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Form **990-PF**

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

Department of the Treasury

For	calendar year 2012 or tax year beginning		, and ending		
Nar	me of foundation			A Employer identificatio	n number
_I	TA GROUP FOUNDATION			42-1462086	5
	mber and street (or P O box number if mail is not delivered to st	•	Room/suite	B Telephone number	2422
	800 WESTOWN PARKWAY, SU	TE 300	<u> </u>		-3430
	y or town, state, and ZIP code VEST DES MOINES, IA 5026	56		C If exemption application is	pending, check here
G	Check all that apply Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organization	s, check here 🕨 🔲
	Final return	Amended return		2 Foreign organizations m	eeting the 85% test
	Address change	Name change	 	2. Foreign organizations m check here and attach c	omputation
H C) exempt private foundation		E If private foundation st	
	Section 4947(a)(1) nonexempt charitable trust	Other taxable private founda unting method X Cash	Accrual	under section 507(b)(1	
	· —	unting method X Cash Other (specify)	Accidai	F If the foundation is in a under section 507(b)(1	
-	rom Part II, col (c), line 16) ▶\$ 313,605. (Part I, c	olumn (d) must be on cash b	pasis.)	under section 507(b)(1)(b), check here
	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may no	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
	necessarily equal the amounts in column (a))	expenses per books	income	Income	(cash basis only)
	1 Contributions, gifts, grants, etc., received	140,000.		N/A	
	2 Check If the foundation is not required to attach Sch B Interest on savings and temporary	15.	15.		STATEMENT 1
	3 cash investments 4 Dividends and interest from securities	3,473.	3,473.		STATEMENT 2
	5a Gross rents	-3/1/31			
	b Net rental income or (loss)		······································		
•	62 Not com or (loss) from sole of assets not on line 10			14 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
n n	b Gross sales price for all assets on line 6a			1.47.4	
Revenue	7 Capital gain net income (from Part IV, line 2)		0.		
T	8 Net short-term capital gain		·		<u>'</u>
	9 Income modifications VED			_	
	10d and allowences				
	c Gross profit of Nose) 8 2013 Q	_			
	11 Other (néomè		11,11,12		
		143,488.	3,488.		
	12 Total. Addylines 1 through 11 7	0.	0.		0.
	14 Other employee salaries and wages				
Ø	15 Pension plans, employee benefits				
nse	16a Legal fees	625.	312.		313.
χ Φ	b Accounting fees STMT 3	025.	312.		313.
ė Ü	c Other professional fees 17 Interest				
ativ	18 Taxes STMT 4	59.	0.		0.
istr	19 Depreciation and depletion		, , , , , , , , , , , , , , , , , , ,		
Ë	20 Оссиралсу				
Ρ	21 Travel, conferences, and meetings				
and	22 Printing and publications				
ng	23 Other expenses STMT 5	33.	16.		17.
Operating and Administrative Expense	24 Total operating and administrative	717	220		330.
ŏ	expenses. Add lines 13 through 23	717. 119,425.	328.	<u> </u>	119,425.
_	25 Contributions, gifts, grants paid 26 Total expenses and disbursements.	117,423.			117/123.
	Add lines 24 and 25	120,142.	328.		119,755.
_	27 Subtract line 26 from line 12				
)	Excess of revenue over expenses and disbursements	23,346.			
	b Net investment income (if negative, enter -0-)		3,160.		
	c Adjusted net income (if negative, enter -0-)			N/A	

223501 12-05-12 LHA For Paperwork Reduction Act Notice, see instructions.

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Form 990-PF (2012)

ITA GROUP FOUNDATION

2 Savings and temporary cash investments 208	050.	(b) Book Value 3,908.	(c) Fair Market Value
2 Savings and temporary cash investments 208		3,908.	2 2 2 2
2 Savings and temporary cash investments 208	125		3,908.
	, 123 •	229,140.	229,140.
3 Accounts receivable ►			
Less allowance for doubtful accounts			·
4 Pledges receivable ►	·		
Less allowance for doubtful accounts			
5 Grants receivable			
6 Receivables due from officers, directors, trustees, and other			
disqualified persons			
7 Other notes and loans receivable			
Less allowance for doubtful accounts			
8 Inventories for sale or use		<u> </u>	
8 Inventories for sale or use 9 Prepaid expenses and deferred charges			
10a Investments - U.S. and state government obligations			
b Investments - corporate stock		····	
c Investments - corporate bonds			
11 Investments - land, buildings, and equipment basis			
Less. accumulated depreciation			<u> </u>
12 Investments - mortgage loans			
13 Investments - other STMT 7 79	,147.	82,620.	80,557.
14 Land, buildings, and equipment basis ▶			
Less accumulated depreciation		-	
15 Other assets (describe ►)			
	000	215 660	212 (05
16 Total assets (to be completed by all filers) 292	,322.	315,668.	313,605.
17 Accounts payable and accrued expenses			
18 Grants payable			
g 19 Deferred revenue			
20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable		· · -	
21 Mortgages and other notes payable			
22 Other liabilities (describe >)			
	0	0.	
23 Total liabilities (add lines 17 through 22)	0.	<u> </u>	
Foundations that follow SFAS 117, check here			
and complete lines 24 through 26 and lines 30 and 31.			
24 Unrestricted			
25 Temporarily restricted			
24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 292 30 Total net assets or fund balances 292			
Foundations that do not follow SFAS 117, check here			
and complete lines 27 through 31.	0.	0.	
27 Capital stock, trust principal, or current funds	0.	0.	
28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 292	,322.	315,668.	STATEMENT 6
29 Retained earnings, accumulated income, endowment, or other funds 292	,322.	315,668.	
30 Total net assets or fund balances	, 522.	015 <u>7</u> 0001	
24 Total lightiffing and not accuse fluid halaness	,322.	315,668.	
	, , , , , , ,	0 20 7 0 0 0 1	<u></u>
Part III Analysis of Changes in Net Assets or Fund Balances			
1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30			
(must agree with end-of-year figure reported on prior year's return)		1	292,322.
2 Enter amount from Part I, line 27a		2	23,346.
3 Other increases not included in line 2 (itemize)		3	0.
4 Add lines 1, 2, and 3		4	315,668.
5 Decreases not included in line 2 (itemize)		5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30		6	315,668.

	GROUP FOUNDATIO					4	2-140.	2000	Page 3										
	nd Losses for Tax on I		t Income	1/63 (Inaaaa T				_										
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.)		r - ruiciiase		(c) Date	acquired lay, yr)	(d) Dat (mo , d:													
	2-Story brick wateriouse, or common stock, 200 sits wild do / D - Do			- Donation	(1110 , (ay, yi j	(IIIO , u	ay, yı <i>j</i>											
1a				-					_										
b NON	<u> </u>			-															
<u>c</u>				 															
d		<u> </u>		+															
<u>e</u>	(f) Department allowed	(#) Co	at az athaz hasis		<u> </u>	(h) C	<u> </u>												
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				iain or (loss) s (f) minus (a)											
2																			
b									_										
C																			
d		†							_										
8	_	 -						-											
Complete only for assets showing	gain in column (h) and owned by	the foundation	on 12/31/69			I) Gains (0	Col (h) gain i	minus	_										
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col (I) col (j), if any			l (k), but	not less than (from col. (f	-0-) or											
a		<u> </u>																	
b		T																	
C									_										
d																			
е																			
2 Capital gain net income or (net capi	If gain, also ente	er in Part I, line	7	}	2														
	•		•	ノ h															
3 Net short-term capital gain or (loss if gain, also enter in Part I, line 8, ci		nd (6)]															
If (loss), enter -0- in Part I, line 8				لل	3														
Part V Qualification Un	ider Section 4940(e) for	r Reduced	Tax on Net	: Inv	estment In	come													
(For optional use by domestic private f	oundations subject to the section	4940(a) tax on	net investment ir	ncome)														
If section 4940(d)(2) applies, leave this	e nart hlank																		
ii section 4540(d)(2) applies, leave this	s part blank																		
Was the foundation liable for the section			•	rıod?				Yes	X No										
If "Yes," the foundation does not qualify																			
1 Enter the appropriate amount in ea	ch column for each year, see the	instructions bet	fore making any e					(d)											
(a) Base period years	(b) Adjusted qualifying dis	etributione	Not value of no	(C)	itable-use assets	.	Distribi	ition ratio	4-33										
Calendar year (or tax year beginning	<i></i>			лина	237,754		(col (b) divi		(c)) 43517										
2011		05,448. 08,861.	<u>-</u>		158,075				88667										
2010		1,195.			150,904				36859										
2009 2008		8,738.			174,346	:-			81048										
2007		32,203.													165,422.				96929
2007		7272000			195,120														
2 Total of line 1, column (d)						2		3.04	47020										
3 Average distribution ratio for the 5-	vear base period - divide the total	on line 2 by 5.	or by the number	of vea	ars														
the foundation has been in existence	•	oo 2 2, 0,	o, o,	· • • • • • • • • • • • • • • • • • • •		3		.60	09404										
	,																		
4 Enter the net value of noncharitable	-use assets for 2012 from Part X,	line 5				4		234	,320.										
						1_		142	706										
5 Multiply line 4 by line 3						5		142	<u>,796.</u>										
6 Enter 1% of net investment income	(1% of Part L line 27h)					6			32.										
	(
7 Add lines 5 and 6						7		142	,828.										
8 Enter qualifying distributions from I						8	<u> </u>	119	<u>,755.</u>										
If line 8 is equal to or greater than li See the Part VI instructions	ine /, check the box in Part VI, line	e 1b, and comp	lete that part usin	ig a 19	% tax rate														

223521 12-05-12

Form	990-PF(2012) ITA GROUP FOUNDATION				<u> 462086</u>		Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 494		or 494	8 - s	ee instru	ctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" or	n line 1					
	Date of ruling or determination letter (attach copy of letter if necessary-see	instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🛄 and	l enter 1%	1	<u> </u>		 -	<u>63.</u>
	of Part I, line 27b						
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, III	ine 12, col (b) ノ					_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter-	-0-)	-	2			0.
	Add lines 1 and 2			3			63.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter	-0-)		1			0.
	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5	5			63.
	Credits/Payments						
	2012 estimated tax payments and 2011 overpayment credited to 2012 6a	-					
	Exempt foreign organizations - tax withheld at source						
	Tax paid with application for extension of time to file (Form 8868)						
	Backup withholding erroneously withheld 6d		—	_			^
	Total credits and payments Add lines 6a through 6d			7		-	0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			3			63.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			3			03.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	l		0			
	Enter the amount of line 10 to be Credited to 2013 estimated tax	Refunde		1			
	rt VII-A Statements Regarding Activities	d 18				Yes	No
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	a it participate or nite	ivelle III		1a	163	X
	any political campaign?	tructions for definiti	n/2		1b		X
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see ins if the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of				10		
		n arry materials pu	Diisrieu (,,			
_	distributed by the foundation in connection with the activities				10		Х
	Did the foundation file Form 1120-POL for this year? Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year						
u	(1) On the foundation \blacktriangleright \$ 0 . (2) On foundation managers \blacktriangleright \$		0.				
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imp	nosed on foundation					
6	managers > \$ _ 0 •	posou on roundation					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		X
•	If "Yes," attach a detailed description of the activities.						,
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument,	articles of incorpora	tion, or				
•	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	•	,		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?			N/2	A 4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5		X
	If "Yes," attach the statement required by General Instruction T						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						
	By language in the governing instrument, or						
	By state legislation that effectively amends the governing instrument so that no mandatory directions	that conflict with th	e state lav	V			
	remain in the governing instrument?				6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?				7	Х	
	If "Yes," complete Part II, col. (c), and Part XV.						
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)						
	IA				<u> </u>		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gen	neral (or designate)				7,5	
	of each state as required by General Instruction G? If "No," attach explanation				8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(or calenda	ır			v
	year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete F				9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	r names and addresses			10_		

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	irt VII-A Statements Regarding Activities (continued)		_		
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of				
• •	section 512(b)(13)? If "Yes," attach schedule (see instructions)		11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory	orivileges?			
	If "Yes," attach statement (see instructions)	•	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	Х	
	Website address ► N/A				
14	The books are in care of ▶ RICHARD RUE Telephone no	▶ 515-32	6-3	430	
	Located at ▶ 4800 WESTOWN PARKWAY, WEST DES MOINES, IA	ZIP+4 ▶50	266		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			>	
	and enter the amount of tax-exempt interest received or accrued during the year	15	N	/ <u>A</u> _	
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank,			Yes	No
	securities, or other financial account in a foreign country?		16		Х
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of the foreign				
	country				
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly)				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	es X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
	a disqualified person?	es X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	es X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	es X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available				
	for the benefit or use of a disqualified person)?	es 🗓 No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"				
	if the foundation agreed to make a grant to or to employ the official for a period after				
	termination of government service, if terminating within 90 days)	es X No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations				
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here				
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected				
	before the first day of the tax year beginning in 2012?		10		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation				
	defined in section 4942(j)(3) or 4942(j)(5))				
a	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginni	ng			
	before 2012?	'es X No			
	If "Yes," list the years				
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorre				
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attack	h /-			
	statement - see instructions)	N/A	2b		
C	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here				
	>				
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				
	——————————————————————————————————————	'es X No			
t	o If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons a				
	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to				1
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule	C,			1
	Form 4720, to determine if the foundation had excess business holdings in 2012)	N/A	3b	<u> </u>	 -,,-
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a	ļ .	X
ì	a Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpo	se that			

had not been removed from jeopardy before the first day of the tax year beginning in 2012?

223551

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations m	nust complete this part	oreign four	ndations, see	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable	e, etc., purposes	-		
	Average monthly fair market value of securities	, ,, ,		1a	76,673. 161,215.
	Average of monthly cash balances			1b	161,215.
	Fair market value of all other assets			10	
	Total (add lines 1a, b, and c)			1d	237,888.
	Reduction claimed for blockage or other factors reported on lines 1a and				,
_	1c (attach detailed explanation)	1e	0.		
2	Acquisition indebtedness applicable to line 1 assets			2	_ 0.
3	Subtract line 2 from line 1d			3	237,888.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount,	see instructions)		4	3,568.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on			5	234,320.
6	Minimum investment return. Enter 5% of line 5	•		6	11,716.
=	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and foreign organizations check here		undations an	d certain	
<u> </u>	Minimum investment return from Part X, line 6			1	11,716.
	Tax on investment income for 2012 from Part VI, line 5	2a	63.		·
 b	Income tax for 2012 (This does not include the tax from Part VI)	2b			
	Add lines 2a and 2b			2c	63.
3	Distributable amount before adjustments Subtract line 2c from line 1		İ	3	11,653.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	11,653.
6	Deduction from distributable amount (see instructions)			6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part	XIII. line 1		7	11,653.
P	art XII Qualifying Distributions (see instructions)		111		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purp	ooses			119,755.
	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26			1a	119,755.
	Program-related investments - total from Part IX-B			1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitab	ole, etc., purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the				
	Suitability test (prior IRS approval required)			3a	
b	Cash distribution test (attach the required schedule)			3b	110 755
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, ar			4	119,755.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investigations.	stment		_	0
	income Enter 1% of Part I, line 27b			5	0. 119,755.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		, , ,	6	_
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years w 4940(e) reduction of tax in those years	hen calculating whether the	toundation o	jualifies for the	e section

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI, line 7	COTPUS	Todas prior to 2011		11,653.
2 Undistributed income, if any, as of the end of 2012			<u> </u>	
a Enter amount for 2011 only			0.	
b Total for prior years				
D Total to pilot years		0.		
3 Excess distributions carryover, if any, to 2012	· · · · · · · · · · · · · · · · · · ·		<u> </u>	4, , -*.
a From 2007 74, 140.				
b From 2008 110, 139.				
c From 2009 103,714.				
d From 2010 101, 013.				
e From 2011 93,619.				
	482,625.			
f Total of lines 3a through e 4 Qualifying distributions for 2012 from	102/0201	······································		
Part XII, line 4 > \$ 119,755.	***************************************			
a Applied to 2011, but not more than line 2a	· · · · · · · · · · · · · · · · · · ·		0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		· · · · · · · · · · · · · · · · · · ·
c Treated as distributions out of corpus		•		
(Election required - see instructions)	0.			11 (52
d Applied to 2012 distributable amount	100 100			11,653.
e Remaining amount distributed out of corpus	108,102.			· · · · · · · · · · · · · · · · · · ·
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	590,727.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable		0.		
amount - see instructions e Undistributed income for 2011 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2012 Subtract				
lines 4d and 5 from line 1. This amount must	1			
•	1			0.
be distributed in 2013 7 Amounts treated as distributions out of				, , , , , , , , , , , , , , , , , , ,
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
not applied on line 5 or line 7	74,140.			
9 Excess distributions carryover to 2013.	, , , , , ,			
Subtract lines 7 and 8 from line 6a	516,587.			
	,			
10 Analysis of line 9 a Excess from 2008 110, 139.				
b Excess from 2009 103,714.	***************************************			
c Excess from 2010 101,013.				
d Excess from 2011 93 6 19 a				

108,102.

	<u>UP FOUNDATI</u>				62086 Page 1
Part XIV Private Operating Fo	oundations (see in	structions and Part V	II-A, question 9)	N/A	
1 a [f the foundation has received a ruling or	r determination letter that	t it is a private operating			
foundation, and the ruling is effective for	2012, enter the date of	the ruling	>	· · · · · · · · · · · · · · · · · · ·	
b Check box to indicate whether the found	ation is a private operatir	ng foundation described		4942(J)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	<u></u>	Prior 3 years		
income from Part I or the minimum	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
investment return from Part X for					}
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed		İ			
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon a "Assets" alternative test - enter (1) Value of all assets					
(2) Value of assets qualifying under section 4942(i)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					·
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income		<u> </u>			<u> </u>
Part XV Supplementary Infor			if the foundation	had \$5,000 or mo	ore in assets
at any time during th	ne year-see insti	ructions.)			
 Information Regarding Foundation a List any managers of the foundation who 	•	than 2% of the total con	tributions received by the	foundation before the clo	se of any tax
year (but only if they have contributed m			·		,
b List any managers of the foundation who			(or an equally large portion	on of the ownership of a p	artnership or
other entity) of which the foundation has	a 10% or greater interes	st			
NONE					
2 Information Regarding Contribution Check here ► X if the foundation on the foundation makes gifts, grants, etc. (s)	nly makes contributions	to preselected charitable	organizations and does r		
a The name, address, and telephone numb	per or e-mail of the perso	on to whom applications	should be addressed		
b The form in which applications should be	submitted and information	tion and materials they s	hould include		
c Any submission deadlines					
d Any restrictions or limitations on awards	, such as by geographica	al areas, charitable fields	, kinds of institutions, or (other factors	

Part Av Supplementary information		D		<u></u>
3 Grants and Contributions Paid During the Y		Payment	7	
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient	· · · · · · · · · · · · · · · · · · ·	
a Paid during the year				
AMERICAN HEART ASSOCIATION 1111 9TH ST #280	NONE	PUBLIC CHARITY	HEALTH & WELFARE	
DES MOINES, IA 50314				500.
AMANDA THE PANDA 1000 73RD ST., SUITE 12	NONE	PUBLIC CHARITY	CHARITABLE	
DES MOINES, IA 50311				500.
AMERICAN CANCER SOCIETY 8364 HICKMAN ROAD CLIVE, IA 50322	NONE	PUBLIC CHARITY	HEALTH AND WELFARE	500.
AMERICAN DIABETES ASSOCIATION 1701 NORTH BEAUREGARD ST. ALEXANDRIA, VA 22311	NONE	PUBLIC CHARITY	HEALTH AND WELFARE	500.
AMERICAN RED CROSS CENTRAL IOWA CHAPTER 2116 GRAND AVE	NONE	PUBLIC CHARITY	HEALTH AND WELFARE	
DES MOINES, IA 50312		177.46		250.
Total SEE CON	TINUATION SHEE	et(s)	<u>▶ 3a</u>	119,425.
b Approved for future payment NONE				
			▶ 3b	0.
Total				

Part XVI-A	Analysis	of Income	-Producina	Activities
FAIL AVEN	MIIGIYSIS	OI BICOILE	-Froducing	MULLIVILIES

nter gross amounts unless otherwise indicated	Unrelated business income			by section 512, 513, or 514	(e)
-	(a) Business	(b) Amount	(C) Exclu- sion	(d)	Related or exempt
Program service revenue	code	Amount	code	Amount	function income
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash					
investments			14	15.	
Dividends and interest from securities			14	3,473.	
Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal					
property					
Other Investment Income					
Gain or (loss) from sales of assets other					 1
than inventory			1		
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue					
a					
b				_ 	
C	1				
d					
8					<u> </u>
Subtotal Add columns (b), (d), and (e)		(0.	3,488.	(
Total. Add line 12, columns (b), (d), and (e)					3,488
ee worksheet in line 13 instructions to verify calculations)				-	
Part XVI-B Relationship of Activities					

	the foundation's exempt purposes (other than by providing funds for such purposes)	
		-
		
 +		
223621 12-05-12		Form 990-PF (2012

Part XVII	Information Regarding Exempt Organizations	Transfers To	and Transactions	and Relationships With	Noncharitable	
1 Did the or	ganization directly or indirectly engage	in any of the followi	ing with any other organizati	on described in section 501(c) of		res No
	other than section 501(c)(3) organizati					
	from the reporting foundation to a none					
(1) Cash			9		1a(1)	X
(2) Other	assets				1a(2)	X
b Other tran						
(1) Sales	of assets to a noncharitable exempt or	ganization			1b(1)	_ X
(2) Purch	iases of assets from a noncharitable ex	empt organization			1b(2)	X
(3) Renta	il of facilities, equipment, or other asset	s			1b(3)	Х
(4) Reimi	bursement arrangements				1b(4)	_ X
(5) Loans	s or loan guarantees				1b(5)	_ X
(6) Perfo	rmance of services or membership or fi	undraising solicitati	ons		1b(6)	X
c Sharing o	f facilities, equipment, mailing lists, othe	er assets, or paid er	nployees		1c	Х
d If the answ	ver to any of the above is "Yes," comple	te the following sch	edule Column (b) should al	ways show the fair market value o	f the goods, other asset	is,
or service	s given by the reporting foundation. If the	he foundation recei	ved less than fair market val	ue in any transaction or sharing ar	rangement, show in	
column (d) the value of the goods, other assets, o	or services received				
(a) Line no	(b) Amount involved (c) Na		le exempt organization	(d) Description of transfers, tra-	nsactions, and sharing arrar	ngements
		N/A	· · · · · · · · · · · · · · · · · · ·			
						.=
						
			 			
			· · · · · · · · · · · · · · · · · · ·			
						
						_
						_
ın section	ndation directly or indirectly affiliated wi 501(c) of the Code (other than section			izations described	Yes	X No
D II Yes, Co	omplete the following schedule (a) Name of organization		(b) Type of organization	(c) Description	n of relationship	
	N/A		(b) Type of organization	(6) 2000	To to to to to to to to to to to to to to	
	N/ A					
_			-		_	
	penalties of perjury, I declare that I have examelief, it is true, correct, and complete. Declaration					preparer
Here	# WYW		5-30-13	Treasurer	X Yes	No No
Sign	lature of officer or trustee		Date	Title	L	
	Print/Type preparer's name	Preparer's	signature	Date Check	if PTIN	
			1/10	self- employe	1	
Paid	JAY A ANDERSON		IH.	17/11/15	P002237	
Preparer	Firm's name ROTH & CO.	MPANY, P	.C.	Firm's EIN	\rightarrow 42-136103	8
Use Only						
	Firm's address ► 666 WALN					
	DES MOIN	ES, IA 50	309-3918	Phone no		-0266
-					Form 990-	PF (2012)

Schedule B (Form 990; 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

2012

Employer identification number Name of the organization 42-1462086 ITA GROUP FOUNDATION Organization type (check one): Section: Filers of: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively ▶ \$ religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

Employer identification number

ITA G	ROUP FOUNDATION	4.	2-1462086
Part I	Contributors (see instructions). Use duplicate copies of Part I if ac	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ITA GROUP INC. 4800 WESTOWN PARKWAY, SUITE 300 WEST DES MOINES, IA 50266	\$140,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution

Person Payroll

(Complete Part II if there is a noncash contribution) Name of organization

Employer identification number

ITÀ GROUP FOUNDATION

42-1462086

	cash Property (see instructions). Use duplicate copies of F	ar in additional space is fleeded.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	-
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	-
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Employer identification number

ITÀ GR	OUP FOUNDATION		42-1462086
Part III	Exclusively religious, charitable, etc., indi year. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if addition	the following line entry. For organization to , contributions of \$1,000 or less for t	(7), (8), or (10) organizations that total more than \$1,000 for the ns completing Part III, enter the year (Enter this information once)
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
10.00			
-		(e) Transfer of gift	
-	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
-	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	
-	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee

* 40 3 W

FORM 990-PF INTEREST ON SAVI	INGS AND TEM	PORARY CASI	H INVESTMENTS	STATEMENT 1
SOURCE				AMOUNT
WELLS FARGO SECURITIES				15.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A		15.
FORM 990-PF DIVIDEND	OS AND INTER	EST FROM SI	CURITIES	STATEMENT 2
SOURCE	GROSS	AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
WELLS FARGO ADVISORS		3,473.	0.	3,473.
TOTAL TO FM 990-PF, PART I, I	.N 4	3,473.	0.	3,473.
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS		(C) T- ADJUSTEI ME NET INCOM	CHARITABLE
ACCOUNTING FEES	625.	31	12.	313.
TO FORM 990-PF, PG 1, LN 16B	625.	31	12.	313.
FORM 990-PF	TAX	ES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS		(C) T- ADJUSTEI ME NET INCOM	CHARITABLE
FEDERAL EXCISE TAX	59.		0.	0.
TO FORM 990-PF, PG 1, LN 18	59.		0.	0.

* * * * * * *

FORM 990-PF	OTHER	EXPENSES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
BANK FEES	33		16.			17.
TO FORM 990-PF, PG 1, LN 23	33		16.			17.
FORM 990-PF	OTHER	FUNDS	,		STATEMENT	6
DESCRIPTION			BEGI	(A) INNING OF YEAR	(B) END OF YEAR	
FUND BALANCE				292,322.	315,6	68.
TOTAL TO FORM 990-PF, PART I	I, LINE 29			292,322.	315,6	68.
FORM 990-PF	OTHER IN	VESTMENTS			STATEMENT	7
DESCRIPTION	V	ALUATION METHOD	вос	OK VALUE	FAIR MARKE VALUE	Т
WELLS FARGO ADVISORS-MUTUAL I	- FUNDS	COST		82,620.	80,5	57.
TOTAL TO FORM 990-PF, PART I	I, LINE 13			82,620.	80,5	57.

Part XV Supplementary Information Grants and Contributions Paid During the				
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	Amount
ANAWIM HOUSING	NONE	PUBLIC CHARITY	HEALTH AND WELFARE	
921 6TH AVE, SUITE B				:
DES MOINES, IA 50309				_2,000
BLANK PARK ZOO	NONE	PUBLIC CHARITY	civic	
7401 SW 9TH STREET				
DES MOINES, IA 50315				2,500
BOYS & GIRLS CLUB OF CENTRAL IOWA	NONE	PUBLIC CHARITY	CHARITABLE	
1350 E WASHINGTON AVE				1,000
DES MOINES, IA 50316				1,000
BRAVO GREATER DES MOINES	NONE	PUBLIC CHARITY	civic	
1915 GRAND AVE				2 500
DES MOINES, IA 50309				2,500
CHILDREN AND FAMILIES OF IOWA	NONE	PUBLIC CHARITY	HEALTH AND WELFARE	
1111 UNIVERSITY AVE				
DES MOINES, IA 50314				5,250
			•	
CHILDREN'S HEALTH FUND	NONE	PUBLIC CHARITY	HEALTH AND WELFARE	
215 WEST 125TH STREET, SUITE 301 NEW YORK, NY 10027				200
CHILDSERVE	NONE	PUBLIC CHARITY	HEALTH AND WELFARE	
5406 MERLE HAY RD				
JOHNSTON, IA 50131		 		500
CIVIC CENTER 221 WALNUT	NONE	PUBLIC CHARITY	CIAIC	
DES MOINES, IA 50309				2,500
CORNERSTONE OF HOPE	NONE	PUBLIC CHARITY	HEALTH AND WELFARE	
5905 BRECKSVILLE RD.				250
CLEVELAND, OH 44131-1517				250
CYSTIC FIBROSIS FOUNDATION	NONE	PUBLIC CHARITY	HEALTH AND WELFARE	
1025 ASHWORTH RD, STE 512			-	
WEST DES MOINES, IA 50265 Total from continuation sheets				250 117,175

Part XV Supplementary Information Grants and Contributions Paid During the				1
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
DES MOINES PLAYHOUSE	NONE	PUBLIC CHARITY	civic	
831 42ND ST. DES MOINES, IA 50312-2684				5,000
DES MOINES PUBLIC LIBRARY FOUNDATION	NONE	PUBLIC CHARITY	civic	
1000 GRAND AVE				2 500
DES MOINES, IA 50309				2,500
DIS VOLVES SUMPLIONS	NONE	PUBLIC CHARITY	CIVIC	
DES MOINES SYMPHONY 221 WALNUT	NONE	FOBBIC CHARITI		
DES MOINES, IA 50309		-		2,000
DMACC FOUNDATION	NONE	PUBLIC CHARITY	EDUCATIONAL	:
2006 S. ANKENY BLVD., BLDG. 22 ANKENY, IA 50023				3,000
ANALNI, IA 30023				7,555
EASTER SEALS	NONE	PUBLIC CHARITY	HEALTH AND WELFARE	
401 NE 66TH AVE.	NONE			
DES MOINES, IA 50313				250
EPILEPSY ASSOCIATION OF IOWA 321 W. STATE ST	NONE	PUBLIC CHARITY	HEALTH AND WELFARE	
ROCKFORD, IL 61101				150
ESGR IOWA	NONE	PUBLIC CHARITY	civic	
7105 NW 70TH AVE JOHNSTON, IA 50131				1,750
HEMOPHILIA OF IOWA	NONE	PUBLIC CHARITY	HEALTH AND WELFARE	
PO BOX 415				
CENTRAL CITY, IA 52214				250
HOSPICE OF CENTRAL IOWA 401 RAILROAD PL	NONE	PUBLIC CHARITY	HEALTH AND WELFARE	
WEST DES MOINES, IA 50265				1,000
HUNTINGTON'S DISEASE SOCIETY OF	NONE	PUBLIC CHARITY	HEALTH AND WELFARE	
AMERICA				
1824 G AVE ESSEX, IA 51638				150
Total from continuation sheets	<u> </u>			

Part XV Supplementary Information 3 Grant's and Contributions Paid During the				_
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
IOWA CHAPTER OF APDA (PARKINSON'S)	NONE	PUBLIC CHARITY	HEALTH AND WELFARE	
PO BOX 507 WAUKEE IA 50263				500
miones, in Society				
IOWA COLLEGE FOUNDATION	NONE	PUBLIC CHARITY	EDUCATIONAL	
505 5TH AVENUE				
DES MOINES, IA 50309				1,000
IOWA HOMELESS YOUTH CENTERS 1219 BUCHANAN ST	NONE	PUBLIC CHARITY	HEALTH AND WELFARE	
DES MOINES, IA 50316				2,000
JUNIOR ACHIEVEMENT	NONE	PUBLIC CHARITY	civic	
6100 GRAND AVE				3 000
DES MOINES, IA 50312				3,000
			WALES OF AND LIES FARE	
JUVENILE DIABETES RESEACH FOUNDATION 5444 NW 96TH ST	NONE	PUBLIC CHARITY	HEALTH AND WELFARE	
JOHNSTON, IA 50131				. 5,500.
KIWANIS MIRACLE LEAGUE	NONE	PUBLIC CHARITY	CHARITABLE	
505 5TH AVENUE, SUITE 302 DES MOINES, IA 50309				125
DES MOINES, IA 30309		+		123
LEUKEMIA & LYMPHOMA SOCIETY	NONE	PUBLIC CHARITY	HEALTH AND WELFARE	
421 S. 49TH ST	NO.13			
WEST DES MOINES, IA 50265	<u> </u>			500
LINK ASSOCIATES	NONE	PUBLIC CHARITY	HEALTH AND WELFARE	
1452 29TH ST WEST DES MOINES, IA 50266				3,000
LIVING HISTORY FARMS	NONE	PUBLIC CHARITY	EDUCATIONAL	
11121 HICKMAN ROAD				
URBANDALE, IA 50322		<u></u>		· _ 250
MAKE A WISH FOUNDATION OF IOWA 3838 70TH ST	NONE	PUBLIC CHARITY	HEALTH AND WELFARE	
URBANDALE, IA 50322	<u> </u>		<u> </u>	4,000
Total from continuation sheets			· · · · · · · · · · · · · · · · · · ·	L

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
MARCH OF DIMES	иоие	PUBLIC CHARITY	HEALTH AND WELFARE	
1275 MAMMARONECK AVE. WHITE PLAINS, NY 10605				1,000
MENT C DOOR MAD RESIDENT AND	NONE	DIDITO CUADITO	HEALTH AND WELFARE	
MEALS FROM THE HEARTLAND 4949 WESTOWN PARKWAY, SUITE 165	NONE	FUBLIC CHARITI	REALIN AND WELFARE	2 50/
WEST DES MOINES, IA 50266				3,500
METRO ARTS ALLIANCE	NONE	PUBLIC CHARITY	civic	
500 EAST LOCUST, SUITE 201 DES MOINES, IA 50309				350
MICUARY I BOY FOUNDAMION	NONE	DIDLIC CUADITY	HEALTH AND WELFARE	
MICHAEL J. FOX FOUNDATION CHURCH STREET STATION, PO BOX 780 NEW YORK, NY 10008-0780	NONE	FOBBIC CHARITI	HEADIN AND WESTAKE	5,000
MID-IOWA COUNCIL OF BOY SCOUTS OF	NONE	PUBLIC CHARITY	CIVIC	
AMERICA PO BOX 3009				
DES MOINES, IA 50316				250
OAKRIDGE NEIGHBORHOOD SERVICES	NONE	PUBLIC CHARITY	HEALTH AND WELFARE	
926 OAKRIDGE DR DES MOINES, IA 50314				500
ORCHARD PLACE 925 SW PORTER	NONE	PUBLIC CHARITY	HEALTH AND WELFARE	
DES MOINES, IA 50315				500
PREVENT CHILD ABUSE	NONE	PUBLIC CHARITY	HEALTH AND WELFARE	
505 FIFTH ST, SUITE 900 DES MOINES, IA 50309				250
PRINCIPAL CHARITY CLASSIC	NONE	PUBLIC CHARITY	civic	
2771 104TH ST, STE 1 URBANDALE, IA 50322				3,000
SALISBURY HOUSE FOUNDATION 4025 TONAWANDA DRIVE	NONE	PUBLIC CHARITY	civic	
DES MOINES, IA 50312 Total from continuation sheets		<u> </u>		2,500

3 Grant's and Contributions Paid During the	Year (Continuation)			
, Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
SPECIAL OLYMPICS OF IOWA	NONE	PUBLIC CHARITY	CHARITABLE	
STI DOVETAIL RD				1,00
OYS FOR TOTS	NONE	PUBLIC CHARITY	HEALTH AND WELFARE	
17 DICKMAN RD DES MOINES, IA 50315				25
UNITED WAY OF CENTRAL IOWA	NONE	PUBLIC CHARITY	civic	
1111 9TH ST DES MOINES, IA 50314				31,00
UP WITH DOWN (DOWN SYNDROME GROUP) 7780 OFFICE PLAZA DR SOUTH #112	NONE	PUBLIC CHARITY	HEALTH AND WELFARE	
WEST DES MOINES, IA 50266				50
VARIETY THE CHILDRENS CHARITY 505 FIFTH AVE, SUITE 310 DES MOINES, IA 50309	NONE	PUBLIC CHARITY	civic	1,50
MOINED, IN 30305				
WILDWOOD HILLS RANCH 3000 ST CHARLES ROAD ST CHARLES, IA 50240	NONE	PUBLIC CHARITY	HEALTH AND WELFARE	50
YESS	NONE	PUBLIC CHARITY	HEALTH AND WELFARE	
918 SE 11TH ST. DES MOINES, IA 50309-5324				500
YOUNG WOMEN'S RESOURCE CENTER	NONE	PUBLIC CHARITY	HEALTH AND WELFARE	
700 E. 2ND ST DES MOINES, IA 50309				1,000
OUTH HOMES OF MID-AMERICA	NONE	PUBLIC CHARITY	HEALTH AND WELFARE	
OHNSTON, IA 50131				50
FOOD BANK OF CENTRAL IOWA 2220 E. 17TH ST	NONE	PUBLIC CHARITY	HEALTH AND WELFARE	
DES MOINES, IA 50316-2114 Total from continuation sheets			1	25

3 Grant's and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
GREATER DES MOINES BOTANICAL GARDEN	none	PUBLIC CHARITY	EDUCATIONAL	
909 ROBERT D RAY DRIVE DES MOINES, IA 50316		-		5,00
HOUSE OF MERCY	NONE	PUBLIC CHARITY	HEALTH AND WELFARE	
1409 CLARK ST DES MOINES, IA 50314				75
HOYT SHERMAN PLACE 1501 WOODLAND AVE	NONE	PUBLIC CHARITY	civic	
DES MOINES, IA 50314				1,70
CURVALLIA TOURIDATION	NONE	PUBLIC CHARITY	POUCAMIONAL.	
CHRYSALIS FOUNDATION 300 E. LOCUST ST	NONE	POBLIC CHARITI	EDUCATIONAL	
DES MOINES, IA 50309				2,00
AIB	NONE	PUBLIC CHARITY	EDUCATIONAL	
2500 FLUER DR DES MOINES, IA 50321				1,00
DES MOINES, IA 30321				2,50
-				
		 		
Total from continuation sheets			<u> </u>	