | | 4 | 725 004 | | | | |
| 适 | _ | | | 1f | | 735,804 184,208 | | | | |
| 20 | g | | ns included in lines 1a- | 1f \$ | 1 | 104,200 | 6,980,283 | | | |
| Program Service Revenue Contributions, Gifts, Grants and Other Similar Amounts | - " | Total. Add line | 55 (d=1) | | | Busn Code | 0,500,205 | | ······································ | |
| eun | 2a | | | | | Busil Code | | | | |
| ₽ Se | b | | | | | | | | | |
| 9 | C | | | | | | | | | |
| e⊡ | d | | | | | | | | | |
| S | e | | | | | | | | | |
| gra | f | All other progr | am service reve | nua | | | | | | |
| 5 | g | Total. Add line | | 1100 | | • | | | | |
| | 3 | | come (including | dıvıden | ds. intere | | | | | |
| | | and other simi | | | | • | 1,100,805 | | | 1,100,805 |
| | 4 | | | roceeds > | | | | | | |
| | 5 | Royalties | | • | • | > | | | | |
| | | | (ı) Real | | (ti) F | Personal | | | | |
| | 6a | Gross rents | | | | | | | | |
| | ь | Less rental exps | | | | | | | | |
| | С | Rental inc or (loss) | | | | | | | | |
| | d | Net rental inco | ome or (loss) | | | • | | | | |
| | 7a | Gross amount from sales of assets | (i) Securities | | (11) | Other | | | · | |
| | | other than inventory | 14,091, | 908 | | | | | • | |
| | b | Less cost or other | | | | | | | | |
| | | basis & sales exps | 13,882, | | | | • | | | |
| | С | Gain or (loss) | | 930 | | | | | | |
| | d | Net gain or (lo | - | ۲. | | • | 208,930 | 208,930 | ······································ | |
| ne | 8a | | om fundraising eve | nts | | | | | | |
| ent | | (not including \$ | | | | | | | | |
| Zev | | | reported on line 1c) | | | | | | | |
| erl | | See Part IV, line | | a_ | | _ | • | | | |
| Other Reven | | Less direct ex | | ьĹ | | | | | | |
| | | | (loss) from fund | | events | • | | | | |
| | ча | | om gaming activitie | - 1 | | | | | | |
| | _ | See Part IV, line | | a b | | | | | | |
| | | Less direct ex | | ~ _ | intico | | 1 | | | |
| | | | (loss) from gam | ing acti | vities | | | | | |
| | iva | returns and all | f inventory, less | اء | | | | | | |
| | h | Less cost of g | | a b | | | | | • | |
| | | | (loss) from sale | | entory | _ | İ | | • | |
| | | | cellaneous Revenue | 3 01 1114 | Cittory | Busn. Code | · | | | |
| | 11a | | | | | | 1 | | | |
| | b | | | | | | | | · | |
| 1 | C | | | | | | | | | |
| | d | All other reven | nue | | | | | | _ | |
| | | Total. Add line | | | | | | | | |
| _] | 12 | | e. See instruction | ns. | | | 8,290,018 | 208,930 | 0 | 1,100,805 |
| | | | | | | | | | | - 000 |

Form 990 (2011)

Part IX Statement of Functional Expenses

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

| requi | red to complete columns (B), (C), and (D). Check if Schedule O contains a response t | o any guestion in this Dart I | <u>x</u> | | |
|-----------------|---|-------------------------------|--|------------------------------------|--|
| | not include amounts reported on lines 6b. | (A) | (B) | (C) | (D) |
| | • • | Total expenses | Program service expenses | Management and general expenses | Fundraising expenses |
| <u>76,</u> 1 | 8b, 9b, and 10b of Part VIII. | | өлрензез —————————————————————————————————— | general expenses | cxpondo |
| • | Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 | 3,668,866 | 3,668,866 | | |
| 2 | Grants and other assistance to individuals in | 3,000,000 | 3,000,000 | | |
| _ | the U.S. See Part IV, line 22 | | | | |
| 3 | Grants and other assistance to governments, | | | | ······································ |
| J | organizations, and individuals outside the | | | | |
| | U.S. See Part IV, lines 15 and 16 | | | l l | |
| A | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, | | | | |
| • | trustees, and key employees | 105,367 | | 53,324 | 52,043 |
| 6 | Compensation not included above, to disqualified | | | | |
| · | persons (as defined under section 4958(f)(1)) and | | | | |
| | persons described in section 4958(c)(3)(B) | | | | |
| 7 | Other salaries and wages | 266,759 | | 171,015 | 95,744 |
| 8 | Pension plan accruals and contributions (include | | | | |
| ~ | section 401(k) and 403(b) employer contributions) | 7,354 | | 4,780 | 2,574 |
| 9 | Other employee benefits | 18,394 | | 11,956 | 6,438 |
| 10 | Payroll taxes | 26,552 | | 15,361 | 11,191 |
| 11 | Fees for services (non-employees) | | - | | = <u>=1=3=</u> |
| a | Management . | | | | |
| b | Legal | 354 | | 354 | |
| c | Accounting | 14,590 | | 14,590 | |
| ď | Lobbying | | | | |
| e | Professional fundraising services. See Part IV, line 17 | | | | |
| f | Investment management fees | | | | |
| g | Other | | | | |
| 12 | Advertising and promotion | 12,827 | | | 12,827 |
| 13 | Office expenses | 25,445 | | 13,652 | 11,793 |
| 14 | Information technology | | | | |
| 15 | Royalties | | | | |
| 16 | Occupancy | 19,075 | | 19,075 | |
| 17 | Travel | | | | |
| 18 | Payments of travel or entertainment expenses | | | | |
| | for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | 10,205 | | 7,008 | 3,197 |
| 20 | Interest | | | | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | 11,128 | | 11,128 | |
| 23 | Insurance | 5,206 | | 5,206 | |
| 24 | Other expenses. Itemize expenses not covered | ,,,,,, | | | |
| | above. (List miscellaneous expenses in line 24e. If | Ī | 1 | <u> </u> | , |
| | line 24e amount exceeds 10% of line 25, column | | 1 | | |
| | (A) amount, list line 24e expenses on Schedule O.) | ` ` | ` | · | |
| а | EQUIPMENT RENT AND MAINTE | 23,631 | | 23,631 | |
| b | EQUIPMENT RENT | 9,598 | | 9,598 | |
| C | DUES/MEMBERSHIP FEES | 9,318 | | 9,318 | |
| d | CONSULTING SERVICES | 4,885 | | 4,885 | |
| е | All other expenses | 4,046 | | 2,840 | 1,206 |
| 25 | Total functional expenses. Add lines 1 through 24e | 4,243,600 | 3,668,866 | 377,721 | 197,013 |
| 26 | Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720) | | | | |
| DAA | | | | | Form 990 (201 |

Form 990 (2011) Part X **Balance Sheet** (A) (B) End of year Beginning of year 5,190 1,459 Cash—non-interest bearing 3,913,507 6,074,238 2 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 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 6 employees' beneficiary organizations (see instructions) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 105,187 other basis Complete Part VI of Schedule D 10a 79,359 25,828 31,388 10c 10b b Less: accumulated depreciation 46,986,612 47,242,651 11 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 14 Intangible assets 4,415,356 4,569,814 15 15 Other assets See Part IV, line 11 57,661,682 55,604,361 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 3,131 5,151 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Payables to current and former officers, directors, trustees, key Liabilities employees, highest compensated employees, and disqualified persons. 22 Complete Part II of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 of Schedule D 3,131 5,151 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 25,514,002 27 Unrestricted net assets 29,369,436 32,142,529 28 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34. 30 30 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 32 57,656,531 55,601,230 33 Total net assets or fund balances 33 55,604,361 57,661,682 Total liabilities and net assets/fund balances

| òm | 990 (2011) COMMUNITY FOUNDATION OF NORTHEAST 42-6060414 | | | | Pag | je 12 |
|----|---|-----|---|-----|---------------|----------------|
| | 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 | | 3,2 | 90,0 |)18 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | _ 2 | - | 4,2 | 43,0 | 500 |
| 3 | Revenue less expenses Subtract line 2 from line 1 | 3 | - | 4,0 | 46,4 | 418 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 5 | 5,6 | 01,2 | 230 |
| 5 | Other changes in net assets or fund balances (explain in Schedule O) | 5 | | 1,9 | 91,: | <u>117</u> |
| 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 | 5 | 7,6 | 56,5 | <u>531</u> |
| Pa | rt XII Financial Statements and Reporting | | | | | |
| | Check if Schedule O contains a response to any question in this Part XII | | | | | X |
| | | | | | 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 O | | | ļ : | | ĺ |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | | 2a | | <u> </u> |
| b | Were the organization's financial statements audited by an independent accountant? | | | 2b | X | |
| С | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight | | | | | ĺ |
| | of the audit, review, or compilation of its financial statements and selection of an independent accountant? | | | 2c | X | |
| | If the organization changed either its oversight process or selection process during the tax year, explain in | | | | | |
| | Schedule O | | | | | |
| d | If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were | | | | | |
| | issued on a separate basis, consolidated basis, or both | | | | | İ |
| | Separate basis X Consolidated basis Both consolidated and separate basis | | | Ì | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in | | |] | | |
| | the Single Audit Act and OMB Circular A-133? | | | 3a | | <u>X</u> |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the | | |] | | |
| | required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits | | | 3b | | |
| | | | | Fo | m 99 0 | (2011) |

SCHEDULE A (Form 990 or 990-EZ)

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.

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

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Part I

3

COMMUNITY FOUNDATION OF NORTHEAST IOWA

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

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

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

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

Employer identification number 42 - 6060414

| 4 | | | - ' | d in conjunction with a hospital of | described | ın sectio | n 170(b |)(1)(A)(i | ii). Ente | er the h | ospital's name, | |
|-------------|---------------|-----------------|---------------------------------|---|------------|------------------------|-----------|-------------|---------------------|------------|----------------------------|----|
| 5 | \Box | city, and state | | -6 H | | ad bu a a | | ntal | t donor | had in | | |
| 5 | Ш | - | · | of a college or university owned | or operati | ed by a g | overnme | entai uni | t descri | bea in | | |
| c | | - | b)(1)(A)(iv). (Complete Part | | 4: 47 | /0/L\/4\/A | V. A | | | | | |
| 6 | X | | - | overnmental unit described in s | | | | for an Alba | | ماطيما | | |
| 7 | | = | <u>-</u> | substantial part of its support fro | om a gove | ernmenta | unit or | nom the | genera | ii public | , | |
| | \Box | | section 170(b)(1)(A)(vi). (C | | | | | | | | | |
| 8 | \vdash | - | | 170(b)(1)(A)(vi). (Complete Part | | | | | | | | |
| 9 | Lj | | | 1) more than 33 1/3% of its supp | | | | | | | oss | |
| | | | | npt functions—subject to certain | | | | | | | | |
| | | | • | nd unrelated business taxable in | | | | () from b | usines | ses | | |
| | $\overline{}$ | | - | 0, 1975 See section 509(a)(2). | | | | | | | | |
| 10 | | _ | • | exclusively to test for public safe | - | | | | | | | |
| 11 | \Box | • | • | exclusively for the benefit of, to | | | | | | | | |
| | | | | ed organizations described in se | | | | | | section | 1 | |
| | | | | he type of supporting organizati | | | nes 11e | | | | | |
| | | a Type | | c Type III–Function | | | d (| | e III–Ot | | | |
| е | | | | anization is not controlled direc | | | | | | | | |
| | | | • | er than one or more publicly sup | ported or | ganization | ns descr | ibed in s | section | 509(a)(| 1) | |
| | | or section 509 | | | | | | | | | | |
| f | | If the organiza | ation received a written dete | ermination from the IRS that it is | a Type I, | Type II, | or Type | III suppo | orting | | | _ |
| | | • | check this box | | | | | | | | | |
| g | | Since August | 17, 2006, has the organiza | tion accepted any gift or contrib | ution from | n any of th | ne | | | | | |
| | | following per | | | | | | | | | | |
| | | (i) A person | who directly or indirectly co | ontrols, either alone or together | with perso | ons descr | ibed in (| II) and | | | Yes | No |
| | | (III) belov | v, the governing body of the | supported organization? | | | | | | | 11g(i) | |
| | | (ii) A family | member of a person describ | ped in (i) above? | | | | | | | 11g(ii) | |
| | | (iii) A 35% c | ontrolled entity of a person of | described in (i) or (ii) above? | | | | | | | 11g(iii) | |
| h | | Provide the f | ollowing information about t | he supported organization(s) | 1 | | | | | | | |
| (1) | | e of supported | (ii) EIN | (Ili) Type of organization | 1 | organization | | ou notify | (vi) i organizat | is the | (vii) Amount of support | |
| | org | anization | | (described on lines 1-9 above or IRC section | | sted in your document? | col (i) | of your | (i) organi | zed in the | зарроп | |
| | | | | (see instructions)) | | | | oort? | — | S? | | |
| | | | | | Yes | No | Yes | No | Yes | No | · | |
| (A) | | | | | | | | | | | | |
| (B) | | | | | | | | | | | | |
| (υ, | | | | | 1 | | | | | | | |
| (C) | | | | | | | | | | | | |
| | | | | | ļ | | | | | | | |
| (D) | | | | | | | | | | | | |
| | | | | | ļ | | | | | | · | |
| | | | | | 1 | 1 | 1 | | I | | | |
| (E) | | | | | | | | ł | 1 | 1 | 1 | |
| (E) | | | | | | | | - | | | | |
| (E) Tota | 1_ | | | | | | | | | | Form 990 or 990-EZ) | |

42-6060414

Page 2

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.)

| | tion A. Public Support | | ······ | | | | |
|-------|---|----------------------|----------------------|------------------------|---------------------|-----------|--------------|
| Cale | ndar year (or fiscal year beginning in) 🕨 | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") | 7,931,844 | 7,131,786 | 5,884,405 | 7,391,399 | 6,980,283 | 35,319,717 |
| 2 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 3 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 4 | Total. Add lines 1 through 3 | 7,931,844 | 7,131,786 | 5,884,405 | 7,391,399 | 6,980,283 | 35,319,717 |
| 5 | The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | |
| 6 | Public support. Subtract line 5 from line 4 | | | | | | 35,319,717 |
| | tion B. Total Support | | | | | | |
| Caler | ndar year (or fiscal year beginning in) 🕨 | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
| 7 | Amounts from line 4 | 7,931,844 | 7,131,786 | 5,884,405 | 7,391,399 | 6,980,283 | 35,319,717 |
| 8 | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 1,158,857 | 764,846 | 401,879 | 1,208,966 | 1,309,735 | 4,844,283 |
| 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 | | | | | | 40,164,000 |
| 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, fou | ırth, or fifth tax yea | r as a section 501 | (c)(3) | |
| | organization, check this box and stop here | | | | | | • |
| Sec | tion C. Computation of Public Su | upport Percen | tage | | | | |
| 14 | Public support percentage for 2011 (line 6, | , column (f) divided | by line 11, colum | n (f)) | - | 14 | 87.94% |
| 15 | Public support percentage from 2010 Sche | | | | | 15 | 88.63% |
| 16a | 33 1/3% support test—2011. If the organi | ization did not ched | k the box on line | 13, and line 14 is 3 | 3 1/3% or more, c | heck this | |
| | box and stop here. The organization quali | fies as a publicly s | upported organiza | tion | | | ▶ [X] |
| ь | 33 1/3% support test—2010. If the organi | | | • | 5 is 33 1/3% or mo | ore, | |
| | check this box and stop here. The organiz | | | - | | | ▶ [_] |
| 17a | 10%-facts-and-circumstances test—201 | • | | | • | | |
| | 10% or more, and if the organization meet | | | | | | |
| | Part IV how the organization meets the "fa | cts-and-circumstar | nces" test. The org | anization qualifies | as a publicly supp | oorted | |
| | organization | | •. • | | | | ▶ [|
| b | 10%-facts-and-circumstances test—201 | _ | | • | • | | |
| | 15 is 10% or more, and if the organization | | | • | - | | |
| | Explain in Part IV how the organization me | ets the Tacts-and- | circumstances" te | st The organizatio | n qualifies as a pu | iblicly | . □ |
| 40 | supported organization | | - 11 40 40 40 | . 49 49 | -1.46:- 6 | | . ▶ ⊔ |
| 18 | Private foundation. If the organization did | not check a box o | n iine 13, 16a, 16i | o, 1/a, or 17b, che | ck this box and se | e | ▶ □ |
| | instructions | | | · <u>-</u> | • | | |

Part II 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 qualify under the tests listed below, please complete Part II.)

| Sec | tion A. Public Support | quality diluci ti | ic tests listed i | ociow, picase e | ompicte i are ii | ·/ | |
|-------------------|--|-------------------|----------------------|-----------------------|--------------------|--------------|-----------|
| | ndar year (or fiscal year beginning in) | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants") | | | | | | |
| 2 | Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 | Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 | The value of services or facilities furnished by a governmental unit to the organization without charge | | · | | | | |
| 6 | Total. Add lines 1 through 5 | | | | | | |
| 7a | Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | |
| b | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | |
| С | Add lines 7a and 7b | | | | | | |
| 8 | Public support (Subtract line 7c from line 6) | | | | | | |
| | tion B. Total Support | | | | , | , | |
| Caler | ndar year (or fiscal year beginning in) 🕨 | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
| 9 | Amounts from line 6 | | | ļ | | | |
| 10a | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | |
| b | Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| С | Add lines 10a and 10b | | | | | | <u> </u> |
| 11 | Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) | | | | | | |
| 13 | Total support. (Add lines 9, 10c, 11, | | | | | | |
| | and 12) | L | | l | L | <u> </u> | L |
| 14 | First five years. If the Form 990 is for the organization, check this box and stop her | • | t, second, third, fo | urth, or fifth tax ye | ar as a section 50 | 1(c)(3) | ▶ □ |
| Sec | tion C. Computation of Public Su | | age | | · · | | |
| 15 | Public support percentage for 2011 (line 8 | | | nn (fl) | ·· | 15 | % |
| 16 | Public support percentage from 2010 Scho | | = | (.,, | | 16 | % |
| | tion D. Computation of Investme | | | | | | |
| 17 | Investment income percentage for 2011 (I | | | s, column (f)) | | 17 | % |
| 18 | Investment income percentage from 2010 | | | | | 18 | % |
| 19a | 33 1/3% support tests—2011. If the orga | | | e 14, and line 15 is | more than 33 1/3 | %, and line | |
| - | 17 is not more than 33 1/3%, check this be | | | | | | ▶ 🗌 |
| b | 33 1/3% support tests—2010. If the orga | | | | | | |
| - | line 18 is not more than 33 1/3%, check th | | | | | | ▶ 🗌 |
| 20 | Private foundation. If the organization did | | | | | | ▶. |

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. OMB No 1545-0047 Open to Public

► Attach to Form 990. ► See separate instructions. Internal Revenue Service Inspection Employer identification number Name of the organization COMMUNITY FOUNDATION OF NORTHEAST 42-6060414 IOWA Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 84 809 Total number at end of year 5,218,199 1,586,322 Aggregate contributions to (during year) 313,229 3,957,609 Aggregate grants from (during year) 47,732,835 9,780,599 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised X Yes No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose X Yes conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Part II Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of an historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2a a Total number of conservation easements 2b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear Number of states where property subject to conservation easement is located

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

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

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)

(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and

balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

4.242.211

\$

Schedule D (Form 990) 2011

Yes No

Yes No

184,208

| | · · · · · · · · · · · · · · · · · · · | Y FOUNDATIO | | | | 060414 | | | Page 2 |
|-----------|--|-------------------------|---------------------------------------|---------------------------------------|------------------------|-----------------|-------------|---------------------------------------|--|
| | rt III Organizations Maintaini | | | | | | ssets | (contin | ued) |
| 3 | Using the organization's acquisition, access collection items (check all that apply) | ssion, and other record | s, check any of the foll | lowing that a | ire a signifi | cant use of its | | | |
| а | X Public exhibition | d 🗌 | Loan or exchange pro- | grams | | | | | |
| ь | Scholarly research | е 🗍 | Other | | | | | | |
| C | Preservation for future generations | | | | | | | | |
| 4 | Provide a description of the organization's | collections and explain | how they further the | organization | 's exempt _l | purpose in Part | | | |
| | XIV. | | - | _ | | | | | |
| 5 | During the year, did the organization solicit assets to be sold to raise funds rather than | | | | | | | ☐ Ye | x X No |
| Pa | rt IV Escrow and Custodial A | | | | | L"Yes" to Fo | rm 99 | | |
| | line 9, or reported an amo | | | | | | | , | ••• |
| 1a | Is the organization an agent, trustee, custo | | ·, | r other asse | ts not | | | | |
| | included on Form 990, Part X? | | , | | | | | Yes | s No |
| b | If "Yes," explain the arrangement in Part X | IV and complete the fo | Illowing table | | | | | | |
| | 3 | | gg | | | | | Amount | |
| С | Beginning balance | | | | | 1c | | | |
| | Additions during the year | | | | | 1d | | | |
| | Distributions during the year | | | | | 1e | | - | |
| f | Ending balance | | | | | 1f | | | |
| 2a | Did the organization include an amount on | Form 990 Part X line | 212 | | | | | Yes | S No |
| | If "Yes," explain the arrangement in Part X | | . 21. | | | | | | , [] NO |
| | Endowment Funds. Com | | zation answered " | 'Yes" to F | orm 990 | Part IV line | 10 | | |
| | 211401111011111111111111111111111111111 | (a) Current year | (b) Prior year | (c) Two ye | | (d) Three years | | (a) Four | years back |
| 12 | Beginning of year balance | 45,116,387 | 37,573,080 | | 92,359 | 35,033 | | | years back |
| .u | Contributions | 4,156,534 | | | 26,843 | 3,796 | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| | | 4,130,331 | 3,120,100 | 2,3 | 20,643 | 3,190 | ,036 | | |
| · | Net investment earnings, gains, and tosses | -742,847 | 4 271 712 | £ 1 | 20 545 | 7 106 | 060 | | |
| | | 1,008,622 | 4,371,713 990,409 | | 38,545 | -7,126 | | | |
| | Grants or scholarships | 1,008,622 | 990,409 | 1,0. | 36,871 | 6// | ,486 | | |
| 9 | Other expenditures for facilities and | | | | | | | | |
| | programs | 764,778 | 1 022 007 | | 47 706 | | 004 | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| ' ~ | Administrative expenses | 46,756,674 | | | 47,796 | | ,294 | | ·t |
| y | End of year balance | | · · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · | 73,080 | 30,792 | , 339 | <u> </u> | ····· |
| 2 | Provide the estimated percentage of the cu | | e (line 1g, column (a)) | held as | | | | | |
| | Board designated or quasi-endowment | % | | | | | | | |
| | Permanent endowment > % | 0, | | | | | | | |
| C | Temporarily restricted endowment ▶ | % | | | | | | | |
| 2- | The percentages in lines 2a, 2b, and 2c sh | ·=' | | | | | | | |
| Sa | Are there endowment funds not in the poss | session of the organiza | ition that are held and | administered | d for the | | | _ | |
| | organization by: | | | | | | | | Yes No |
| | (i) unrelated organizations | | | | | | | 3a(i) | <u> </u> |
| _ | (ii) related organizations | | | | | | | 3a(ii) | X |
| | If "Yes" to 3a(ii), are the related organization | | | | | | | _3b | |
| 4 | Describe in Part XIV the intended uses of t | | | -10 | | | | · · · · · · · · · · · · · · · · · · · | |
| <u>ra</u> | rt Vi Land, Buildings, and Eq | | | | | | | | |
| | Description of property | (a) Cost or other b | 1 | | | ccumulated | | (d) Book va | alue |
| | | (investment) | (othe | er) | de | preciation | — | | |
| | Land | | | | | | ļ | | |
| | Buildings | | | | | | <u> </u> | | |
| | Leasehold improvements | | | 28,874 | | 22,661 | | | <u>6,213</u> |
| | Equipment | | | 36,843 | | 17,975 | | 1 | 8,868 |
| | Other | | | 39,470 | | 38,723 | 4 | | 747 |
| Total | . Add lines 1a through 1e (Column (d) mus | t equal Form 990, Part | X, column (B), line 10 | (c)) | | <u> </u> | 1 | 2 | 5,828 |

| Schedule D (f | Form 990) 2011 COMMUNITY FOUNDATION | N OF NORTHEAST | 42-6060414 | Page 3 |
|----------------|---|-----------------------|--------------------------------|---|
| Part VII | Investments—Other Securities. See Form | 990, Part X, line 12. | | |
| | (a) Description of security or category | (b) Book value | (c) Method of va | iluation |
| | (including name of security) | | Cost or end-of-year r | narket value |
| (1) Financial | derivatives | | | |
| (2) Closely-he | eld equity interests | | | |
| (3) Other | | | | |
| (A) | | | | |
| (B) | | | | |
| (C) | | | | |
| (D) | | | | |
| (E) | | | | |
| (F) | | | | |
| (G) | | | | |
| (H) | | | | |
| (1) | | | | |
| | in (b) must equal Form 990, Part X, col. (B) line 12) | > | | |
| Part VIII | Investments—Program Related. See Form | 990, Part X, line 13. | | |
| | (a) Description of investment type | (b) Book value | (c) Method of va | aluation |
| | | | Cost or end-of-year | market value |
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| (5) | | | - | - |
| (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) | | | | |
| (10) | | | | |
| | in (b) must equal Form 990, Part X, col. (B) line 13) | > | | |
| Part IX | Other Assets. See Form 990, Part X, line 15 |). | | |
| | (a) Description | | | (b) Book value |
| (1) | PERMENANT ART COLLECT | ION | | 4,242,211 |
| (2) | CASH VALUE LIFE INSUR | | | 327,603 |
| (3) | | | | |
| (4) | | | | |
| (5) | | | | |
| (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) | | | | |
| (10) | | | | |
| | nn (b) must equal Form 990, Part X, col. (B) line 15.) | | > | 4,569,814 |
| Part X | Other Liabilities. See Form 990, Part X, line | 25. | | · · · · · · · · · · · · · · · · · · · |
| 1. | (a) Description of liability | (b) Book value | | , , , , , , , , , , , , , , , , , , , |
| | Income taxes | | 1 | • |
| (2) | | | 1 | |
| (3) | | | 1 ' , | |
| (4) | | | ` | |
| (5) | | | 1 . | |
| (6) | | | | • |
| (7) | | | 1 ′ | |
| (8) | | | 1 | ` |
| (9) | | | 1 | • • |
| (10) | | | † | . • |
| (11) | | | 1 | |
| | nn (b) must equal Form 990, Part X, col. (B) line 25.) | > | 1 | |
| | SC 740) Footpote In Part XIV provide the text of the footpo | | in etatements that reports the | <u> </u> |

organization's liability for uncertain tax positions under FIN 48 (ASC 740).

| Sche | edule D (Form 990) 2011 COMMUNITY FOUNDATION OF NORTHEAST 42-606041 | 4 | Page 4 |
|------|--|------|-------------------------|
| ρį | art XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statem | ents | |
| 1 | Total revenue (Form 990, Part VIII, column (A), line 12) | 1 | 8,290,018 |
| 2 | Total expenses (Form 990, Part IX, column (A), line 25) | 2 | 4,243,600 |
| 3 | Excess or (deficit) for the year Subtract line 2 from line 1 | 3 | 4,046,418 |
| 4 | Net unrealized gains (losses) on investments | 4 | -1,991,117 |
| 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 | -1,991,117 |
| 10 | Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 | 10 | 2,055,301 |
| Pa | art XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Re | urn | |
| 1 | Total revenue, gains, and other support per audited financial statements | 1 | 6,298,901 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12 | | |
| а | Net unrealized gains on investments 2a -1,991,117 | | |
| b | Donated services and use of facilities 2b | | |
| С | Recoveries of prior year grants | | |
| | Other (Describe in Part XIV) | | |
| е | Add lines 2a through 2d | 2e | -1,991,117 |
| 3 | Subtract line 2e from line 1 | 3 | -1,991,117 8,290,018 |
| 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 | | |
| | Other (Describe in Part XIV) | | |
| С | Add lines 4a and 4b | 4c | |
| 5 | Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | 5 | 8,290,018 |
| Pa | rt XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per F | etur | n |
| 1 | Total expenses and losses per audited financial statements | 1 | 4,243,600 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25 | | |
| а | Donated services and use of facilities 2a | 1 | |
| b | Prior year adjustments 2b | - | |
| Ç | Other losses 2c | | |
| d | Other (Describe in Part XIV) | | |
| е | Add lines 2a through 2d | 2e | |
| 3 | Subtract line 2e from line 1 | 3_ | 4,243,600 |
| 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 | 4c | |
| 5 | Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | 5 | 4,243,600 |

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

5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Part XIV Supplemental Information

PART III, LINE 4 - COLLECTIONS AND RELATION TO EXEMPT PURPOSE COLLECTIONS CONSIST OF WORKS OF ART DONATED TO, AND PURCHASED BY, THE FOUNDATION. THE FOUNDATION ACCEPTS DONATIONS OF ART ON BEHALF OF THE CITY OF WATERLOO AND THEN LOANS THE ART TO LOCAL MUSEUMS FOR PUBLIC EXHIBITION.

PART V, LINE 4 - INTENDED USES FOR ENDOWMENT FUNDS THE USE OF THE ENDOWMENT INCOME IS EITHER UNRESTRICTED OR TEMPORARILY Part XIV Supplemental Information (continued)

RESTRICTED BASED UPON THE WISHES OF THE DONOR. THE CORPUS OF THE ENDOWMENT IS AVAILABLE FOR SPENDING BASED UPON THE DONOR'S INTENT.

PART X - FIN 48 FOOTNOTE

MANAGEMENT ANNUALLY MAKES AN APROPRIATE EVALUATION OF ANY UNCERTAIN INCOME TAX POSITIONS BASED UPON CURRENT STATUES IN COMPLETING THESE FINANCIAL STATEMENTS AND THE NOTES TO THE FINANCIAL STATEMETHS. AT DECEMBER 31, 2011, 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 2008-2011.

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Grants and Other Assistance to Organizations,

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OMB No 1545-0047

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Open to Public Inspection (h) Purpose of grant or assistance Yes 277 to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000 Part II can be duplicated if additional space is needed × Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" non-cash assistance (g) Description of Employer identification number 42-6060414 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States (e) Amount of noncash assistance ▶ Attach to Form 990. 1,429,098 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table COMMUNITY FOUNDATION OF NORTHEAST (c) IRC section f applicable General Information on Grants and Assistance (b) EIN the selection criteria used to award the grants or assistance? (a) Name and address of organization (1) SEE ATTACHED SCHEDULE or government IOWA Department of the Treasury Internal Revenue Service Name of the organization Part Part 8 6 6 3 3 3 9 9

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2011) ▶ 186

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| Name, address, and zip | EIN | IRC Code | Cash Grant | Amount of non- | Method of valuation [Book, FMV, ap | Description of non-cash assistance | Purpose of Grant or Assistance |
|---|------------|------------|-------------|----------------|-------------------------------------|--|---|
| American Legion- Harold E. Smith Post 54,601 3rd St PO Box 191 Victor, IA 52347 | 42-0836133 | 501(c)(19) | \$23,681 88 | | | | Expand front landing/canopy and add emergency exit |
| American Legion- Harold E. Smith Post 54,601 3rd St. PO Box 191 Victor, IA 52347 Total | | | \$23,681.88 | | | | |
| Bartels Lutheran Retirement Community Foundation,1922 5th Ave NW Waverly, IA 50677 | 42-1251643 | 501(C)3 | \$4,000 00 | | | | NuStep exercise equipment |
| Bartels Lutheran Retirement Community Foundation,1922 5th Ave NW Waverly, IA 50677 | 42-1251643 | 501(C)3 | \$10,000 00 | | | | "Bartels Annual Fund Campaign" (\$5000) and Bartels "Good Shephard Fund" (\$5000) |
| Bartels Lutheran Retirement Community Foundation,1922 5th Ave. NW Waverly, IA 50677 Total | | | \$14,000.00 | | | | |
| Benton County Disaster Recovery Coalition, PO Box 125 Vinton, IA 52349 | 26-3381606 | 501(c)(3) | \$7,500 00 | | | | immediate response to county disaster circumstances |
| Benton County Disaster Recovery Coalition,PO Box 125 Vinton, IA 52349 Total | | | \$7,500.00 | | | | |
| in Development Group,303-1st Avenue Vinton, IA 52349 | 42-1347303 | S01(c)(4) | \$7,000.00 | | | | Benton Development Marketing |
| Buchanan County Animal Shelter, 750 6th Street PO Box 708 Jesup, 1A 50648 | 27-2760278 | 501(C)3 | \$10,000 00 | | | | No-kill shelter in Buchanan County |
| Buchanan County Animal Shelter,750 6th Street PO Box 708 Jesup, IA 50648 Total | | | \$10,000.00 | | | | |
| Buchanan County Fair Association, PO Box 258 Independence, IA 50644 | 42-0158722 | 501(c)(5) | \$10,000.00 | | | | Light Up Our Fair |
| Buchanan County Fair Association,PO Box 258 Independence, IA 50644 Total | | | \$10,000.00 | | | | |
| Buchanan County Historical Society,PO Box 321 Independence, IA 50644 | 43-9623122 | 501(C)3 | \$10,000 00 | | - | | Wapsipinicon Mill Roof Restoration Project |
| Buchanan County Historical Society,PO Box 321 Independence, IA 50644 Total | | | \$10,000.00 | | | | |
| Buffalo Center Historical Society,PO Box 265 Buffalo Center, 1A 50424 | 26-1731518 | 501(C)3 | \$5,000.00 | | | : | Heritage Museum display cases |
| Buffalo Center Historical Society,PO Box 265 Buffalo Center, IA 50424 Total | | | \$5,000.00 | | | • | |
| Cedar Falls Historical Society,303 Clay Street Cedar Falls, IA 50613 | 42-1123674 | | \$10,000 00 | | | | Ice House "Frozen in Time" Campaign (\$5000) and Cedar Falls Historical Society general operating expenses (\$5000) |
| Cedar Falls Historical Society,303 Clay Street Cedar Falls, IA 50613 Total | | | \$10,000.00 | | | | |
| City of Armstrong,PO Box 229 Armstrong, IA 50514 | 42-6004240 | 170(c)(1) | \$9,650 00 | | | | Concrete for basketball court at SE Neighborhood Park |
| City of Armstrong,PO Box 229 Armstrong, IA 50514 | 42-6004240 | 170(c)(1) | \$4,000 00 | ļ | | | Harrison Park/Armstrong Little League- Installation of Sewer line & Lift Pump for concession/restroom facility |

| City of Denver, 100 Washington Denver, IA 50622 | | _ | | | • |
|--|---------------|-----------|-------------|---|--|
| | 1 | 1 | \$13,650.00 | | |
| | 42-6004500 17 | 170(c)(1) | \$4,000 00 | | Police Dept- Mobile Data Terminals (in-car computers) |
| City of Denver, 100 Washington Denver, IA 50622 | 42-6004500 17 | 170(c)(1) | \$2,000 00 | | Fire Dept- Laptop & accessories |
| City of Denver, 100 Washington Denver, IA 50622 Total | | | \$6,000.00 | | |
| City of Estherville, 2 North 7th St PO Box 417 Esterville, IA 51334 | 42-6004647 17 | 170(c)(1) | \$10,000 00 | | Fire Dept- SCBA & Face Piece Replacement |
| City of Estherville, 2 North 7th St. PO Box 417 Esterville, IA 51334 Total | | | \$10,000.00 | | |
| City of Forest City,305 N Clark St Forest City, IA 50436 | 42-6004669 17 | 170(c)(1) | \$5,650 00 | | Parks & Recreation- Shelter House in Woodland Park |
| City of Forest City, 305 N. Clark St. Forest City, IA 50436 Total | | _ | \$5,650.00 | | |
| | 42-1189541 17 | 170(c)(1) | \$5,000.00 | | Windows & Cupboards for Community Building |
| City of Frederika, PO Box C Fredrika, IA 50631 Total | | | \$5,000.00 | | |
| , IA 50644 | 42-6004793 17 | 170(c)(1) | \$10,000.00 | | Liberty Trail- Trailhead Rehab |
| City of independence, 331 1st St. East Independence, IA 50644 Total | | | \$10,000.00 | | |
| | 42-0888768 17 | 170(c)(1) | \$6,000.00 | | Fire Dept- Jaws of Life & Extrication air bags |
| City of Janesville, 227 Main St. PO Box 146 Janesville, la 50647 | 42-0888768 17 | 170(c)(1) | \$5,000.00 | : | First Responders- Training & Equipment |
| City of Janesville, 227 Main St. PO Box 146 Janesville, la 50647 | 42-0888768 17 | 170(c)(1) | \$1,500.00 | _ | Police Dept- Narrow band radio for patrol car |
| | 42-0888768 1 | 170(c)(1) | \$6,000.00 | | Bicycle/Pedestrian Bridge |
| a 50647 Total | _ | | \$18,500.00 | | |
| City of Lake Mills, 105 W Main St. Lake Mills, IA 50450 | 42-6004852 1 | 170(c)(1) | \$10,000 00 | | Fire Department- Protective turnout gear |
| City of Lake Mills, 105 W. Main St. Lake Mills, 1A 50450 | 42-6004852 17 | 170(c)(1) | \$2,000.00 | | Moving communication equip, from elevator to water tower & updating for compliance |
| City of Lake Mills, 105 W. Main St. Lake Mills, IA 50450 Total | | | \$12,000.00 | | |
| shalltown, IA | 42-6004934 | 170(c)(1) | \$1,500.00 | | 18-Hole Disc Golf Course in Riverview Park |
| Marshalltown- Parks & Recreation,10 W. State St. Marshalltown, IA | 42-6004934 1. | 170(c)(1) | \$10,000 00 | | Marshalltown Skatepark |
| City of Marshalltown- Parks & Recreation, 10 W. State St. Marshalltown, IA 42-6. 50158 | 42-6004934 1. | 170(c)(1) | \$840.00 | | Purchase of an aquatic wheelchair for Aquatic Center |
| City of Marshalltown- Parks & Recreation,10 W. State St. Marshalltown, IA 50158 Total | | | \$12,340.00 | | |
| in City,10 First St. NW Mason City, IA 50401 | 42-6004948 1 | 170(c)(1) | \$2,700 00 | | Youth Task Force- Computer replacement |
| City of Mason City,10 First St. NW Mason City, IA 50401 | 42-6004948 1. | 170(c)(1) | \$1,500.00 | | Friends of the 457 - Phase 2 restoration of 1912 Steam Locomotive |
| City of Mason City,10 First St. NW Mason City, IA 50401 | 42-6004948 1 | 170(c)(1) | \$395.58 | | Volunteer Services/Beautification Committee - Flower Gardens |
| City of Mason City,10 First St NW Mason City, IA 50401 | 42-6004948 | 170(c)(1) | \$750 00 | - | Earth Day Committee - Citywide Clean-Up & Earth Day event |
| City of Mason City,10 First St. NW Mason City, IA 50401 | 42-6004948 | 170(c)(1) | \$2,500 00 | | Friends of Parker's Woods- Playground |
| City of Mason City,10 First St. NW Mason City, iA 50401 | 42-6004948 | 170(c)(1) | \$1,500 00 | | Police Dept- External Automated Defibrillator |
| City of Mason City,10 First St. NW Mason City, IA 50401 Total | | | \$9,345.58 | | |

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| City of Meservey PO Box 246 428 1st Street Meservey. IA 50457-0246 | 42-6024587 | 170(c)(1) | \$5.000.00 | Fire & Rescue- Pneumatic Lift Stretcher |
|---|------------|-----------|------------|--|
| City of Meservey,PO Box 246 428 1st Street Meservey, IA 50457-0246 Total | | | \$5,000.00 | |
| City of Readlyn,128 Main St. PO Box 70 Readlyn, IA 50668-0070 | 42-6005139 | 170(c)(1) | \$1,700 00 | Police Dept- Narrow Band radio equipment |
| City of Readlyn,128 Main St PO Box 70 Readlyn, IA 50668-0070 | 42-6005139 | 170(c)(1) | \$1,500 00 | Police Dept- Narrow Band radio equipment |
| City of Readlyn,128 Main St PO Box 70 Readlyn, IA 50668-0070 | 42-6005139 | 170(c)(1) | \$3,000 00 | Volunteer Fire Dept- Communication upgrade |
| City of Readlyn,128 Main St PO Box 70 Readlyn, IA 50668-0070 | 42-6005139 | 170(c)(1) | \$2,100 00 | Volunteer Fire Dept- Communication upgrade |
| City of Readlyn, 128 Main St. PO Box 70 Readlyn, 1A 50668-0070 Total | | | \$8,300.00 | |
| City of Ringsted,112 W Maple Street P O Box 278 Ringsted, IA 50578 | 42-6005153 | 170(c)(1) | \$5,000 00 | Evening Out Club- Railroad Park Shelter House re-roofing |
| City of Ringsted, 1.12 W. Maple Street P O Box 278 Ringsted, IA 50578 Total | | | \$5,000.00 | |
| City of Rockwell,PO Box 446 114 1st St. N. Rockwell, IA 50469 | 42-6005163 | 170(c)(1) | \$3,927 00 | Rockwell Chamber of Commerce- 4th of July Fireworks |
| City of Rockwell,PO Box 446 114 1st St. N. Rockwell, IA 50469 | 42-6005163 | 170(c)(1) | \$2,500 00 | Volunteer Fire Dept- Jaws of Life equipment |
| City of Rockwell, PO Box 446 114 1st St. N. Rockwell, IA 50469 Total | | | \$6,427.00 | |
| City of Tama,305 Slegel St. Tama, IA 52339 | 42-6005273 | 170(c)(1) | \$4,000.00 | 3rd Street Park Equipment |
| City of Tama,305 Siegel St. Tama, IA 52339 | 42-6005273 | 170(c)(1) | \$3,195.00 | Tama Mapping project |
| City of Tama, 305 Siegel St Tama, IA 52339 | 42-6005273 | 170(c)(1) | \$1,000 00 | Oak Hill Cemetery repair & landscaping |
| City of Tama 205 Clanal Ct Tama 1A 5,3220 | 47-6005273 | 170/071 | | Tama-Toledo Area Chamber of Commerce- |
| כול כו ומוומ, טכט טוכקבו טר. ימוומ, וא שבמט | 277000-74 | 110001 | 00000 | welcome sign on hwy 30 bypass (steps, electrical, landscaping) |
| City of Tama, 305 Siegel St. Tama, IA 52339 Total | | | \$9,195.00 | |
| City of Thompson,167 2nd Ave. West PO Box 25 Thompson, IA 50478 | 42-6005276 | 170(c)(1) | \$5,800 00 | Rebel Pool Lift Chair |
| City of Thompson,167 2nd Ave. West PO Box 25 Thompson, IA 50478 Total | | | \$5,800.00 | |
| City of Traer, 649 Second Street Traer, IA 50675 | 42-6005289 | 170(c)(1) | \$5,000 00 | Traer Theatre- digital/3D projector |
| City of Traer,649 Second Street Traer, IA 50675 | 42-6005289 | 170(c)(1) | \$1,000 00 | Entrance Sign Committee- 3 signs for Traer |
| City of Traer, 649 Second Street Traer, IA 50675 Total | | | \$6,000.00 | |
| City of Van Horne, PO Box 359 115 Main St Van Horne, IA 52346 | 42-6005296 | 170(c)(1) | \$5,000 00 | Van Horne Community Center & Public Library Project |
| City of Van Horne, PO Box 359 115 Main St. Van Horne, IA 52346 Total | | | \$5,000.00 | |
| City Of Vinton,PO Box 529 110 West 3rd St. Vinton, IA 52349 | 42-6005303 | 170(c)(1) | \$5,500 00 | 2012 Vinton Street Tree Replanting Program |
| City Of Vinton,PO Box 529 110 West 3rd St. Vinton, IA 52349 | 42-6005303 | 170(0)(1) | \$2,375 00 | Vinton Fireman's Association- 2012 Vinton Fire Department Fan project |
| City Of Vinton, PO Box 529 110 West 3rd St. Vinton, IA 52349 Total | | | \$7,875.00 | |
| Communities in Schools, 213 E. 4th Street Waterloo, IA 50703 | 42-1444315 | 501(c)(3) | \$5,000 00 | Targeted academic and group support services for Education Promise Fund students |
| Communities in Schools, 213 E. 4th Street Waterloo, IA 50703 Total | | | \$5,000.00 | |

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| East Buchanan Community Schools,414 5th Street North Winthrop, IA 50682 | 42-6038751 | 170(c)(1) | \$5,000 00 | | Special Ed Department- Technology |
|--|------------|-----------|-------------|---|--|
| East Buchanan Community Schools,414 5th Street North Winthrop, IA 50682 Total | | | \$5,000.00 | | |
| Emmet County Conservation Board, 2303 - 450th Avenue Wallingford, IA 51365 | 42-6004648 | 170(c)(1) | \$10,000 00 | | Wolden Campground Electrical Improvements |
| Emmet County Conservation Board, 2303 - 450th Avenue Wallingford, IA 51365 Total | | | \$10,000.00 | | |
| Emmet County Extension, 26 S. 17th St. Estherville, IA 51334 | 42-6021421 | 170(c)(1) | \$5,215 00 | | PROSPER Team- Strenthening Families Program for Armstrong-Ringsted |
| Emmet County Extension, 26 S 17th St. Estherville, IA 51334 | 42-6021421 | 170(c)(1) | \$2,861 50 | | Youth Clover Kids Program |
| Emmet County Extension, 26 S. 17th St Estherville, IA 51334 | 42-6021421 | 170(c)(1) | \$10,000 00 | | PROSPER Team- Strenthening Families Program for Estherville |
| Emmet County Extension, 26 S. 17th St Estherville, IA 51334 | 42-6021421 | 170(c)(1) | \$3,827 00 | | Youth Summer Day Camps |
| Emmet County Extension, 26 S. 17th St. Estherville, IA 51334 Total | | | \$21,903.50 | | |
| Faith Baptist Bible College & Theological Seminary,1900 NW Fourth St Ankeny, IA 50023 | 47-0394397 | 501(C)3 | \$5,000 00 | | 2012 Scholarships |
| Faith Baptist Bible College & Theological Seminary,1900 NW Fourth St. Ankeny, IA 50023 Total | | | \$5,000.00 | | |
| Forest City Ambulance Service, 625 Highway 9 East Forest City, IA 50436 | 42-1050190 | 501(C)3 | \$5,000 00 | - | FC Emergency Services Center |
| Forest City Ambulance Service,625 Highway 9 East Forest City, IA 50436 Total | | | \$5,000.00 | | |
| Forest City Firefighters Association, 246 East K St PO Box 328 Forest City, IA 50436 | 30-0176189 | 501(C)3 | \$5,000 00 | | FC Emergency Services Center |
| Forest City Firefighters Association, 246 East K St PO Box 328 Forest City, IA 50436 Total | | | \$5,000.00 | | |
| Friends of CMH - Sumner Community Memorial Hospital Foundation,PO Box 148 909 1st St. Sumner, IA 50674 | 42-1408693 | 501(C)3 | \$5,000 00 | | Stryker Zoom Carts |
| Friends of CMH - Sumner Community Memorial Hospital Foundation,PO Box 148 909 1st St. Sumner, IA 50674 Total | | | \$5,000.00 | | |
| From the Heart Fund, 745 Boston Ave. Waterloo, IA 50703 | 42-6060414 | | \$84 67 | | From the Heart Expenses for May 2012 |
| From the Heart Fund,745 Boston Ave Waterloo, IA 50703 | 42-6060414 | | \$7,884 24 | - | From the Heart Program Expenses for July 2012 |
| From the Heart Fund, 745 Boston Ave. Waterloo, IA 50703 | 42-6060414 | | \$138.79 | | From the Heart Expenses for June 2012 |
| From the Heart Fund, 745 Boston Ave. Waterloo, IA 50703 Total | | | \$8,107.70 | | |
| Fund-Friends of Fontana Park Expendable Fund, | | | \$31.36 | | FFP Gift Shop puzzles |
| Fund-Friends of Fontana Park Expendable Fund, | | | \$66 00 | | FFP snake exhibit insurance |
| Fund-Friends of Fontana Park Expendable Fund, | | | \$53.97 | | Programs |
| Fund-Friends of Fontana Park Expendable Fund, | | | \$170 00 | | FFP educational supplies - Monarch Tags for Programs |
| Fund-Friends of Fontana Park Expendable Fund, | | | \$15 60 | | FFP Nature Center aquarium food |
| Fund-Friends of Fontana Park Expendable Fund, | | | \$8 26 | | Educational Program |
| Fund-Friends of Fontana Park Expendable Fund, | | | \$224 64 | | FFP pop purchase |
| Fund-Friends of Fontana Park Expendable Fund, | | | \$155 10 | | FFP gift shop supplies |
| Fund-Friends of Fontana Park Expendable Fund, | | | \$80 00 | | Reimbursement for cancelled program |
| Fund-Friends of Fontana Park Expendable Fund, | | | \$180.83 | | FFP Summer program educational supplies |
| | | | | | |

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| Fund-Friends of Fontana Park Expendation Fund, | 5 0 | 243.07 | Programs |
|--|------------|-----------------|---|
| FUNG-Friends of Fontana Park Expendable Fund, | 10 | 515.40 | Nature Center Aquarium Food |
| Fund-Friends of Fontana Park Expendable Fund, | \$18 | \$187.20 | Purchase of Pop |
| Fund-Friends of Fontana Park Expendable Fund, | \$2; | 17 80 | FFP animal display- meds for animals |
| Fund-Friends of Fontana Park Expendable Fund, | \$15 | \$156 62 | Summer Programs |
| Fund-Friends of Fontana Park Expendable Fund, | \$\$ | \$56 97 | Nature Center display |
| Fund-Friends of Fontana Park Expendable Fund, | \$17 | \$120 00 | Summer Programs |
| Fund-Friends of Fontana Park Expendable Fund, | .6\$ | \$914 84 | Newsletters printed |
| Fund-Friends of Fontana Park Expendable Fund, | \$8 | \$81.37 | Gift Shop |
| Fund-Friends of Fontana Park Expendable Fund, | \$ \$1 | \$14.70 | FFP Programs & animal food |
| Fund-Friends of Fontana Park Expendable Fund, | \$1: | \$151.97 | Gift Shop supplies |
| Fund-Friends of Fontana Park Expendable Fund, | \$115 | \$150 00 | Scholarship- Outdoor Adventures Program |
| Fund-Friends of Fontana Park Expendable Fund | \$1 | \$12.20 | Brass plates-dopations |
| Fund-Friends of Fontana Park Expendable Fund. | \$25 | \$240.75 | Gift Shop supplies |
| Fund-Friends of Fontana Park Expendable Fund, | \$25 | \$246 03 | Gift Shop supplies |
| Fund-Friends of Fontana Park Expendable Fund, | \$11 | \$150.00 | Outdoor Adventures Trip Scholarship |
| Fund-Friends of Fontana Park Expendable Fund, | \$15 | \$181.44 | Gift Shop |
| Fund-Friends of Fontana Park Expendable Fund, | \$10 | \$109 11 | Gift Shop |
| Fund-Friends of Fontana Park Expendable Fund, | \$25 | \$253 30 | Gift Shop supplies |
| Fund-Friends of Fontana Park Expendable Fund, | \$2 | \$25.00 | Summer Camp Refund |
| Fund-Friends of Fontana Park Expendable Fund, | \$\$ | \$57.69 | Reimbursement for Summer Program supplies |
| Fund-Friends of Fontana Park Expendable Fund. | \$3(| 5300 46 | Gift Shop supplies |
| Find-Friends of Eontana Park Expendable Find | 75 | \$41.13 | Programs & Animal Food |
| Fund-Friends of Fontana Park Experioable Fund | 7 3 | 54112 543632 | Educational cumples |
| Const Calendar of Contract Constant Linear | | 6144.13 | ממלי לי היים מילי לי היים מילי לי היים מילי לי היים מילי לי היים מילי לי היים מילי לי היים מילי לי היים מילי לי |
| Fund-Friends or Fontana Park Expendable Fund, | 17. | 71.14 | FFF girt snop |
| Fund-Friends of Fontana Park Expendable Fund, | 82 | 583 42 | FFF animal tood |
| Fund-Friends of Fontana Park Expendable Fund, | 51 | \$16.80 | FFP Nature Center aquarium food |
| Fund-Friends of Fontana Park Expendable Fund, | \$ | \$93.60 | FFP purchase of pop |
| Fund-Friends of Fontana Park Expendable Fund, | 25 | \$713 61 | FFP gift shop supplies |
| Fund-Friends of Fontana Park Expendable Fund, | 8\$ | \$85.00 | FFP gift shop |
| Fund-Friends of Fontana Park Expendable Fund, | s\$ | \$59.02 | FFP educational supplies-summer programs |
| Fund-Friends of Fontana Park Expendable Fund, | 3\$ | \$83.33 | FFP gift shop |
| Fund-Friends of Fontana Park Expendable Fund, | 9\$ | \$627.78 | FFP newsletters printed |
| Fund-Friends of Fontana Park Expendable Fund, | 25 | \$22.77 | FFP tape for newsletters |
| Fund-Friends of Fontana Park Expendable Fund, | 7\$ | \$47.94 | FFP mailing labels for newsletters |
| Fund-Friends of Fontana Park Expendable Fund, | \$1 | \$10.46 | FFP Programs |
| Fund-Friends of Fontana Park Expendable Fund, | \$1 | \$14.40 | Nature Center Aquarium food |
| Fund-Friends of Fontana Park Expendable Fund, | 3\$ | \$85.00 | FFP Summer Camps |
| Fund-Friends of Fontana Park Expendable Fund, | \$1 | \$149 76 | FFP purchased pop |
| Fund-Friends of Fontana Park Expendable Fund, | \$2 | \$299.52 | Purchase of pop for FFP |
| Fund-Friends of Fontana Park Expendable Fund, | \$1 | \$134 19 | FFP gift shop puzzles |
| Fund-Friends of Fontana Park Expendable Fund, | \$ | \$26 85 | FFP Nature Center aquarium food |
| Fund-Friends of Fontana Park Expendable Fund, | 9\$ | \$66 21 | FFP animal food |
| Fund-Friends of Fontana Park Expendable Fund, | 3\$ | \$52.23 | FFP Animal food |
| Fund-Friends of Fontana Park Expendable Fund, | 7\$ | \$48.76 | FFP Newsletter- tape, address labels |
| | | | |
| | | | |
| | | | |

| Fund-Friends of Fontana Park Expendable Fund, | | \$37.40 | | FFP Summer Program |
|---|---|-------------|---|--|
| Fund-Friends of Fontana Park Expendable Fund, | | \$55.96 | | FFP Eductional program |
| Fund-Friends of Fontana Park Expendable Fund, | | \$10.95 | | Reimbursement for FFP NOOK apps |
| Fund-Friends of Fontana Park Expendable Fund, | | \$61 67 | | FFP Animal food |
| Fund-Friends of Fontana Park Expendable Fund, | | \$6 49 | | FFP Nature Center Display |
| Fund-Friends of Fontana Park Expendable Fund, | | \$32 70 | | Programs |
| Fund-Friends of Fontana Park Expendable Fund, | | \$84 13 | | FFP camps, snake exhibit and animal food |
| Fund-Friends of Fontana Park Expendable Fund, | | \$174 57 | | FFP animal food, hose, summer camps |
| Fund-Friends of Fontana Park Expendable Fund, | | \$29 18 | | FFP Programs |
| Fund-Friends of Fontana Park Expendable Fund, | | \$16 18 | | Educational supplies |
| Fund-Friends of Fontana Park Expendable Fund, | | \$203 00 | | NC Display |
| Fund-Friends of Fontana Park Expendable Fund, | | \$10.80 | | Purchase of pop |
| Fund-Friends of Fontana Park Expendable Fund, | | \$144 99 | | Animal display food |
| Fund-Friends of Fontana Park Expendable Fund, | | \$5 09 | | Brass plates-donations |
| Fund-Friends of Fontana Park Expendable Fund, | | \$21 60 | | Nature Center aquarium food |
| Fund-Friends of Fontana Park Expendable Fund, | | \$153 60 | | Display |
| Fund-Friends of Fontana Park Expendable Fund, | | \$38 25 | | Display |
| Fund-Friends of Fontana Park Expendable Fund, | | \$1,000 00 | | Newsletter mailing postage |
| Fund-Friends of Fontana Park Expendable Fund, | | \$7.80 | | Nature Center aquarium food |
| Fund-Friends of Fontana Park Expendable Fund, | | \$109 42 | | Animal display food |
| Fund-Friends of Fontana Park Expendable Fund, | | \$41 66 | | Educational supplies |
| Fund-Friends of Fontana Park Expendable Fund, | | \$59.38 | | Program supplies |
| Fund-Friends of Fontana Park Expendable Fund, | | \$7 00 | | Animal display-meds for animals |
| Fund-Friends of Fontana Park Expendable Fund, | | \$106 60 | | Program |
| Fund-Friends of Fontana Park Expendable Fund, | | \$120.00 | | Gift shop- guidebooks |
| Fund-Friends of Fontana Park Expendable Fund, | | \$10.00 | | Reimbursement for Animal food |
| Fund-Friends of Fontana Park Expendable Fund, | | \$42 46 | | Programs |
| Fund-Friends of Fontana Park Expendable Fund, | | \$190 00 | | Bulk mail permit |
| Fund-Friends of Fontana Park Expendable Fund, | | \$239.40 | | Gift shop supplies |
| Fund-Friends of Fontana Park Expendable Fund, | | \$24 28 | | Brass plate-donations |
| Fund-Friends of Fontana Park Expendable Fund, | | \$10 30 | | Nature Center aquarium food |
| Fund-Friends of Fontana Park Expendable Fund, | | \$62.89 | | Nature Center display |
| Fund-Friends of Fontana Park Expendable Fund, | | \$93 60 | | Purchased pop |
| Fund-Friends of Fontana Park Expendable Fund, | | \$21.80 | | Nature Center aquarium food |
| Fund-Friends of Fontana Park Expendable Fund, | | \$56.02 | | Programs |
| Fund-Friends of Fontana Park Expendable Fund, | | \$40 00 | | Redworms |
| Fund-Friends of Fontana Park Expendable Fund, | | \$394.70 | | Gift Shop supplies |
| Fund-Friends of Fontana Park Expendable Fund, | | \$463 00 | | Grover Timber sign |
| Fund-Friends of Fontana Park Expendable Fund, | | \$165 00 | | Program expenses |
| Fund-Friends of Fontana Park Expendable Fund, | | \$9.95 | | Animal display - meds for animals |
| Fund-Friends of Fontana Park Expendable Fund, | | \$179 48 | | Purchase of pop |
| Fund-Friends of Fontana Park Expendable Fund, | | \$24.00 | | Nature Center display |
| Fund-Friends of Fontana Park Expendable Fund, | | \$26.80 | | Nature Center aquarium food |
| Fund-Friends of Fontana Park Expendable Fund, | | \$29 38 | | Programs |
| Fund-Friends of Fontana Park Expendable Fund, Total | | \$12,642.68 | | |
| | | | | Reimbursement to City of Waterloo for costs |
| Fund-Mark's Park Fund, | | \$31,995 00 | | related to construction and design of Mark's |
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| Fund-Mark's Park Fund. | 00 000 000\$ | | Reimbursement for the City of Waterloo for |
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| | | | Mark's Park |
| Fund-Mark's Park Fund, Total | \$231,995.00 | 0 | |
| Fund-Winneshiek County Community Foundation Fund,507 W Water St. Decorah, IA 52101 | 00 009\$ | | Contracted services for April 2012 |
| Fund-Winneshiek County Community Foundation Fund,507 W. Water St. Decorah, IA 52101 | \$1,800 00 | | WCCF Contracted services for May, June & July 2012 |
| Fund-Winneshiek County Community Foundation Fund,507 W Water St Decorah, IA 52101 | \$173 01 | | WCCF meeting snacks/supplies for July board meeting, office supplies and departing gift for Mary Ann & Mindy from WCCF board |
| Fund-Winneshiek County Community Foundation Fund,507 W Water St. Decorah, IA 52101 | \$133,546 82 | 2 | Reimbursement to the City of Decorah for the |
| Fund-Winneshiek County Community Foundation Fund,507 W. Water St Decorah, iA 52101 | \$69,982 96 | | Reimbursement for costs related to construction of Trout Run Trail- Segments 10 & |
| Fund-Winneshlek County Community Foundation Fund,507 W Water St. Decorah, IA 52101 | \$77.44 | | Reimbursement for mileage for Mary Ann's |
| Fund-Winneshiek County Community Foundation Fund,507 W Water St. Decorah, IA 52101 | \$172,159.88 | 8 | Reimbursement for Construction of Trout Run Trail (Semments 10.8.11) |
| Fund-Winneshiek County Community Foundation Fund,507 W. Water St. Decorah, IA 52101 | \$52.28 | | Reimbursement for WCCF copy machine usage |
| Fund-Winneshiek County Community Foundation Fund,507 W. Water St. Decorah, IA 52101 | \$600 00 | | Contracted services for March 2012 |
| Fund-Winneshiek County Community Foundation Fund,507 W Water St. Decorah, IA 52101 | \$183.04 | | Reimbursement for CONNECT Conference |
| Fund-Winneshiek County Community Foundation Fund,507 W Water St. Decorah, IA 52101 | \$101.40 | | Reimbursement for meeting snacks for grant groun and hoard meeting |
| Fund-Winneshlek County Community Foundation Fund,507 W Water St. Decorah, IA 52101 | \$600 00 | | Contracted services for WCCF for February 2012 |
| Fund-Winneshlek County Community Foundation Fund,507 W. Water St. Decorah, IA 52101 Total | \$379,876.83 | 3 | |
| Greater Cedar Valley Alliance,10 West Fourth Street Suite 310 Waterloo, IA 50701 | \$18,098 56 | | Reimbursement for expenses incurred related to Leader Valley projects at Edison/Becker |
| Greater Cedar Valley Alliance, 10 West Fourth Street Suite 310 Waterloo, IA 50701 | \$20,000 00 | | My Waterloo Days Support for 2012 Event |
| Greater Cedar Valley Alliance,10 West Fourth Street Suite 310 Waterloo, IA 50701 | \$10,440 71 | | Reimbursement for expneses incurred related to Leader Valley projects Facilitator Training & Linch Flements of the Particle Flements of the Partic |
| Greater Cedar Valley Alliance, 10 West Fourth Street Suite 310 Waterloo, IA 50701 | \$1,000 00 | | Diversity and Inclusion Multi-cultural Reception to be held August 9th 2012 |
| Greater Cedar Valley Alliance, 10 West Fourth Street Suite 310 Waterloo, IA 50701 | \$1,396 30 | | Payment for materials for Fred Becker Flementary for Leader in MF Project |
| Greater Cedar Valley Alliance,10 West Fourth Street Suite 310 Waterloo, IA 50701 Total | \$50,935.57 | | |
| | | | |

| Hawkeye Valley Area Agency on Aging,2101 Kimbali Avenue, Ste 320 Waterloo, IA 50702 | 52-1621262 | 501(C)3 | \$5,000 00 | Hot/Cold Delivery truck for Bremer County Home Delivered Meals/Congregate Meals |
|--|------------|-----------|-------------|--|
| Hawkeye Valley Area Agency on Aging, 2101 Kimball Avenue, Ste 320 Waterloo, IA 50702 | 52-1621262 | 501(C)3 | \$500 00 | Hot/Cold Delivery truck for Bremer County Home Delivered Meals/Congregate Meals |
| Hawkeye Valley Area Agency on Aging, 2101 Kimball Avenue, Ste. 320 Waterloo, IA 50702 Total | | | \$5,500.00 | |
| Independence Public Library Foundation,805 1st St East Independence, IA 50644 | 20-5528960 | 501(C)3 | \$5,485 00 | GATE (Greater Access to E-reading) for the Community |
| Independence Public Library Foundation,805 1st St East Independence, IA 50644 | 20-5528960 | 501(C)3 | \$500 00 | Author Week (04/16/12-04/21/12) |
| Independence Public Library Foundation,805 1st St East Independence, IA 50644 | 20-5528960 | 501(C)3 | \$350.00 | Summer Reading Program- Adult & Teen Dream Big Createl Series |
| Independence Public Library Foundation,805 1st St East Independence, IA 50644 Total | | | \$6,335.00 | |
| lowa County Extension, 2253 Hwy 6 Trail Marengo, IA 52301 | 42-6021437 | 170(c)(1) | \$800 00 | 4-H On Wheels |
| lowa County Extension,2253 Hwy 6 Trail Marengo, IA S2301 | 42-6021437 | 170(c)(1) | \$5,000 00 | Pick-A-Better Snack Nutrition Education for Youth |
| lowa County Extension, 2253 Hwy 6 Trail Marengo, IA 52301 Total | | | \$5,800.00 | |
| lowa County Historical Society, PO Box 288 Marengo, IA 52301-0288 | 23-7043875 | 501(C)3 | \$12,000 00 | Victor Depot- New Siding |
| lowa County Historical Society,PO Box 288 Marengo, IA 52301-0288 Total | | | \$12,000.00 | |
| lowa Department of Natural Resources, 109 Trowbridge Hall Iowa City, IA 52242-1319 | 42-6004572 | 170(c)(1) | \$5,000.00 | Project AWARE (A Watershed Awareness River Expedition) |
| lowa Department of Natural Resources, 109 Trowbridge Hall Iowa City, IA 52242-1319 Total | | | \$5,000.00 | |
| Iowa Valley Community College District/Orpheum Theatre Ctr ,3702 S. Center St. Marshalltown, IA 50158 | 42-0926714 | 170(c)(1) | \$5,000.00 | Adult Literacy (GED/ESL/Job training) scholarships |
| Iowa Valley Community College District/Orpheum Theatre Ctr.,3702 S. Center St. Marshalltown, IA 50158 | 42-0926714 | 170(c)(1) | \$2,500.00 | Leadership Class of 2012 - Center Street Beautificiation |
| lowa Valley Community College District/Orpheum Theatre Ctr.,3702 S Center St. Marshalltown, IA S0158 | 42-0926714 | 170(c)(1) | \$6,500 00 | Orpheum Theater Center - Jean Seberg International Film Festival |
| lowa Valley Community College District/Orpheum Theatre Ctr.,3702 S. Center St. Marshalltown, IA 50158 Total | | | \$14,000.00 | |
| Izaak Walton League- Three Rivers Chapter, 1953 3rd Street SW Waverly, IA 50677 | 42-1222440 | 501(C)3 | \$6,000 00 | Indoor handicapped accessible restroom |
| Izaak Walton League- Three Rivers Chapter,1953 3rd Street SW Waverly, IA 50677 Total | | | \$6,000.00 | |
| Jesup Community School District, PO Box 287 531 Prospect St. Jesup, IA 50648 | 42-6002171 | 170(c)(1) | \$4,000.00 | High School Science- Spring Creek Watershed |
| Jesup Community School District,PO Box 287 531 Prospect St. Jesup, IA 50648 | 42-6002171 | 170(c)(1) | \$28,860.37 | High School- Reimbursement for track expenses |
| Jesup Community School District, PO Box 287 531 Prospect St. Jesup, IA 50648 | 42-6002171 | 170(c)(1) | \$1,322.00 | Middle School "Fly High With Science" project |
| Jesup Community School District, PO Box 287 531 Prospect St Jesup, IA 50648 | 42-6002171 | 170(c)(1) | \$8,780.75 | Reimbursement for invoices paid for the new |

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| Jesup Community School District, PO Box 287 531 Prospect St. Jesup, IA 50648 Total | | | \$42,963.12 | |
|--|------------|-----------|-------------|--|
| Lake Mills Area Historical Society,308 N. Lincoln St Joice, IA 50446 | 31-1654738 | 501(C)3 | \$7,620.00 | Handicapped accessible brick walkway at Victorian House |
| Lake Mills Area Historical Society, 308 N. Lincoln St. Joice, IA 50446 Total | | | \$7,620.00 | |
| Lake Mills Chamber Development Corp, 203 N 1st Avenue West PO Box 182 Lake Mills, IA 50450 | 42-1116685 | 501(c)(6) | \$10,000 00 | Stateline OHV Club - Construct ATV Park in Lake Mills |
| Lake Mills Chamber Development Corp,203 N 1st Avenue West PO Box 182 Lake Mills, IA 50450 Total | | | \$10,000.00 | |
| Marshalltown Development Foundation,PO Box 164 Marshalltown, IA 50158 | 42-1493686 | 501(C)3 | \$6,000 00 | Mtown Central Business District - Pedestrian Walkway |
| Marshalltown Development Foundation, PO Box 164 Marshalltown, IA 50158 Total | | | \$6,000.00 | |
| Mental Health Clinic of Tama County,1309 South Broadway PO Box 7 Toledo, IA 52342 | 42-1229218 | 501(c)(3) | \$5,500 00 | Computer server |
| Mental Health Clinic of Tama County, 1309 South Broadway PO Box 7 Toledo, 1A 52342 Total | | | \$5,500.00 | |
| Montour Volunteer Fire Dept, PQ Box 120 103 W Elm St Montour, IA 50173 | 42-1371914 | 501(C)3 | \$5,000 00 | Pagers & radios |
| Montour Volunteer Fire Dept, PO Box 120 103 W Elm St. Montour, IA 50173 Total | | | \$5,000.00 | |
| Mustang Foundation, Inc., PO Box 229 Independence, IA 50644 | 42-1429135 | 501(C)3 | \$8,000 00 | Auditorium at new Jr/Sr High School |
| | 3000 | | 00000 | Construction and support of the Independence JR/SR High School with a 700 seat auditorium to |
| Mustang Foundation, Inc., PO Box 229 Independence, IA 50644 | 47-1473135 | SUI(c)3 | 00 0000 | enhance the support of the arts in the |
| Mustang Foundation, Inc., PO Box 229 Independence, IA 50644 Total | | | \$8,500.00 | |
| North English Community Center, 210 S. Main St. PO Box 262 North English, IA 52316 | 42-1105354 | 501(C)3 | \$9,181.00 | New furnace & air-conditioning units |
| North English Community Center, 210 S. Main St. PO Box 262 North English, IA 52316 Total | | | \$9,181.00 | |
| Northeast lowa Food Bank, PO Box 2397 Waterloo, IA 50704 | 42-1169648 | 501(c)(3) | \$2,000.00 | BackPack Program |
| Northeast Iowa Food Bank, PO Box 2397 Waterloo, IA 50704 | 42-1169648 | 501(c)(3) | \$3,000 00 | Elderly Nutrition Program |
| Northeast Iowa Food Bank, PO Box 2397 Waterloo, IA 50704 | 42-1169648 | 501(c)(3) | \$1,000 00 | Kıds' Cafe |
| Northeast Iowa Food Bank, PO Box 2397 Waterloo, IA 50704 | _ | 501(c)(3) | \$3,000 00 | BackPack Program |
| Northeast lowa Food Bank, PO Box 2397 Waterloo, IA 50704 | 42-1169648 | 501(c)(3) | \$250 00 | General Chantable Support |
| Northeast Iowa Food Bank, PU Box 2397 Waterloo, IA 50/04 Total | 47 1450011 | 21.7/102 | \$9,250.00 | |
| Rural Employment Alternatives, Inc., 495 4th Ave. Conroy, IA 52220 Total | 45-1130011 | 301(c/3 | \$5,000.00 | เพิ่มนะวิจะเวอบรู Equipment |
| Scarville Firemen's Association, 103 E. 2nd St. PO Box 76 Scarville, IA 50473 | 26-3612991 | S01(C)3 | \$12,053.00 | Communications & Personal firefighter protection |
| Scarville Firemen's Association,103 E. 2nd St. PO Box 76 Scarville, IA 50473 Total | | | \$12,053.00 | |
| St. Athanasıus School,641 Stevens St. P O Box 288 Jesup, IA 50648-0288 | 42-0698081 | 501(C)3 | \$5,000 00 | Community Awareness (sign) & Continuing Technology Improvements |

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|---|------------|-----------|-------------|---|
| Total | | | \$5,000.00 | |
| Tama County,104 W State St. PO Box 61 Toledo, IA 52342 | 42-6005285 | 170(c)(1) | \$5,190 90 | Tama County 911 Services- Narrowbanding & equipment update |
| Tama County, 104 W. State St. PO Box 61 Toledo, IA 52342 Total | | | \$5,190.90 | |
| Tama County Conservation Board, 2283 Park Rd. Toledo, IA 52342 | 42-6005285 | 170(c)(1) | \$5,000 00 | Tree plantings (post-storm recovery) and Digital A/V hardware for environmental education |
| Tama County Conservation Board, 2283 Park Rd. Toledo, IA 52342 Total | | | \$5,000.00 | |
| The Old Creamery Theatre Co ,39 38th Ave Amana, IA 52203 | 42-0985212 | 501(C)3 | \$5,000 00 | Theatrical Lighting System Upgrade |
| The Old Creamery Theatre Co., 39 38th Ave Amana, IA 52203 Total | | | \$5,000.00 | |
| Town of Scarville,121 Main St. Scarville, 1A 50473 | 42-1188439 | 170(c)(1) | \$5,858.00 | Shelter & Message Center for new postal boxes |
| Town of Scarville, 121 Main St. Scarville, 1A 50473 Total | | 1 | \$5,858.00 | |
| Tripoli Community School District, 209 8th Ave. SW Tripoli, IA 50676 | 42-6024182 | 170(c)(1) | \$6,000 00 | Elementary School Safe & Secure |
| Tripoll Community School District, 209 8th Ave. SW Tripoli, IA 50676 Total | | | \$6,000.00 | |
| University of Iowa Foundation,PO Box 4550 Iowa City, IA 52244-4550 | 42-0796760 | 501(C)3 | \$10,000 00 | lowa Kidsight- Vision screening technology for lowa County children |
| | | | | Buchanan County Lions Clubs/lowa Kidsight- |
| University of Iowa Foundation, PO Box 4550 Iowa City, IA 52244-4550 | 42-0796760 | 501(C)3 | \$6,000 00 | Updating vision-screening technology |
| University of Iowa Foundation, PO Box 4550 Iowa City, IA 52244-4550 Total | | | \$16,000.00 | |
| Van Horne Lions Club, 400 8th Van Horne, 1A 52346 | 42-6076348 | 501(C)4 | \$8,894.88 | Lions Clubs of Benton County. Benton County KidSight Digital Camera |
| Van Horne Lions Club, 400 8th Van Horne, 1A 52346 Total | | | \$8,894.88 | |
| Vining Volunteer Fire Department, PO Box 26 Vining, IA 52348 | 42-1227554 | 501(C)3 | \$5,000.00 | Hand-held radios & pagers |
| Vining Volunteer Fire Department, PO Box 26 Vining, IA 52348 Total | | | \$5,000.00 | |
| Wapsie Valley Community Schools, 2535 Viking Avenue Fairbank, 1A 50668 | 42-6025836 | 170(c)(1) | \$1,500 00 | Elementary- Mimeo White Boards & Accessories |
| Wapsie Valley Community Schools, 2535 Viking Avenue Fairbank, IA 50668 | 42-6025836 | 170(c)(1) | \$5,000 00 | Fairbank Elementary- Interactive Mimeo Whiteboards |
| Wapsie Valley Community Schools, 2535 Viking Avenue Farrbank, IA 50668 | 42-6025836 | 170(c)(1) | \$2,000.00 | Junior/Senior High- Mimeo White Boards & Accessories |
| Wapsie Valley Community Schools, 2535 Viking Avenue Fairbank, IA 50668 Total | | | \$8,500.00 | |
| Waterloo Center for the Arts, | | | \$7,591.53 | Reimbursement to Kent Shankle for shipping costs paid for Mexico art acquisitions |
| Waterloo Center for the Arts, | | | \$992 40 | Reimbursement to Steve Gerberich for his travel expenses for the delivery and installation of the "Bholor Form" |
| | | | | Reimbursement to Kent Shankle for payment of |
| Waterloo Center for the Arts, | | | \$548 78 | shipping charges for 2012 acquisitions from Mexico trip |
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| Waterloo Center for the Arts, | | \$28.812.75 | 2.75 | | Reimbursement to the City of Waterloo for the |
| | | | | | store art |
| | | | | | Reimbursement for WCA travel expenses for |
| Waterloo Center for the Arts, | | \$300 00 | 8 | | final installment and completion of "Phelps |
| | | | | | Farm" for the Youth Pavilion |
| | | | | | Reimbursement to City of Waterloo for final |
| Waterloo Center for the Arts, | - | \$52,653 09 | | | pmnt to OSDI Spacesaver, Des Moines to store |
| | | | | | art work |
| | | - | | | Reimbursent to Chawne Paige for flight expense |
| Waterloo Center for the Arts, | | \$692 45 | 45 | | for trip to Nassau, Bahamas on Aug 11-Sept |
| | - | | | | 10, 2012 for cultural exchange residency |
| | | | | | WCA advancement of per diem (\$35/day) for |
| Waterloo Center for the Arts | | ¢735 00 | | | Chawne Paige's travel to Nassau, Bahamas, Aug |
| | | · · | | | 11-Sept 10, 2012 for Cultural exchange |
| Waterlan Center for the Arte Total | | | | | residency |
| - 1 | | \$92,326.00 | 000 | | |
| Waterland Community Colon 1515 Marchaelland Williams Colons | 0,000 | * | | | Reimbursement for student transportation to |
| waterioo community stridos, 1510 washington St. Waterioo, 14 50/02 | 42-5003910 | \$3,404.25 | | | Camp Invention for elementary students |
| | | | | | 2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - |
| Waterloo Community Schools,1516 Washington St Waterloo, IA 50702 | 42-6003910 | \$1,098.12 | .12 | | Cement, labor and storage of the assembly of the bus shelters |
| Waterloo Community Schools, 1516 Washington St. Waterloo, IA 50702 | 42-6003910 | \$131 00 | 00 | | Plaques for Bus Shelters |
| | | | | | |
| Waterloo Community Schools 1516 Washington St. Waterloo Lo 60203 | 47 5003010 | | | - | Reimbursement of student registration fees for |
| אמנבונסס בסווווונים אול אוני איני איני איני איני איני איני איני | 0168009-74 | 00 525,9 5 | | | students attending Camp Invention |
| | | | | | Reimbursement for Rockford Files t-shirt |
| Waterloo Community Schools,1516 Washington St. Waterloo, IA 50702 | 42-6003910 | \$26.98 | 80 | • | purchase for Scott Martinson from Martinson |
| | | | | | Construction |
| Waterloo Community Schools,1516 Washington St. Waterloo, IA 50702 | 42-6003910 | \$4,037 43 | 43 | | Benches and installation |
| Waterloo Community Schools, 1516 Washington St. Waterloo, IA 50702 Total | | \$13,022.78 | .78 | | |
| | | | | | Reimbursement for dress code clothing |
| Waterloo Community Schools General Expendable Fund, | | \$11,458 65 | | | purchased for Waterloo Community Schools |
| Waterloo Community Schools General Expendable Fund Total | | \$11 458 65 | , ec | | lainines |
| | | \$301.48 | 8 | | 1.14 |
| Waterloo Public Library Fund | | 2224 | | | Adult print |
| Waterloo Public Library Fund. | | \$25 74 | | | Adult print |
| | | | | | Aguit print |
| Waterloo Public Library Fund, | | \$1,197.81 | 81 | | Shared costs of Harry Potter party/activities |
| Waterloo Public Library Fund, | | \$751 64 | 7.0 | | Adult orint |
| Waterloo Public Library Fund, | | \$1,330,00 | 8 | | Second floor remodeling plans |
| Waterloo Public Library Fund, | | \$142.18 | 8 | | Adult print |
| Waterloo Public Library Fund, | | \$1,017.76 | 76 | | Adult print |
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| Waterloo Public Library Fund, | | \$30 95 | Adult print | |
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| Waterloo Public Library Eund | | \$745.20 | Reimburse author in residence/CVYR for airfare (45576 20), change in flight (575 00), taxis | R for airfare |
| | | | (\$94 00) | |
| | | | Reimbursement for petty cash used for | for |
| Waterloo Public Library Fund, | | \$22.74 | refreshments served to Demco reps on March | on March |
| Waterloo Public Library Fund, | | \$171 93 | Adult print | |
| Waterloo Public Library Fund, | | \$195.70 | Adult print | |
| Waterloo Public Library Fund, | | \$9819 | Book plates | |
| Waterloo Public Library Fund, | | \$675.35 | Hotel for author | |
| Waterloo Public Library Fund, | \$ | \$11,705 00 | Author in residence/CVYR | |
| Waterloo Public Library Fund, | | \$53 05 | Posters and bookmarks for CVYR | |
| Waterloo Public Library Fund, | | \$150.00 | Genealogy presentation via Skype on 04/03/12 | in 04/03/12 |
| Waterloo Public Library Fund, | | \$1,140 00 | Architect services for 2nd floor remodeling | odeling |
| Waterloo Public Library Fund, | | \$3,030 71 | CD/DVD display starter and add-on for youth department | for youth |
| Waterloo Public Library Fund, | | \$257 53 | WPL Android tablet for training purposes | poses |
| Waterloo Public Library Fund, | | \$27.98 | WPL Adult DVD & music CD | |
| Waterloo Public Library Fund, | | \$69.00 | WPL- Posters for programming events | nts |
| Waterloo Public Library Fund, | | \$220 00 | WPL copyright compliance/license for showing films for multiplic yearing | or showing |
| Waterloo Public Library Fund, | | \$308 75 | WPL 2nd floor remodel | |
| Waterloo Public Library Fund, | | \$426 40 | Adult book on CD | |
| Waterloo Public Library Fund, | | \$290.14 | Adult & youth print | |
| Waterloo Public Library Fund, | | \$44 32 | Adult print | |
| Waterloo Public Library Fund, | | \$36.98 | Adult DVD | |
| Waterloo Public Library Fund, | | \$99 00 | Apple license for Boopsie-reimbursement to petty cash | ement to |
| Waterloo Public Library Fund, | | \$5,000 00 | WPL shared costs with CFPL for OverDrive Incense & hosting | rDrive |
| Waterloo Public Library Fund, | | \$43 13 | WPL Youth Print | |
| Waterloo Public Library Fund, | | \$380 00 | Book on CD | |
| Waterloo Public Library Fund, | | \$4,960.00 | One-Click Digital (formerly One-Click Audio) | k Audio) |
| Waterloo Public Library Fund, | | \$34 10 | Adult print | |
| Waterloo Public Library Fund, | | \$101 70 | Books for classrooms | |
| Waterloo Public Library Fund, | | \$867 50 | Second floor library remodel plans | |
| Waterloo Public Library Fund, | | \$163 97 | Teen video games | |
| Waterloo Public Library Fund, | | \$2,767.14 | Adult & teen CD, teen DVD | |
| Waterloo Public Library Fund, | | \$343.09 | Adult & youth print | |
| Waterloo Public Library Fund, | | \$189 54 | Adult print | |
| Waterloo Public Library Fund, | | \$224.51 | Teen video games | |
| Waterloo Public Library Fund, | | \$58.63 | Adult print | |
| Waterloo Public Library Fund, | | \$1,277 19 | Adult & youth print | |
| Waterloo Public Library Fund, | | 3771 00 | JWPL Adult & Youth print | |

| Waterloo Public Library Fund, | | | \$376 83 | Teen DVD |
|---|------------|-----------|-------------|--|
| Waterloo Public Library Fund, | | | \$225.79 | Adult print |
| Waterloo Public Library Fund, | | | \$113 57 | Adult print |
| Waterloo Public Library Fund, | | | \$353 47 | Adult print |
| Waterloo Public Library Fund, Total | | | \$42,250.03 | |
| Waterloo Youth Hockey Association, PO Box 2041 Waterloo, IA 50704 | 42-1222500 | 501(C)3 | \$5,000 00 | High School Hockey Program Development- Scholarships & Support |
| Waterloo Youth Hockey Association,PO Box 2041 Waterloo, IA 50704 Total | | | \$5,000.00 | |
| Waverly Child Care and Preschool, 1600 W Bremer Ave PO Box 34 Waverly, IA 50677 | 42-0956003 | 501(C)3 | \$1,000 00 | Replacing all cribs |
| Waverly Child Care and Preschool,1600 W Bremer Ave PO Box 34 Waverly, IA 50677 | 42-0956003 | S01(C)3 | \$4,000 00 | Replacing all cribs |
| Waverly Child Care and Preschool, 1600 W. Bremer Ave. PO Box 34 Waverly, IA 50677 Total | | | \$5,000.00 | |
| Winnebago County Extension, PO Box 47 183 First Ave. Thompson, IA 50478 | 42-6021485 | 170(c)(1) | \$5,000 00 | Renovation/Updates of 4-H Foodstand |
| Winnebago County Extension,PO Box 47 183 First Ave. Thompson, IA 50478 Total | | | \$5,000.00 | |
| Young Leaders in Action Fund, | | | \$117 50 | Spring YLA Conference printing costs |
| Young Leaders in Action Fund, | | | \$350 00 | Facilitator Training given by Character Counts personnel on March 19, 2012 at Allen College, |
| Young Leaders in Action Fund, | | | \$147 63 | Reimbursement for speaker mileage to Spring YLA- April 12, 2012 |
| Young Leaders in Action Fund, | | | \$1,255.60 | T-shirts for YLA Spring 2012 Leadership Conference on 4-12-2012 |
| Young Leaders in Action Fund, | | | \$3,297 86 | Reimbursment for supplies for Spring 2012 YLA Conference and payment for the coordinator |
| | | | ¢c 168 so | tee |
| Young Leaders in Action Fund, Total | | | CC:007/c¢ | |

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| | art # Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Par |

Page 2

| | ו מוניוו כמון כב מתלווכמוכת זו מתחומה שלמכב וא ווכבתבי | אים שלפים היים אים היים היים היים היים היים היי | | | | |
|---------|--|---|------------------------|-------------------------|--------------------------------|---|
| | (a) Type of grant or assistance | (a) Number of | (c) Amount of | (d) Amount of | (e) Method of valuation (book, | (e) Method of valuation (book, (f) Description of non-cash assistance |
| | | recipients | cash grant | non-cash assistance | FMV, appraisal, other) | |
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| Part IV | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information | plete this part to prov | ide the information re | equired in Part I, line | 2. and any other additional | Information |

THE FOUNDATION REQUIRES A GRANT REPORT FOR ALL GRANTS OVER \$5,000 THAT ARE FOR A SPECIFIC PURPOSE. GRANTEES ARE SENT REMINDER LETTERS IF REPORTS ARE REQUIREMENTS AND ACCOUNTING REQUIREMENTS BEFORE THE MONEY IS GIVEN. THEN NOT FILED ON TIME. FOR GENERAL CHARITABLE SUPPORT GRANTS OVER \$5000, THE GRANTEE MAY JUST SUBMIT ANNUAL FINANCIAL STATEMENTS. FOR PROJECT GRANTS, THE PAYEE IS REQUIRED TO SUBMIT SPECIFIC DOCUMENTATION SUCH AS BILLS, THE FOUNDATION REQUIRES GRANTEES TO SIGN A TERMS OF GRANT AGREEMENT SPECIFYING WHAT THE GRANT FUNDS ARE TO USED FOR, AMOUNT, REPORTING - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS PART I, LINE 2

INVOICES AND RECEIPTS OF PURCHASE

SCHEDULE M (Form 990)

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

2011

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

COMMUNITY FOUNDATION OF NORTHEAST

IOWA

Employer identification number 42-6060414

| (i) Check Munified of combubulations or settle expension of the month of the month of the month of the month of the month of determining interests | | irt i Types of Property | , | | | | | | |
|---|-----|---|--------------|--------------------------------|--------------------------------|------------------------|---------|-----|----|
| Art—Works of art | | | 1 | (b) | | (d) | | | |
| 1 Art—Works of art 2 Art—Historical treasures 3 Art—Fractional interests 4 Books and publications 5 Clothing and household goods 6 Cars and other vehicles 8 Books and planes 9 Intellectual property 9 Securities—Publicly traded 10 Securities—Publicly traded 10 Securities—Publicly traded 10 Securities—Publicly traded 10 Securities—Miscellaneous 11 Qualified conservation contribution—Other 12 Securities—Miscellaneous 13 Qualified conservation contribution—Other 15 Real estate—Residential 16 Real estate—Commercial 17 Real estate—Commercial 18 Real estate—Commercial 18 Real estate—Commercial 19 Drugs and medical supplies 10 Drugs and medical supplies 11 Tacidermy 11 Interest 12 Collectibles 13 Collectibles 14 Archeological artifacts 15 Collectible 16 Tool inventory 17 Real estate—Commercial 18 Real estate—Commercial 18 Real estate—Commercial 19 Food inventory 10 Drugs and medical supplies 11 Tacidermy 11 Interest 12 Collectibles 13 Collectibles 14 Archeological artifacts 15 Collectible 16 Tool inventory 17 Real estate—Commercial 18 Real estate—Commercial 19 Food inventory 10 Drugs and medical supplies 10 Drugs and medical supplies 11 Tacidermy 11 Interest of Porms \$283 received by the organization during the tax year for contributions for which the organization completed Form \$283, Part IV, Donee Acknowledgement 19 Number of Forms \$283 received by the organization during the tax year for contributions for which the organization completed Form \$283, Part IV, Donee Acknowledgement 10 Does the companization for the entire holidate promotify 19 Tyes, describe the arrangement in Part II. 10 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 20 Does the organization the report an amount in column (c) for a type of property for which column (a) is checked, | | | | | | Method of determin | ning | | |
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| Ouring the year, did the organization receive by contribution any property reported in Part I, lines 1–28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? b If "Yes," describe the arrangement in Part II 10 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 11 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 12 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 13 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 13 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 13 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 13 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 13 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 13 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? | 29 | Number of Forms 8283 received by | the organiz | ation during the tax year | for contributions for | | | | |
| Ouring the year, did the organization receive by contribution any property reported in Part I, lines 1–28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? b If "Yes," describe the arrangement in Part II 10 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 11 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 12 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 13 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 13 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 13 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 13 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 13 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 13 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? | | which the organization completed Fo | rm 8283, F | Part IV, Donee Acknowle | edgement | 29 | | | |
| t must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? b If "Yes," describe the arrangement in Part II 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 32 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32 If "Yes," describe in Part II. 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, | | | | | | | | Yes | No |
| used for exempt purposes for the entire holding period? b If "Yes," describe the arrangement in Part II 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32a X 53b If "Yes," describe in Part II. 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, | 30a | During the year, did the organization | receive by | contribution any propert | ty reported in Part I, lines 1 | -28 that | | , | , |
| b If "Yes," describe the arrangement in Part II 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 32 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 5 b If "Yes," describe in Part II. 5 lf the organization did not report an amount in column (c) for a type of property for which column (a) is checked, | | it must hold for at least three years for | rom the da | te of the initial contribution | on, and which is not require | ed to be | | | Ι, |
| Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 X 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 5 If "Yes," describe in Part II. 31 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, | | used for exempt purposes for the en | tire holding | period? | | | 30a | | X |
| Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 X 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 5 If "Yes," describe in Part II. 31 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, | b | | - | • | | | | | |
| contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? b If "Yes," describe in Part II. 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, | 31 | _ | | olicy that requires the re | view of any non-standard | | | | |
| Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? b If "Yes," describe in Part II. If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, | | _ | , , | • • | • | | 31 | x | |
| contributions? b If "Yes," describe in Part II. 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, | 32a | | rd parties o | or related organizations t | o solicit, process, or sell no | oncash | | | |
| b If "Yes," describe in Part II. 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, | | | F = | | | | 32a | | X |
| 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, | ь | | | | • • | | | | |
| | | · | amount in c | olumn (c) for a type of n | roperty for which column (s | a) is checked. | | | |
| | - | • | | | | n, | | .] | |

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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.

Open to Public Inspection

OMB No 1545-0047

Name of the organization

COMMUNITY FOUNDATION OF NORTHEAST IOWA

Employer identification number 42-6060414

FORM 990 - ORGANIZATION'S MISSION OR MOST SIGNIFICANT ACTIVITIES

PART I, LINE I AND PART III, LINE I: THE COMMUNITY FOUNDATION RESPONDS TO

THE CURRENT AND FUTURE CHARITABLE NEED

OF NORTH AND 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 VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
THE ORGANIZATION'S BOARD WILL REVIEW THE FORM 990 THIS YEAR BEFORE IT IS
FILED.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

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, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

THE CEO/PRESIDENT'S SALARY IS VOTED ON BY THE BOARD OF DIRECTORS ANNUALLY.

THERE ARE NO OTHER KEY EMPOLYEES AND THE BOARD DOES NOT RECEIVE

COMPENSATION.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
THE ORGANIZATION MAKES THESE DOCUMENTS AVAILABLE TO THE PUBLIC UPON
SPECIFIC REQUEST AND ALSO HAS THE DOCUMENTS POSTED ON IT'S WEBSITE.

Schedule O (Form 990 or 990-EZ) (2011)

Name of the organization

11642CFW \

COMMUNITY FOUNDATION OF NORTHEAST

Employer identification number 42 - 6060414

FORM 990, PART XI, LINE 5 - OTHER CHANGES IN NET ASSETS EXPLANATION NET REALIZED GAINS ON INVESTMENTS

FORM 990, PART XII - ADDITIONAL INFORMATION
LINE 2C, HAS NOT CHANGED FROM PRIOR YEAR

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) (b) Primary activity ▶ Attach to Form 990. COMMUNITY FOUNDATION OF NORTHEAST For Paperwork Reduction Act Notice, see the Instructions for Form 990. DAA (a)Name, address, and EIN of disregarded entity IOWA Department of the Treasury Internal Revenue Service Name of the organization SCHEDULE R (Form 990) Part II Part (2) € 3 <u>ල</u> <u>4</u>

Open to Public . Inspection (f) Direct controlling 2011 Employer Identification number entity 42-6060414 (e) End-of-year assets Identification of Disregarded Entities (Complete of the organization answered "Yes" to Form 990, Part IV, line 33.) ► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. (d) Total income Related Organizations and Unrelated Partnerships ▶ See separate instructions. (c) Legal domicite (state or foreign country)

11642CFW

| 3 | (a) | æ | (0) | 9 | (e) | € | (g) | 2/11/13 |
|---|--|------------------|-----------------------|---------------------|------------------------|--------------------|------------|----------------|
| Name, address, and EII | Name, address, and EIN of related organization | Primary activity | Legal domicile (state | Exempt Code section | Public chanty status | Direct controlling | controlled | entity? |
| | | | or foreign country) | | (if section 501(c)(3)) | entity | S A | N _o |
| (1) COMMUNITY FOUNDATION REALTY HOLDING | EALTY HOLDING | | | | | | | |
| P.O. BOX 1176 | 42-1444029 | | | | | | | |
| WATERLOO | IA 50704-1176 | SUPPORT CI | IA | 50103 | 7 | COMM FND | | × |
| (2) | | | | | | | | |
| (3) | | | | | | | | |
| | | | | | | | | |
| (4) | | | | | | | | |
| (5) | | | | | | | | |

Schedule R (Form 990) 2011

Schedule R (Form 990) 2011

Page 2

42-6060414

COMMUNITY FOUNDATION OF NORTHEAST

Schedule R (Form 990) 2011 Percentage ownership $\overline{\mathbf{s}}$ Percentage ownership Ξ u) General or managing partner? Yes No "Yes" to Form 990, Part IV, 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) (1) Code V—UBI amount in box 20 of end-of-year assets Schedule K-1 (Form 1065) Share of 9 (h) Dispro-portionate Yes No alloc 2 Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Share of total псоте (g) Share of end-ofyear assets (C corp, S corp, Type of entity or trust) (f) Share of total псоте Direct controlling Predominant income (related, unrelated, excluded from tax under sections \$12-514) entity Î (d) Direct controlling Legal domicile foreign country) (state or entity Û (c) Legal domicile (state or foreign Primary activity Primary activity ê Name, address, and EIN of related organization Name, address, and EIN related organization Ē Part III Part IV ₽ lΞ 8 E 2 ල 3 € €

COMMUNITY FOUNDATION OF NORTHEAST

42-6060414 Schedule R (Form 990) 2011

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

Page 3

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| Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule | 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV? | |

- Receipt of (I) interest (II) annuities (III) royalties or (IV) rent from a controlled entity
- Gift, grant, or capital contribution to related organization(s)
 - Gift, grant, or capital contribution from related organization(s)
 - d Loans or loan guarantees to or for related organization(s)
- e Loans or loan guarantees by related organization(s)
- Sale of assets to related organization(s)
- Purchase of assets from related organization(s) Exchange of assets with related organization(s)
- Lease of facilities, equipment, or other assets to related organization(s)
- Lease of facilities, equipment, or other assets from related organization(s)
- Performance of services or membership or fundraising solicitations for related organization(s)
- Performance of services or membership or fundraising solicitations by related organization(s)
- m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

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- Sharing of paid employees with related organization(s)
- Reimbursement paid to related organization(s) for expenses
- p Reimbursement paid by related organization(s) for expenses
- q Other transfer of cash or property to related organization(s)
- Other transfer of cash or property from related organization(s)
- 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds ê

| (a) Name of other organization | (b) Transaction type (a-r) | (c) Amount involved | (d) Method of determining amount involved |
|--------------------------------|----------------------------|---------------------|---|
| (1) | | | |

| (2) | (6) | 4 |
|-----|-----|---|

(4) 9 (9)

Schedule R (Form 990) 2011

42-6060414

Schedule R (Form 990) 2011 COMMUNITY FOUNDATION OF NORTHEAST

11642CFW

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

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) (b) Name, address, and EIN of entity (c) did (5) | (b) Primary activity | (c) Legal domicile (state or | (d) Predominant income (related, unrelated, excluded from tax under | (e) Are all partners section 501(c)(3) | (f) Share of total income | (g) Share of end-of-year assets | (h) Disproportionate allocations? | (i) tle Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) | (J) General or managing partner? | (k) Percentage ownership |
|--|-------------------------|---------------------------------------|---|--|---------------------------------|--|---|---|----------------------------------|--------------------------------|
| | | country) | section 512-514) | Yes No | | | Yes No | _ | Yes No | |
| (1) | | | | | | | : | | | |
| (2) | | | | | | | | | | |
| (3) | | | | | | | | | | |
| (4) | | | | | | | | | | |
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| (6) | | | | | | | | | | |
| (10) | | | | | | | | | | |
| (11) | | | | | | | | | | |
| | | | | | | | | Sched | Schedule R (Form 990) 2011 | 990) 2011 |

Form 4562

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172

2011

achment 179

Department of the Treasury
Internal Revenue Service
Name(s) shown on return

► See separate instructions.

► Attach to your tax return.

COMMUNITY FOUNDATION OF NORTHEAST

COMMUNITY FOUNDATION OF NORTHEAS:

Identifying number 42 - 6060414

IOWA Business or activity to which this form relates INDIRECT DEPRECIATION Election To Expense Certain Property Under Section 179 Part I Note: If you have any listed property, complete Part V before you complete Part I. 500,000 1 Maximum amount (see instructions) 2 2 Total cost of section 179 property placed in service (see instructions) 2,000,000 3 Threshold cost of section 179 property before reduction in limitation (see instructions) Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 5 (b) Cost (business use only) (c) Elected cost (a) Description of property 6 7 Listed property Enter the amount from line 29 7 8 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 q Tentative deduction Enter the smaller of line 5 or line 8 10 10 Carryover of disallowed deduction from line 13 of your 2010 Form 4562 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 11 12 12 Section 179 expense deduction, Add lines 9 and 10, but do not enter more than line 11 Carryover of disallowed deduction to 2012 Add lines 9 and 10, less line 12 13 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service 14 during the tax year (see instructions) 15 Property subject to section 168(f)(1) election 11,128 16 Other depreciation (including ACRS) Part III MACRS Depreciation (Do not include listed property) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2011 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here 18 Section B—Assets Placed in Service During 2011 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Depreciation deduction (a) Classification of property placed in (husiness/investment use (e) Convention (f) Method penod service only-see instructions? 19a 3-year property b 5-year property C 7-year property d 10-year property 15-year property 20-year property S/L 25-year property 25 yrs S/L 27 5 yrs. MM Residential rental property MM S/L 27 5 yrs MM S/L Nonresidential real 39 yrs property S/L MM Section C—Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System S/L 20a Class life S/L 12 yrs b 12-year S/L MM 40 yrs 40-year Summary (See instructions.) Part IV 21 Listed property. Enter amount from line 28 Total, Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here 22 11,128 22 and on the appropriate lines of your return Partnerships and S corporations—see instructions For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs 23

Community Foundation of Northeast Iowa P.O. BOX 1176 Waterloo, IA 50704-1176

Electing out of Bonus Depreciation Allowance for All Eligible Depreciable Property

The taxpayer elects out of first-year bonus depreciation allowance under IRC Section 168(k) for all eligible asset classes of depreciable property acquired after December 31, 2007. This election applies to all eligible depreciable property placed in service during the tax year.