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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)

OMB No 1545-0047

Department of the Treasury

2011
Open to Public
Inspection

		Je Service	The organization may have to use a copy of this feturif to satisfy state			Inshection	
				nd ending	6/30/2	2012 lentification number	
		applicable	C Name of organization IOWA LAW SCHOOL FOUNDATION Doing Business As		1	enuncation number	
\equiv	ddress	_	1 · · · · · · · · · · · · · · · · · · ·		42-6074234		
=	ame ch	•	Number and street (or P O box if mail is not delivered to street address) Room/sur	ite	E Telephone n	umber	
=	utial retu		P O. BOX 4550		(319) 335-330	05	
Ţ	erminate	ed	City or town, state or country, and ZIP + 4				
<u></u> ⊿^	mended	d return		44-4550	G Gross receip	ts \$ 9,058,845	
□ △	pplication	on pendin	F Name and address of principal officer	H(a) is	this a group return	for affiliates? Yes X No	
			Charles Kierscht One West Park Rd, PO Box 4550, Iowa City, IA 52	<u>224</u> н(ь) А	re all affiliates inclu	ded? Yes No	
I Ta	ax-exem	pt status	X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 5	527 If	"No," attach a list.	(see instructions)	
		: ► N			roup avamption au	mbar 🟲	
					roup exemption nu	1	
	_	rganizatio		L Year of form	nation 1980	M State of legal domicile IA	
P	art l		ummary				
	1				hannel for priv	ate gifts to	
_			niversity of Iowa College of Law The Iowa Law School provides The L		of lowa		
ĕ			margin of distinction in fulfilling its mission of excellence in teaching, re	esearch			
T. Activities & Governance		and se	rvices.				
ŏ	2	Check	this box • I if the organization discontinued its operations or disposed of more	re than 25%	of its net assets.		
45	3		er of voting members of the governing body (Part VI, line 1a)			38	
Ëes	4		er of independent voting members of the governing body (Part VI, line		[4 38	
Ą	5		number of individuals employed in calendar year 2011 (Part V, line 2a))		5 0	
ŗ ¥	6		number of volunteers (estimate if necessary)	•	[6 38	
}	7a		inrelated business revenue from Part VIII, column (C), line 12		[7a 0	
	b	Net ur	related business taxable income from Form 990-T, line 34			7 b 0	
	_				Prior Year	Current Year	
9	8		outions and grants (Part VIII, line 1h)	·	2,493,€	4,160,121	
Revenue	9	-	m service revenue (Part VIII, line 2g)	<u> </u>		0	
. §	10		ment income (Part VIII, column (A), lines 3, 4, and 7d)	·	155,4	· · · · · · · · · · · · · · · · · · ·	
1	11		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	·	·	926 0	
ξ	12		evenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	•	2,649,9		
3	13		and similar amounts paid (Part IX, column (A), lines 1–3)	·	1,794,3	300 2,599,998	
3	14		ts paid to or for members (Part IX, column (A), line 4)	-		0	
) §	15	Salarie	s, other compensation, employee be <u>nefits (Part IX, column (A), lines 5</u> 10) .	·		0	
Expenses	16a	Protes	sional fundraising fees (Part IX, column (A) line 114/ED		V . 1885-4	0	
Ĕ	4-b		undraising expenses (Part IX, column (D) line 25) 820,0	U18	1 2 2 2		
	17	Uner	expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		1,002,5		
	18	Dougle	xpenses. Add lines 13-17 (must equal Harrix, column (A), line 25).	-	2,796,8		
- 5	19	Revei	ue less expenses. Subtract line 18 from line 12 .	Barria	-146,9		
Net Assets or Fund Balances	20	Total	issets (Part X, line 16) OGDEN, UT	Begin	ning of Current Y		
A Ball	21		abilities (Part X, line 26)	·	65,420,9		
25	22		sets or fund balances. Subtract line 21 from line 20			602 4,107	
	rt II		gnature Block		65,419,3	66,069,436	
			ury, I declare that I have examined this return, including accompanying schedules and state	tements and	to the best of my l	rowledge	
and t	elief, it i	s true, co	rrect, and complete Declaration of preparer (other than officer) is based on all information	of which pre	parer has any knov	vledge	
			Charles (au)			.14.12	
Sign			Signature of officer		Date		
Her	е		Tıffani Shaw	Assistant T	reasurer		
		_ 7	Type or print name and title				
		Pr	int/Type preparer's name Preparer's signature	Da	te	PTIN	
Pai		را ا	Ny Hogarty	11-	13-20 Che		
	parer		y Hegarty Kay No.	<u> </u>	1	employed P00091057	
Use	Only	, –	m's name ► McGladrey, LLP		Firm's EIN ► 4	2-0714325	
		F	m's address ▶ 221 Third Avenue SE, Ste 300 Cedar Rapids, IA 52401-1	1512	Phone no		
May	the IF	RS disc	uss this return with the preparer shown above? (see instructions).			X Yes No	
<u></u>							

osm 9	90 (2011) IOWA LAW SCHOOL FOUNDATION	42-6074234	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III	<u>.</u>	. 🗀
1	Bnefly describe the organization's mission:		
	Preferred channel for private gifts to The University of Iowa College of Law The Iowa Law		
	School provides The University of Iowa with a margin of distinction in fulfilling its		
	mission of excellence in teaching, research and services.		
2	Did the organization undertake any significant program services during the year which were not listed on	 }	
	the prior Form 990 or 990-EZ?		X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program		
	services?	TYes	X No
	If "Yes," describe these changes on Schedule O.	_	
4	Describe the organization's program service accomplishments for each of its three largest program service	ices, as measured	by
	expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to re		
	grants and allocations to others, the total expenses, and revenue, if any, for each program service repor		
4a	(Code:) (Expenses \$ 2,599,998 including grants of \$ 2,599,998) (Reven	ue \$	0)
	Grants provide resources to The University of Iowa College of Law for student and faculty support,		
	research, and program support		
4b	(Code:) (Expenses \$ 0 including grants of \$ 0) (Reven	ue \$	0.)

	•••••••••••••••••••••••••••••••••••••••		
4-	(Code) / Everage C O including and of C		
4c	(Code.) (Expenses \$ 0 including grants of \$ 0) (Reven	ne 2)
	•••••••••••••••••••••••••••••••••••••••		
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	•		
	•••••••••••••••••••••••••••••••••••••••		
4d	Other program services. (Describe in Schedule O.)		
	(Expenses \$ 0 including grants of \$ 0) (Revenue \$	0)	
4e	Total program service expenses ► 2,599,998	<u>_</u>	

	,		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? <i>If</i> "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		Х
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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	ا ـ ا		
	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,	-2 -79		
_	VII, VIII, IX, or X as applicable.			2.1
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Х	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	110		
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
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	Х	<u> </u>
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		X
t	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		v	
42-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		-
ıza	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D. Parts XI. XII. and XIII	12a	х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"	La	_^_	-
-	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	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			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		
47		16		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 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	 	ļ	<u> </u>
. •	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?			Ϊ́
-	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		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	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			
	In the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	<u> </u>	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	<u> </u>	X_
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than		ĺ	
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<u> </u>	
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	1		i
	to defease any tax-exempt bonds?	24c		<u> </u>
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			1
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
þ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			i
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b	<u> </u>	X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			1
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26	<u> </u>	X
27	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	1		١
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	And		
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		<u> </u>
D	A family member of a current or former officer, director, trustee, or key employee? <i>If</i> "Yes," complete			١.,
_	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	-		
20	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	-	X
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>			
24	·	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I			
32		31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		X
33	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	33		X
J -	III, IV, and V, line 1	34		
352	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		 	X
	Did the organization receive any payment from or engage in any transaction with a controlled entity within	35a	 	├^-
U	the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	254	l	,
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	35b	\vdash	X
55	accomination? If Was II secondate Cabadula D. Bort V. Ivas C	20	l	🗸
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36	 	X
31	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part		l	l
		27	l	
20		37	\vdash	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and		,_	
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	L

		074234	Pa	age
Par			_	
	Check if Schedule O contains a response to any question in this Part V		. <u>L</u>	
		,	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	3		-4
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	· 1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	0		•
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		
þ	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	. 3b		_
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	1.1		
	account)?	. 4a)
b	If "Yes," enter the name of the foreign country:	-		()
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			1
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	. 5a		_
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	\dashv	H
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	. <u>5c</u>		┝
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	60		
<u>.</u>	organization solicit any contributions that were not tax deductible?	6a		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6ь		
,	Organizations that may receive deductible contributions under section 170(c).	7		10
_	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			1,12
а	and services provided to the payor?	. 7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		H
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	1		Г
	required to file Form 8282?	7c	•	
d	If "Yes," indicate the number of Forms 8282 filed during the year	3.00	7-7	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	. 7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C	7h		
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	泰	i i	1
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			i,
	organization, have excess business holdings at any time during the year?	. 8		L
9	Sponsoring organizations maintaining donor advised funds.		Ä.	į.
а	Did the organization make any taxable distributions under section 4966?	9a		L
þ	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	·	Ļ
)	Section 501(c)(7) organizations. Enter:	18	5	
а	Initiation fees and capital contributions included on Part VIII, line 12	; <u>\$</u>	8	Ļ
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		entra 1784	ŀ
1	Section 501(c)(12) organizations. Enter:		70	
а	Gross income from members or shareholders	:		ŀ
þ	Gross income from other sources (Do not net amounts due or paid to other sources]^
	against amounts due or received from them.)		Î.	ţ,
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	. 12a		Ļ
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		-	ı
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			L
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		Ļ
	Note. See the instructions for additional information the organization must report on Schedule O		ř.,	ŀ
þ	Enter the amount of reserves the organization is required to maintain by the states in which		•	ŀ
	the organization is licensed to issue qualified health plans	<u> </u> :	· -	
С	Enter the amount of reserves on hand		·	Ļ
4a	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14b		L
b				

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI 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 Section A. Governing Body and Management 1a Enter the number of voting members of the governing body at the end of the tax year . . . 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. **b** Enter the number of voting members included in line 1a, above, who are independent . . . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?. Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members. Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? . . Each committee with authority to act on behalf of the governing body? 8b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code., No 10a 10a Did the organization have local chapters, branches, or affiliates? 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 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?. 11a 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 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X Did the organization have a written whistleblower policy? . . . 13 13 14 Did the organization have a written document retention and destruction policy?. 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? The organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a 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?.. Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ➤ See Attached Statement Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply. Another's website X Upon request Own website 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. State the name, physical address, and telephone number of the person who possesses the books and records of the organization

Sherri Furman One West Park Rd, P O. Box 4550, Iowa City, IA 52244-4550

(3)	•	_	
Form	990	(20f1)	- 1

IOWA LAW SCHOOL FOUNDATION

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Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Comp	ensated
•	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.

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Highest compensated employee Institutional trustee or director					n 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 organizations
(1) GAIL B AGRAWAL DIRECTOR	5.00	х						0	0	0
(2) RICHARD R ALBRECHT DIRECTOR	1 00							0	0	0
(3) VICTOR M ALVAREZ DIRECTOR	1.00							0		
(4) ERIC G ANDERSEN				-			\vdash			0
DIRECTOR (5) RAYMOND M BEEBE	1 00							0		
DIRECTOR (6) AMY J BEIER	1 00					<u> </u>	<u> </u>	0	0	0
DIRECTOR (7) MARVIN S BERENSTEIN	1 00	X						0	. 0	0
DIRECTOR	1 00	X	_					0	0	0
(8) ELIZABETH R BOYD DIRECTOR	1.00	Х						0	0	0
(9) DANIEL D CROUSE DIRECTOR	1 00	X						0	0	0
(10) MARCELLA M DAVID SECRETARY/DIRECTOR	1 00	х		x				0	0	0
(11) CHARLES H DICK DIRECTOR	1 00							0		
(12) SOPHIE M DOROBA			-							
DIRECTOR (13) ROBERT N DOWNER	1.00		-					0		0
DIRECTOR (14) JACK M FRIBLEY	1 00	Х			\vdash		<u> </u>	0	0	0
DIRECTOR	1 00	Χ						0	0	0

Pa	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
	(C) Position											
		(A)	(B)	(do r	not ch			than	one	(D)	(E)	(F)
		Name and title	Average					is both		Reportable	Reportable	Estimated
			hours per week		_			or/trus	_	compensation from	compensation from related	amount of other
			(describe hours for	Officer Institutional truste Individual trustee or director			ey e	mple	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
			related	Individual to	tion	7	employee	Highest co employee	"	(W-2/1099-MISC)	(11-22 1033-111130)	organization
			organizations in Schedule	`trust	Institutional trustee		yee	mpe				and related organizations
			O)	8	stee			Highest compensated employee				32
								ed				
(15)	JOEL T.	S. GREER										
•——	CTOR		1.00	X	L.,		L.			0	0	0
	AMYLH	EIN		١							:	
	CTOR	LINATT	1.00	<u>X</u>			\vdash		<u> </u>	0	0	0
	KELLY N	1 HNATT	1 00	,								•
		D HOCKENBERG	1.00	┝	\vdash		-			0	0	0
	CTOR		1.00	x				i		0	o	0
		Y D HOUSER	1.50	Ĥ	 -		Н					
	CTOR		1.00	х						o	o	0
(20)	KENNET	H L JACOBS										
	CTOR		1 00	Х	<u> </u>					0	0	0
		DJOHNSON										
	CTOR	2014//55001/5	1 00	<u> </u>	_		Щ			0	0	0
		S M KIERSCHT DIRECTOR	5.00			х						•
		BLOETHE LINDER	5.00	Х	\vdash	^			_	0	0	0
	CTOR	DEOLITIC LINDEN	1 00	х						o	0	0
		JLOOTS										Ų
	CTOR		1.00	Х					į	o	ol	0
(25)	MONICA	B MOEN										
_	CTOR		1.00	Χ	ł		ليبا			0	0	0
	Sub-tota								•	0	0	0
		m continuation sheets to Part VII, \$	Section A	•	•	•	•			0		0
		id lines 1b and 1c). The standard of the stan	imited to those I	ictod	abo	· ·	·	<u>· · · · · · · · · · · · · · · · · · · </u>		U Dod more than \$1	0 000 of	0
-		e compensation from the organization							CIV	eu more man pr	00,000 01	
			· <u>·</u>			<u> </u>		-				Yes No
3	Did the o	rganization list any former officer, dir	ector, or trustee	, key	em	plo	yee,	, or h	ighe	est compensate	d [The same
		e on line 1a? If "Yes," complete Sche									[3 X
4	For any i	ndividual listed on line 1a, is the sum	of reportable co	mpe	nsat	ion	and	othe	er ce	ompensation fro	m	* 14
		nization and related organizations gre	ater than \$150,0	000?	If "	Yes	, " cc	omple	ete	Schedule J for s	uch	龙 []
	ındıvidua	<i>1</i>		•				•				4 X
		person listed on line 1a receive or acc									dividual	
		es rendered to the organization? If ")	Yes," complete S	Sche	dule	J fo	or s	uch p	ers	on		5 X
		dependent Contractors								.		
1	complete	e this table for your five highest composition from the organization. Report co	ensated indeper	the	COI	าเเล	ctor	s tha	t re	ceived more tha	n \$100,000 of	la Amir
	year.	ation nom the organization. Report C	ompensation to	uie i	Jaie	IIua	ıı ye	ai ei	IUIN	g with or within	the organization	s tax
	,	(A)							_	(B)		(C)
		Name and business add	ress							Description of ser	vices C	ompensation
												0
												0
												0
			V									0
2	Total pur	phor of independent contractors (incli	rding but not line	ا امراد	- 46		14			->		0
		nber of independent contractors (inclunt street) in \$100,000 of compensation from the		ııeu l ▶	u (N	use	ıısı	ed at 0	JUV	e) who received		· Car

C	Gain or (loss)		U[U								
d	Net gain or (loss)		•	•			0					
_					4	₹,	. • ^	*(:		, .	,
8a	Gross income from fundraising				1:	•		4				•
	events (not including \$	0	ľ		¥,3		- 2					
	of contributions reported on line	1c).			12.	Č	•	-		′ .	٠.	
	See Part IV, line 18	а	1	0	7.				,		, '	·
b	Less: direct expenses .	b	· [0		-	<u></u>					 2. ——
C	Net income or (loss) from fundra	using events.					0	•		٠.		
9a	Gross income from gaming activ	rities				•	,	_	-		1.	
	See Part IV, line 19.	a	ı İ	o							į	-
b	Less. direct expenses	b	,	0		سازسا		4			<u> </u>	
С	Net income or (loss) from gamin	g activities					0					
0a	Gross sales of inventory, less				-			ı	,	•		•
	returns and allowances	а	i	0	•	•				7		
h	Less cost of goods sold	h					• •					

Business Code

00

0

0

4,392,587

Net income or (loss) from sales of inventory

Miscellaneous Revenue

All other revenue

Total. Add lines 11a-11d

Total revenue. See instructions

Form 990 (2011)

232,466

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).

	Check if Schedule O contains a response to any	question in this Par	t IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	2,599,998	2,599,998		140
2	Grants and other assistance to individuals in the				To the second
	United States. See Part IV, line 22	ol			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	o			
4	Benefits paid to or for members	0		THE TAXALL	
5	Compensation of current officers, directors,				
	trustees, and key employees	0			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	. 0			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions).	0			
9	Other employee benefits	0		· · · · · · · · · · · · · · · · · · ·	
10	Payroll taxes	0			
11	Fees for services (non-employees):				
а	Management	187,706			187,706
b	Legal	3,866		3,866	
C	Accounting	14,490		14,490	
đ	Lobbying	0	The standard or the section of	incomplete men managements.	
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees	680,580		680,580	
g	Other	35,253	· ·	981	34,272
12	Advertising and promotion	28,506			28,506
13	Office expenses	23,720			23,720
14	Information technology	1,219			1,219
15 16	Royalties				~~-
17	_ `. `.	42,648	·····		42,648
18	Payments of travel or entertainment expenses	42,046	***		42,040
	for any federal, state, or local public officials	اه			
19	Conferences, conventions, and meetings	Ö			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0	0	0	O
23	Insurance	6,933		6,933	
24	Other expenses. Itemize expenses not covered			1. 11.	A STORY OF STREET
	above (List miscellaneous expenses in line 24e. If			40	
	line 24e amount exceeds 10% of line 25, column				K.
	(A) amount, list line 24e expenses on Schedule O)	ARTHUR STATE			
а	Continuing Education	1,636			1,636
b	Miscellaneous	311			311
C		0			
d		0			
е	All other expenses	0			
25	Total functional expenses. Add lines 1 through 24e	3,626,866	2,599,998	706,850	320,018
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)				

Р <u>а</u>	rt X	Balance Sheet	_		
	•		(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		1	
-	2	Savings and temporary cash investments		2	
- 1	3	Pledges and grants receivable, net	871,804	3	1,151,42
	4	Accounts receivable, net	0	4	
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary	<i>*</i>		
2		employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net	0	7	
₹	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or			
-		other basis. Complete Part VI of Schedule D 10a 8,000			
	b	Less: accumulated depreciation . 10b (8,000	10c	8,00
	11	Investments—publicly traded securities	126,356		128,94
	12	Investments—other securities. See Part IV, line 11	60,688,766		58,804,75
	13	Investments—program-related. See Part IV, line 11	0		
	14	Intangible assets	0		
	15	Other assets See Part IV, line 11	3,726,072		5,980,42
	16	Total assets. Add lines 1 through 15 (must equal line 34)	65,420,998		66,073,54
	17	Accounts payable and accrued expenses	1,602		4,10
	18	Grants payable		18	
:	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ξ.	22	Payables to current and former officers, directors, trustees, key		-	
話		employees, highest compensated employees, and disqualified			
Liabilities		persons. Complete Part II of Schedule L		22	
E	23	Secured mortgages and notes payable to unrelated third parties	0		
	24	Unsecured notes and loans payable to unrelated third parties .	0		
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete			
		Part X of Schedule D	0	25	
	26	Total liabilities. Add lines 17 through 25	1,602	26	4.10
			THE RESERVE OF THE PARTY OF THE	11.3	
8		Organizations that follow SFAS 117, check here ► X and complete lines 27 through 29, and lines 33 and 34.		7.	
ž		-			
ala	27	Unrestricted net assets	4,416,879		4,591,51
0	28	Temporarily restricted net assets	30,191,145		27,978,43
ב	29	Permanently restricted net assets	30,811,372	29	33,499,47
Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34.			Charles of the Chine
ets	30	Capital stock or trust principal, or current funds		30	
88	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
ř A	32	Retained earnings, endowment, accumulated income, or other funds		32	
Š	33	Total net assets or fund balances	65,419,396		66,069,43
	ı	Total liabilities and net assets/fund balances	65,420,998		66,073,54

	990 (2011) IOWA LAW SCHOOL FOUNDATION EXITE Reconciliation of Net Assets		2-6074234	Pag	e 12
Par	Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI	<u> </u>	<u> </u>	. [X
1	Total revenue (must equal Part VIII, column (A), line 12)	1 1		4,392	,587
2	Total expenses (must equal Part IX, column (A), line 25)	2		3,626	,866
3	Revenue less expenses. Subtract line 2 from line 1	3		765	,721
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	6	5,419	,396
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-115	,681
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	6	6,069	,436
4	Check if Schedule O contains a response to any question in this Part XII. Accounting method used to prepare the Form 990: Cash X Accrual Other	•	· · · · ·	Yes	No
1	Accounting method used to prepare the Form 990:				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .		2a		X
b	Were the organization's financial statements audited by an independent accountant?		. <u>2b</u>	X	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight	of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		. <u>2c</u>	X	35 / 4
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	1	W.		
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.				Ž.
	X Separate basis		1.5		2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		*.a####		
-	the Single Audit Act and OMB Circular A-133?		. 3a		×
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		1		
~	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3ъ		
			Form	990	(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. OMB No 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

42-6074234 IOWA LAW SCHOOL FOUNDATION Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a Type I b Type II c Type III-Functionally integrated Type III-Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disgualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the g following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) (i) and (iii) below, the governing body of the supported organization? 11g(i) A family member of a person described in (i) above?

h Provide th	ne following infor	mation about the suppo	rted orgar	nization(s).					
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) is the organization in col (i) listed in your governing document?		the orga col (i)	(v) Did you notify the organization in col (i) of your support?		s the tion in col zed in the S ?	(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									0
(B)			 						
		-				 			0
(C)			1						0
(D)									_
<u> </u>						 		 	0
(E)									0
Total				,					0

A 35% controlled entity of a person described in (i) or (ii) above?

11g(ii)

11g(iii)

(ii)

instructions.

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) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total Gifts, grants, contributions, and membership fees received. (Do not 4,160,121 include any "unusual grants."). 2,307,858 2,720,835 1,832,464 2,493,645 13,514,923 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 0 The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 13.514.923 2.307.858 2,720,835 1.832.464 2,493,645 4,160,121 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. 4,648,664 column (f) 8,866,259 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (e) 2011 (f) Total (a) 2007 (b) 2008 (c) 2009 (d) 2010 Amounts from line 4 2,307,858 1,832,464 2,493,645 4,160,121 13,514,923 2,720,835 Gross income from interest, dividends, payments received on securities loans. rents, royalties and income from similar 170,040 151,508 116,708 155,424 232,466 826,146 Net income from unrelated business activities, whether or not the business is 0 Other income. Do not include gain or loss from the sale of capital assets 19,657 102,164 35,852 (Explain in Part IV.) 158,599 Total support. Add lines 7 through 10 . . . 14,499,668 11 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f) 14 14 61.15% Public support percentage from 2010 Schedule A, Part II, line 14 15 15 62.01% 33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ▶IXI and stop here. The organization qualifies as a publicly supported organization . 33 1/3% support test—2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this 10%-facts-and-circumstances test-2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	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.")						0
2	Gross receipts from admissions, merchandise						_
	sold or services performed, or facilities furnished						
	in any activity that is related to the						0
2	organization's tax-exempt purpose Gross receipts from activities that are not an						0
3	unrelated trade or business under section 513					·	0
4	Tax revenues levied for the organization's					İ	
	benefit and either paid to or expended on its behalf.						0
5	The value of services or facilities						_
	furnished by a governmental unit to the						
_	organization without charge .						0
6	Total. Add lines 1 through 5	0	0	0	0	0	0
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						0
þ	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						0
С	Add lines 7a and 7b		0	0	0	0	0
8	Public support (Subtract line 7c from			25/2/3/30			
	line 6)					****	0
	tion B. Total Support			·			
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	0	0	0	0	0	0
10a	Gross income from interest, dividends,						
	payments received on securities loans,	1					
_	rents, royalties and income from similar sources	<u> </u>		<u> </u>			0
b	Unrelated business taxable income (less section 511 taxes) from businesses			i	п		
	acquired after June 30, 1975						0
С	Add lines 10a and 10b	0	0	0	0	o	0
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						0
12	Other income Do not include gain or loss from the sale of capital assets]					
	(Explain in Part IV)	<u> </u>					0
13	Total support. (Add lines 9, 10c, 11,						
	and 12)	0	0	o	0	o	0
14	First five years. If the Form 990 is for the organization, check this box and stop here	ation's first, secor	nd, third, fourth,	or fifth tax year a	s a section 501(c)(3)	▶□
Sec	tion C. Computation of Public Support	Percentage					
15	Public support percentage for 2011 (line 8, column		e 13, column (f)			15	0 00%
16	Public support percentage from 2010 Schedule A,					16	0 00%
Sec	tion D. Computation of Investment Inco	me Percenta	ige				_
17	Investment income percentage for 2011 (line 10c.	column (f) divide	d by line 13, colu	ımn (f))		17	0.00%
18	Investment income percentage from 2010 Schedul					18	0.00%
19a	33 1/3% support tests—2011. If the organization						. —
_	not more than 33 1/3%, check this box and stop h						▶∟
þ	33 1/3% support tests—2010. If the organization line 18 is not more than 33 1/3%, check this box ar						► □
20	Private foundation. If the organization did not che						
			. ,	uno von a			

Schedule A (Form	990 or 990-EZ) 2011	IOWA LAW SCHOOL FOUNDATION	42-6074234	Page 4
Part IV		Information. Complete this part to provide the explanations required or 17b, and Part III, line 12. Also complete this part for any additional	by Part II, line 1	0;
	instructions).	To 17 b, and 1 art III, line 12. Also complete this part for dry additional		
		•••••••••••••••••••••••••••••••••••••••		
		•••••••••••••••••••••••••••••••••••••••		
		••••••		
		•••••••••••••••••••••••••••••••••••••••		
		•••••••••••••••••••••••••••••••••••••••		
		•		
		•		
		•••••••••••••••••••••••••••••••••••••••		· •

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990. ▶ See separate instructions.

2011 2011

Open to Public Inspection

Name of the organization Employer identification number IOWA LAW SCHOOL FOUNDATION 42-6074234 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) . . . Aggregate value at end of year 4 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes 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 Yes Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year а b 2b Number of conservation easements on a certified historic structure included in (a) . . . C 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 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 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 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 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: 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. Assets included in Form 990, Part X.

Par	III Organizations Maintaining C	ollections of Ar	t, Histor	rical Trea	sures, or O	ther S	Similar Assets	(contin		rage 🚑
3	and the endiance and an endiance of the control of the following management									
	use of its collection items (check all that	apply):		•						
а	Public exhibition		d []	Loan c	or exchange p	orogran	ns			
b	Scholarly research		e 🗌	Other						
С	Preservation for future generations									
4	Provide a description of the organization Part XIV.		d explain	how they	further the or	ganiza	tion's exempt pu	pose in		
5	During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?									
Part	Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21									
1a										
	included on Form 990, Part X?			-				□ Ye	es 🔲	No
b	If "Yes," explain the arrangement in Par			owing tab	le:					
		·		-			F	mount		
С	Beginning balance					1c				
d	Additions during the year					1d				
0	Distributions during the year					<u>1e</u>	- †			
f	•					1f	<u> </u>	_		0
2a	Did the organization include an amount		rt X, line	21?				Y∙	s X	No
b	If "Yes," explain the arrangement in Par		••							
Part	V Endowment Funds. Complet							Y		
4	Parianian of wash belows	(a) Current year		or year	(c) Two years		(d) Three years back		ur years	back
1a b	Beginning of year balance	51,798,948		,823,785			44,335,02			- 1
C	Net investment earnings, gains,	2,998,015		,664,736	09:	5,690	675,91	2 (T) (T)		77 1
·	and losses	-2,377,036	c	,494,778	5.873	2,072	-6,625,08			
d	Grants or scholarships .	352,141		489,541		0,124	245,66			4 × 3
0	Other expenditures for facilities	555,		,	50.	,,,,,	2 10,00		S. I	4.8
	and programs	1,261,905		694,810	93-	1,306	1,652,73	3		
f	Administrative expenses								341	- ((' 4
g	End of year balance	50,805,881	51	,798,948	41,823	3,785	36,487,45	3	7	
2	Provide the estimated percentage of the	e current year end	l balance	(line 1g, c	column (a)) he	eld as:				
а	Board designated or quasi-endowment		<u>%</u>							
b	Permanent endowment	100%								
С	Temporarily restricted endowment	%								
2-	The percentages in lines 2a, 2b, and 2c			41						
3 a	Are there endowment funds not in the p organization by	ossession of the	organizat	ion that ar	re neid and ad	amınısı	erea for the	1	Vac	No
	(i) unrelated organizations							3a(i)	Yes	No
	(ii) related organizations							3a(ii)		X
ь	If "Yes" to 3a(ii), are the related organiz							3b		<u> </u>
4	Describe in Part XIV the intended uses						•			<u> </u>
Part							****			
	Description of property	(a) Cost or oth			st or other	(c)	Accumulated	(d) B	ook valu	e
		(investme			s (other)		epreciation	(3) 0		-
1a	Land		0		8,000		1			8,000
b	Buildings		0		0		0			0
C	Leasehold improvements		0		0		0			0
d	Equipment		0		0		0			0
<u>e</u>	Other		0		0		0			0
ı ota	I. Add lines 1a through 1e (Column (d) n	nust equal Form 9	90. Part	x. column	(B). line 10(d	2).)	•			8.000

Part Vil Investments—Other Securities	e See Form 990 Part Y	line 12	Page 3
(a) Description of security or category		(c) Method of val	luation
(including name of security)	(b) Book value	Cost or end-of-year n	
(1) Financial derivatives	0		
(2) Closely-held equity interests	0		
(3) Other Testamentary Trusts	686,250	F	
(A) Perpetual Trusts	4,492,570	F	
(B) Cash Value Life Insurance	106,714	F	
(C) Cash Value of Pooled Investments	53,519,221	F	
(D)	0		
(E)	0		
(F)	0		
(G)	0		
(H)	0		
(I)	0		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)			· · · · · · · · · · · · · · · · · · ·
Part VIII Investments—Program Relat	ed. See Form 990, Part X	ř .	
(a) Description of investment type	(b) Book value	(c) Method of va Cost or end-of-year r	
	0	· · · · · · · · · · · · · · · · · · ·	
(2)	0		
(3)	0		
(4)	0		
(5)	0		
(6)	0		
(7)	0		
(8)	0		
(9)	0		
_(10)	0		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	0		<u> </u>
Part IX Other Assets. See Form 990,			
	a) Description	- 	(b) Book value
(1) Assets held by the University of IA Foundation	n on behalf of IA Law Schoo	l Foundation	5,980,421
(2)			0
(3)			0
(4)			0
(5)	•		0
			0
(8)			0
(9)			0
(10)			0
Total. (Column (b) must equal Form 990, Part X, o	col. (B) line 15).		5,980,421
Part X Other Liabilities. See Form 99			
1. (a) Description of liability	(b) Book value	THE WAR A STREET WAR	ALL HAVE TO BE TO SERVICE OF THE PARTY OF TH
(1) Federal income taxes	0		
(2)	0		
(3)	0		
(4)	0		
(5)	0	Angelogia Company	
(6)	0	The work of	
(7)	0	A STATE OF THE STA	
_ (8)	0		
(9)	0	100	$M \times M_{\rm P} = 1$
(10)	0	I specification in the second	
(11)	0		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<u> </u>	L	

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Schedule D (Form 990) 2011 Page 4 Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements 4.392.587 2 2 3,626,866 3 765.721 3 4 -2,104,186 5 6 6 Investment expenses 7 8 Other (Describe in Part XIV). 8 1,988,505 9 9 -115,681 10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 10 650,040 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Total revenue, gains, and other support per audited financial statements . . . 3,596,326 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: b 2b 2c C 2d -115,681 d Other (Describe in Part XIV.) -115.681 e 3,712,007 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b. 680.580 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) . 4.392.587 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 2,946,286 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990. Part IX, line 25: b Other losses. 2c C 2е 3 Subtract line 2e from line 1 . . . 2.946,286 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b. . . . Other (Describe in Part XIV). 4b c Add lines 4a and 4b . . 680.580 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 3,626,866 Part XIV Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b, Part V, line 4; Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information. Part V Line 4: To provide a predictable stream of funding to programs supported by its endowment while seeking to maintain the purchasing power of the endowment assets. The investment objective of the endowment is to seek maximum total return consistent with the preservation of principal, diversification, and avoidance of excessive risk Part X Line 2: The Internal Revenue Service has recognized the Foundation as exempt from federal income taxes under provisions of section 501(C)(3) of the Internal Revenue Code of 1954. The Foundation follows the accounting guidance for accounting for uncertainty in income taxes. The foundation is subject to Federal and State income taxes to the extent it

Part XIV Supplemental Information (continued)
has unrelated business income. In accordance with the guidance for uncertainty in income
taxes, managment has evaluated their material tax positions and
Part X Line 2: determined that there are no income tax effects with respect to its
financial statements. The Foundation is no longer subject to examination by Federal or
State authorities for years ending before June 30, 2009 nor has the Foundation been
notified of any impending examination and no examinations are currently in process
Part XI Line 8: Other: Transfer of Law Student Loan Fund \$1,988,505
Part XII Line 2d: Other: Depreciation in value of split-interest agreements: \$273,054;
Depreciation in fair value of agreements: \$1,831,132; Transfer of Law Student Loan Fund
\$1,988,505
Part XII Line 4b: Other: Management fees reported as expense \$680,580
Part XIII Line 4b Other: Management fees reported as expense: \$680,580

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

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

Open to Public

OMB No 1545-0047

Inspection Employer Identification number

42-6074234

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

General Information on Grants and Assistance

OWA LAW SCHOOL FOUNDATION

Part

Name of the organization

X Yes No (h) Purpose of grant or assistance Support for the College of Law 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 Grants and Other Assistance to Governments and Organizations in the United States. Complete of the organization answered "Yes" to (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of non-cash assistance Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 2,599,998 (d) Amount of cash grant Enter total number of other organizations listed in the line 1 table the selection criteria used to award the grants or assistance?. (c) IRC section if applicable can be duplicated if additional space is needed. 501(C)(3) 42-6004813 (p) EIN 130 Byington Rd Iowa City, IA 522 1 (a) Name and address of organization (1) Univ of lowa College of Law or government Part II 2 2: ~ €; € 3 €: <u>@</u> €. 8 €.

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

Schedule I (Form 990) (2011)

42-6074234

Page 2

Schedule I (Form 990) (2011)

(f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. Expenditures from Dean, Chair, or Professorship accounts must include the name of the current faculty holding the position. Supporting documentation must be attached or be available upon request. Expenditures of ILSF funds must be transferred to the College of Law Method of valuation (book, FMV, appraisal, other) unless directly related to fundraising. lowa department acknowledges that the transfer complies with donor intent as specified in the donor intent document. All requests must Part I Line 2. of an authorized ILSF account representative. Supporting documentation must be attached or be available upon request. lowa Foundation (UIF) policies and IRS regulations. By submission of an approved request for transfer or expenditure, the University of Part I Line 2: All expenditures from the lowa Law School Foundation (ILSF) are subject to University of Iowa (UI) and University of • C non-cash assistance (d) Amount of include a written description of the nature, date, purpose and the amount of the transfer and a signature (c) Amount of cash grant Part III can be duplicated if additional space is needed (b) Number of recipients (a) Type of grant or assistance Part III က S 4

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

IOWA LAW SCHOOL FOUNDATION

Employer identification number

42-6074234

Par	Types of Property				·			
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method noncash co			
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 .							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded	X	10	132,005	Avg High/Lo	w-Da	e Give	<u>en</u>
10	Securities—Closely held stock							
11	Securities—Partnership, LLC,							
	or trust interests	<u> </u>						
12	Securities—Miscellaneous		*****					
13	Qualified conservation							
	contribution—Historic		•					
	structures							
14	Qualified conservation contribution—Other							
4.5								
15 16	Real estate—Residential . Real estate—Commercial .		·· ·· · · · · · · · · · · · · · · · ·					
17	Real estate—Other.				L			
18	Collectibles			·				
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy				ļ.————————————————————————————————————			
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► ()		0	0				
26	Other ► ()		0	0				
27	Other ► ()		0	0				
28	Other ▶ (0	0				
29	Number of Forms 8283 received	by the orga	anization during the tax yea	r for contributions for				
	which the organization complete	d Form 828	3, Part IV, Donee Acknowle	edgment	29			
							Yes	No
30a	• •		•	•	-28	`		
	that it must hold for at least three	•						4
	required to be used for exempt p				•	30a		Χ,
	If "Yes," describe the arrangeme							×
31	Does the organization have a gif		• •	eview of any non-standard			-	.1
	contributions?					31	_X	
32a		•	-	to solicit, process, or sell				
_						32a		_ X
	If "Yes," describe in Part II.							
33	If the organization did not report checked, describe in Part II.	an amount	in column (c) for a type of p	property for which column (a	I) IS		-	

Part II	Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
Part I Line	9: 10 is the number of contributions received

Schedule M (Form 990) (2011)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Employer identification number

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization

42-6074234 IOWA LAW SCHOOL FOUNDATION

Form 990 Part VI Section A Line 2: Stephen M Morain and Deborah M Tharnish - Business
Relationship
Form 990 Part VI Section B Line 11b. A subcommitte of the Board of Directors conducts a
detailed review of the Form 990. Following the detailed review, the final Form 990 is posted
on the Board website and all Board members are notified to access the website and review the
form prior to the filing deadline.
Form 990 Part VI Section B Line 12c: The Iowa Law School Foundation's (ILSF) Board of
Directors, Board Committee Members and Officers (Responsible Persons) have a duty to conduct
activities of the ILSF with the highest ethical standards and to make decisions concerning the
ILSF solely to advance its mission and interests. This conflict of interest policy is to
assist the Board and Responsible Persons in identifying situations that present potential or
actual conflicts of interest and to specify procedures for managing them. (1) Each Responsible
Person must annually complete and submit a statement setting forth any and all potential and
actual conflicts of interest that are anticipated to occur in the coming fiscal year. The
annual statement will be initially reviewed by the President of the Board Upon becoming aware
of any actual or potential conflict of interest not previously disclosed, a Responsible Person
Form 990 Part VI Section B Line 12c: must promptly report, in writing to the President of the
Board, the previously undisclosed circumstances. The President's annual statement and
supplemental reports, if any, shall be reviewed by the Executive Committee (2) Determination
of Conflict The Executive Committee, without the affected Responsible Person present, shall
determine whether a conflict of interest exists. If a conflict of interest exists, the
material facts will be disclosed to the Board of Directors. (3) Action and Recusal: The Board
shall determine whether to authorize, approve, or ratify the arrangement/transaction based
soley on whether it is in the best interest of the Iowa Law School Foundation in performing
ıt's mission. The authorization, approval, and/or ratification must be accomplished by an
affirmative vote, as applicable, of a majority of the Directors on the Board who have no

Schedule O (Form 990 or 990-EZ) (2011)	
Name of the organization IOWA LAW SCHOOL FOUNDATION	Employer identification number 42-6074234
Form 990 Part VI Section B Line 12c: direct of indirect interest in the	
аггаngement/transaction.	
Form 990 Part VI Section C Line 19: The Governing Documents, Conflict of Interest Policy, and	
Financial Statements are available to the public upon request.	
Form 990 Part X Line 11: Pooled Investments held by the Foundation are presented as	
Investments - Other Securities in order to reflect that while most of the pooled funds are	
invested in publicly traded securities, the pooled fund itself is not traded on an active	
market.	
Form 990 Part XI Line 5: Depreciation in the value of split-interest agreements: \$273,054; Net	
depreciation in fair value of investments. \$1,831,132; Transfer of Law Student Loan Fund:	
\$1,988,505 - In prior years, the Foundation provided funding for College of Law students	
through discretionary contributions to a revolving loan fund, which was administered by the	
University of lowa. The assets in the loan fund were appropriately excluded from the assets of	
the Foundation. During the year ended June 30, 2012, as a result of a recommendation from the	ne
Dean of the College of Law to the Foundation board, the cash balance in the loan fund was	
returned to the Foundation to be utilized in providing scholarships to students in the College	
of Law.	
•	
	

Part VI, Line 17 (990) - States with Which a Copy of this Form 990 is Required to be Filed Armed Forces the Americas Louisiana Palau X Massachusetts X Maryland Armed Forces Europe Rhode Island X Alaska X South Carolina Alabama X Maine South Dakota Armed Forces Pacific Marshall Islands X Tennessee Arkansas X Michigan Texas American Samoa X Minnesota X Utah X Arizona Missoun Virginia X California Commonwealth of the Northern Mariana Islands U.S. Virgin Islands X Colorado Mississippi Vermont Connecticut lMontana X Washington X District of Columbia North Carolina X Wisconsin Delaware North Dakota X West Virginia Florida Nebraska Wyoming Federated States of Micronesia X New Hampshire X Georgia X New Jersey Guam New Mexico X Hawaii Nevada Iowa X New York Idaho

X Ohio

X Oregon

Oklahoma

X Pennsylvania

Puerto Rico

Illinois

Indiana

Kansas

X Kentucky

Continuation Sheet for Form 990

Page 1 of

Name of the Organization

IOWA LAW SCHOOL FOUNDATION

Employer identification number

42-6074234

Part VII Section A Continuation of Officers, Directors, Trustees, Key Employees, and Highest

328 FRANK W PECHACEK	Compensated Employees										
Pour per New Pour per New	1 1										
TREASURERIDIRECTOR	Name and title	hours per week (describe hours for related organizations in Schedule		$\overline{}$		·	T		compensation from the organization	compensation from related organizations	amount of other compensation from the organization and related
327) ALFREDO G PARRISH 1		1	x		x				0	0	
328) FRANK W PECHACEK	(27) ALFREDO G PARRISH				Ĥ						
1			<u>^</u>	┢		_		H	0	0	0
DIRECTOR		1.	X	├-	X		<u> </u>	_	0	0	0
DIRECTOR	DIRECTOR	1.	х		lacksquare	_	_	_	0	0	0
DIRECTOR	DIRECTOR	1	х	_				L.	0	0	0
332 STANLEY RICHARDS		1.	х						0	0	0
33) JANE ANN SCHILTZ 1		1.	х						0	0	0
34) HEIDI MCNEIL STAUDENMAIER 1		1.	Х						0	0	0
35) JOHN-MARK STENSVAAG 1		1.	х						0	0	
36) DEBORAH M THARNISH 1	(35) JOHN-MARK STENSVAAG	1									
1	(36) DEBORAH M THARNISH	 									
1	(37) C DANA WATERMAN, III										
(39) SHERRI P FURMAN	(38) ROBERT E YOULE			\vdash							
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