


Form 990



Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public

▶ Information about Form 990 and its instructions is at [www.irs.gov/form990](#)

OMB No 1545-0047

2015

Open to Public Inspection

A For the 2015 calendar year, or tax year beginning 01-01-2015 , and ending 12-31-2015

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization
THE GREATER CEDAR RAPIDS COMMUNITY FOUNDATION

Doing business as

Number and street (or P O box if mail is not delivered to street address)Room/suite

324 3RD ST SE

City or town, state or province, country, and ZIP or foreign postal code
CEDAR RAPIDS, IA 52401

F Name and address of principal officer
LESLIE H GARNER JR
324 3RD ST SE
CEDAR RAPIDS,IA 52401

H(a) Is this a group return for subordinates?

No

☐ Yes ☒ No

H(b) Are all subordinates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶

D Employer identification number
42-6053860

E Telephone number
(319) 366-2862

G Gross receipts \$ 18,818,812

I Tax-exempt status

☒ 501(c)(3) ☐ 501(c) () ◀(insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW GCRCF ORG

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1987

M State of legal domicile IA

Part I

Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
TO HELP DONORS MAKE A LASTING DIFFERENCE IN THEIR COMMUNITIES THROUGH GRANTS TO NONPROFITS

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)

4 Number of independent voting members of the governing body (Part VI, line 1b)

5 Total number of individuals employed in calendar year 2015 (Part V, line 2a)

6 Total number of volunteers (estimate if necessary)

7a Total unrelated business revenue from Part VIII, column (C), line 12

b Net unrelated business taxable income from Form 990-T, line 34

3

4

5

6

7a

7b

21

21

18

203

-22,159

-35,652

Revenue

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)

16a Professional fundraising fees (Part IX, column (A), line 11e)

b Total fundraising expenses (Part IX, column (D), line 25) ▶625,904

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)

18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)

19 Revenue less expenses Subtract line 18 from line 12

Prior Year

5,933,571

50,000

9,831,928

111,380

15,926,879

Current Year

10,781,931

0

7,974,352

62,033

18,818,316

13

5,742,296

0

1,091,899

0

1,020,053

7,854,248

8,072,631

Current Year

7,265,327

0

1,275,479

298

903,184

9,444,288

9,374,028

Net Assets or Fund Balances

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

22 Net assets or fund balances Subtract line 21 from line 20

Beginning of Current Year

142,031,905

31,790,908

110,240,997

End of Year

139,903,246

32,077,545

107,825,701

Part II

Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

Signature of officer

2016-11-09

Date

LESLIE H GARNER JR PRESIDENT & CEO

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name
CARLEY UMSTEAD

Preparer's signature
CARLEY UMSTEAD

Date

Check ☐ if self-employed

PTIN
P00982177

Firm's name ▶ RSM US LLP

Firm's EIN ▶ 42-0714325

Firm's address ▶ 201 FIRST ST SE SUITE 800

Phone no (319) 298-5333

CEDAR RAPIDS, IA 52401

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990(2015)

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

1

Briefly describe the organization's mission

THE MISSION OF THE GREATER CEDAR RAPIDS COMMUNITY FOUNDATION IS TO HELP DONORS GIVE IN MEANINGFUL WAYS, TO STRENGTHEN NONPROFITS, AND TO PROVIDE LEADERSHIP THAT SUPPORTS A VIBRANT COMMUNITY

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes

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?

Yes

No

If "Yes," describe these changes on Schedule O

4

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a

(Code) (Expenses \$ 8,095,930 including grants of \$ 7,265,327) (Revenue \$ 57,945)

THE GREATER CEDAR RAPIDS COMMUNITY FOUNDATION PROVIDES PROFESSIONAL PHILANTHROPIC SERVICES FOR DONORS IN EAST CENTRAL IOWA AND HAS OVER 700 FUNDS BUILT WITH GIFTS AND BEQUESTS. IN 2015, THE FOUNDATION RECEIVED \$10.8 MILLION IN CONTRIBUTIONS FROM INDIVIDUALS, FAMILIES AND BUSINESSES. ALSO IN 2015, THE COMMUNITY FOUNDATION AWARDED \$7.3 MILLION IN GRANTS TO LOCAL NONPROFIT ORGANIZATIONS.

4b

(Code) (Expenses \$ 122,398 including grants of \$) (Revenue \$ 930)

THE NONPROFIT NETWORK IS A PROGRAM OF THE GREATER CEDAR RAPIDS COMMUNITY FOUNDATION THAT PROVIDES A POINT OF CONNECTION AND RESOURCES FOR LOCAL NONPROFIT ORGANIZATIONS AND PROFESSIONALS. THE PROGRAMS OF THE NONPROFIT NETWORK FOCUS ON PEER ENGAGEMENT, LEARNING OPPORTUNITIES, AND NONPROFIT INFORMATION.

4c

(Code) (Expenses \$ including grants of \$) (Revenue \$)

4d



















Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e

Total program service expenses ▶ 8,218,328

Part IV Checklist of Required Schedules

	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 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 	3	No
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 Yes	
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	No
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 Yes	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, 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 Yes	
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10 Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
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 Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	11b Yes	
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 	11c	No
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	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	12b	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
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	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	No
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	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
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? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26		No
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 entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
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>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance				Yes	No
Check if Schedule O contains a response or note to any line in this Part V				<input type="checkbox"/>	
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		1a	32		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		1b	0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c	Yes		
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	18		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		2b	Yes		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a	Yes		
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O		3b	Yes		
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 account)?		4a		No	
b If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)					
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		No	
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		No	
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c			
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		6a		No	
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b			
7 Organizations that may receive deductible contributions under section 170(c).					
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		7a		No	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b			
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		No	
d If "Yes," indicate the number of Forms 8282 filed during the year		7d			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		No	
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		No	
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			
8 Sponsoring organizations maintaining donor advised funds.					
Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		8		No	
9a Did the sponsoring organization make any taxable distributions under section 4966?		9a		No	
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		No	
10 Section 501(c)(7) organizations. Enter					
a Initiation fees and capital contributions included on Part VIII, line 12		10a			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		10b			
11 Section 501(c)(12) organizations. Enter					
a Gross income from members or shareholders		11a			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		11b			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?					
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year		12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.					
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O		13a			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		13b			
c Enter the amount of reserves on hand		13c			
14a Did the organization receive any payments for indoor tanning services during the tax year?		14a		No	
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		14b			

Part VI Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI ☒

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 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	21	
1b	Enter the number of voting members included in line 1a, above, who are independent	21	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	No
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	8a	Yes
b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	No
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	Yes
b	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	Yes
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
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?		
a	The organization's CEO, Executive Director, or top management official	15a	Yes
b	Other officers or key employees of the organization	15b	Yes
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed **CA**

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records
LESLIE H GARNER JR 324 3RD ST SE CEDAR RAPIDS, IA 52401 (319) 366-2862

Part VII

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

Check if Schedule O contains a response or note to any line 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) CHRIS SKOGMAN CHAIR	2 00	X		X				0	0	0
(2) KEVIN WELU CHAIR - ELECT	2 00	X		X				0	0	0
(3) KATIE OBERBROECKLING TREASURER	2 00	X		X				0	0	0
(4) LYDIA BROWN SECRETARY	2 00	X		X				0	0	0
(5) KARL CASSELL DIRECTOR	2 00	X						0	0	0
(6) JOHN CHAIMOV DIRECTOR	2 00	X						0	0	0
(7) TERRI CHRISTOFFERSEN DIRECTOR	2 00	X						0	0	0
(8) BRENT COBB DIRECTOR	2 00	X						0	0	0
(9) LOREN COPPOCK DIRECTOR	2 00	X						0	0	0
(10) PATRICK DEPALMA DIRECTOR	2 00	X						0	0	0
(11) GREG DUNN DIRECTOR	2 00	X						0	0	0
(12) TIFFANY ANN EARL DIRECTOR	2 00	X						0	0	0
(13) SARA FISETTE DIRECTOR	2 00	X						0	0	0
(14) PEGGY HARDESTY DIRECTOR	2 00	X						0	0	0

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)							(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former				
(15) MAUREEN KENNEY DIRECTOR	2 00	X						0	0	0	
(16) AMY LYNCH DIRECTOR	2 00	X						0	0	0	
(17) CHERYLE MITVALSKY DIRECTOR	2 00	X						0	0	0	
(18) THOMAS MOORE DIRECTOR	2 00	X						0	0	0	
(19) JULIE NOSEK DIRECTOR	2 00	X						0	0	0	
(20) JOHN OSAKO DIRECTOR	2 00	X						0	0	0	
(21) OATHER TAYLOR DIRECTOR	2 00	X						0	0	0	
(22) LESLIE H GARNER JR PRESIDENT & CEO	40 00			X				195,298	0	33,488	
(23) JEAN BRENNENMAN CFO	40 00			X				93,672	0	17,623	
(24) MICHELLE BEISKER VP OF DEVELOPMENT	40 00					X		100,545	0	13,047	
1b Sub-Total											
c Total from continuation sheets to Part VII, Section A											
d Total (add lines 1b and 1c)								389,515	0	64,158	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 2

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4 Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A)	(B)	(C)
Name and business address	Description of services	Compensation
FUND EVALUATION GROUP	INVESTMENT CONSULTING	130,525
201 E 5TH STREET SUITE 1600 CINCINNATI, OH 45202		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 1

Part VIII

Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514		
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . .	1a	6,211	10,781,931				
	b	Membership dues	1b						
	c	Fundraising events	1c						
	d	Related organizations	1d						
	e	Government grants (contributions)	1e	252,752					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	10,522,968					
	g	Noncash contributions included in lines 1a-1f \$		1,056,637					
	h	Total. Add lines 1a-1f							
Program Service Revenue			Business Code						
	2a								
	b								
	c								
	d								
	e								
	f	All other program service revenue							
	g	Total. Add lines 2a-2f							
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		3,578,565			3,578,565		
	4	Income from investment of tax-exempt bond proceeds . . .							
	5	Royalties							
	6a	(i) Real		(ii) Personal	25,317			25,317	
		25,317							
		b Less rental expenses		0					
		c Rental income or (loss)		25,317					
	d	Net rental income or (loss)							
	7a	(i) Securities		(ii) Other	4,395,787			4,395,787	
		4,395,798		485					
		b Less cost or other basis and sales expenses		0					496
		c Gain or (loss)		4,395,798					-11
	d	Net gain or (loss)							
	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18		a					
	b	Less direct expenses		b					
	c	Net income or (loss) from fundraising events . . .							
	9a	Gross income from gaming activities See Part IV, line 19		a					
	b	Less direct expenses		b					
	c	Net income or (loss) from gaming activities							
	10a	Gross sales of inventory, less returns and allowances		a					
		b Less cost of goods sold		b					
		c Net income or (loss) from sales of inventory . . .							
Miscellaneous Revenue		Business Code							
11a	OTHER INCOME		900099	58,875	58,875				
b	PARTNERSHIP UBIT		900099	-22,159		-22,159			
c									
d	All other revenue								
e	Total. Add lines 11a-11d			36,716					
12	Total revenue. See Instructions			18,818,316	58,875	-22,159	7,999,669		

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).

Check if Schedule O contains a response or note to any line in this Part IX ☐

Do not include amounts reported on lines 6b, 7b, 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 domestic organizations and domestic governments. See Part IV, line 21	7,236,887	7,236,887		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	26,440	26,440		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	2,000	2,000		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	352,217	93,978	128,877	129,362
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	733,018	293,263	181,578	258,177
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	52,194	20,710	12,844	18,640
9	Other employee benefits	85,061	32,606	21,988	30,467
10	Payroll taxes	52,989	21,025	13,040	18,924
11	Fees for services (non-employees)				
a	Management				
b	Legal	4,635		4,635	
c	Accounting	44,395		44,395	
d	Lobbying	1,460		1,460	
e	Professional fundraising services. See Part IV, line 17	298			298
f	Investment management fees	308,438	308,438		
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	10,371	5,531	2,200	2,640
12	Advertising and promotion	46,117	10,553	15,180	20,384
13	Office expenses	35,633	14,697	8,729	12,207
14	Information technology	79,411	33,203	20,052	26,156
15	Royalties				
16	Occupancy	149,535	46,897	65,790	36,848
17	Travel	20,129	5,568	9,778	4,783
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	17,088	10,757	2,843	3,488
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	105,713	44,308	26,591	34,814
23	Insurance	11,563	1,144	9,275	1,144
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a	DUES & SUBSCRIPTIONS	33,119	6,230	3,410	23,479
b	INVESTMENT EXPENSES	23,443		23,443	
c	ACCRUED VACATION	11,370	4,093	3,184	4,093
d	LIFE INSURANCE EXPENSE	764		764	
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	9,444,288	8,218,328	600,056	625,904
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X

Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X ☐

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing				1	
	2	Savings and temporary cash investments			4,774,390	2	9,183,644
	3	Pledges and grants receivable, net			720,051	3	558,105
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L				5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			18,362	9	24,877
	10a	Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D	10a	2,054,131			
	b	Less: accumulated depreciation	10b	481,412	1,606,875	10c	1,572,719
	11	Investments—publicly traded securities			101,862,189	11	93,042,038
	12	Investments—other securities. See Part IV, line 11			32,210,822	12	34,672,515
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			839,216	15	849,348
16	Total assets. Add lines 1 through 15 (must equal line 34)			142,031,905	16	139,903,246	
Liabilities	17	Accounts payable and accrued expenses			53,404	17	63,458
	18	Grants payable			4,985	18	11,738
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			29,757,776	21	29,994,525
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	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			1,974,743	25	2,007,824
	26	Total liabilities. Add lines 17 through 25			31,790,908	26	32,077,545
	Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
27		Unrestricted net assets			107,880,776	27	106,115,382
28		Temporarily restricted net assets			2,360,221	28	1,710,319
29		Permanently restricted net assets				29	
Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.							
30		Capital stock or trust principal, or current funds				30	
31		Paid-in or capital surplus, or land, building or equipment fund				31	
32		Retained earnings, endowment, accumulated income, or other funds				32	
33		Total net assets or fund balances			110,240,997	33	107,825,701
34		Total liabilities and net assets/fund balances			142,031,905	34	139,903,246

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	18,818,316
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,444,288
3	Revenue less expenses Subtract line 2 from line 1	3	9,374,028
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	110,240,997
5	Net unrealized gains (losses) on investments	5	-11,480,224
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-309,100
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	107,825,701

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both		No
Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both	Yes	
Separate basis Consolidated basis Both consolidated and separate basis			
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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A
(Form 990 or 990EZ)

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.
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047
2015
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
THE GREATER CEDAR RAPIDS COMMUNITY FOUNDATION

Employer identification number
42-6053860

Part I

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

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

1

☐

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

2

☐

A school described in **section 170(b)(1)(A)(ii).**(Attach Schedule E (Form 990 or 990-EZ))

3

☐

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

4

☐

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 _____

5

☐

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).**

7

☐

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)

8

☒

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9

☐

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)

10

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11

☐

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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g

a

☐

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**

b

☐

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**

c

☐

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**

d

☐

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**

e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f

Enter the number of supported organizations

g

Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii)EIN	(iii) Type of organization (described on lines 1- 9 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
1 Gifts, grants, contributions, and membership fees received (Do not include any unusual grants)	6,388,979	6,980,461	9,321,993	5,933,571	10,781,931	39,406,935
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	6,388,979	6,980,461	9,321,993	5,933,571	10,781,931	39,406,935
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						3,694,022
6 Public support. Subtract line 5 from line 4						35,712,913

Section B. Total Support						
Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
7 Amounts from line 4	6,388,979	6,980,461	9,321,993	5,933,571	10,781,931	39,406,935
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,845,684	4,555,746	3,322,648	3,114,091	3,603,882	17,442,051
9 Net income from unrelated business activities, whether or not the business is regularly carried on		23,338				23,338
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	8,385	21,151	285,380	76,076	58,875	449,867
11 Total support. Add lines 7 through 10						57,322,191
12 Gross receipts from related activities, etc (see instructions)					12	284,638
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					<input type="checkbox"/>	

Section C. Computation of Public Support Percentage						
14	Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	<table><tr><td>14</td><td>62 300 %</td></tr><tr><td>15</td><td>54 610 %</td></tr></table>	14	62 300 %	15	54 610 %
14	62 300 %					
15	54 610 %					
15	Public support percentage for 2014 Schedule A, Part II, line 14					
16a	33 1/3% support test—2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>				
b	33 1/3% support test—2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>				
17a	10%-facts-and-circumstances test—2015. 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 VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization	<input type="checkbox"/>				
b	10%-facts-and-circumstances test—2014. 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 VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization	<input type="checkbox"/>				
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>				

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 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 ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2015. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

b 33 1/3% support tests—2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		

Part IV

Supporting Organizations (continued)

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3 Parent of Supported Organizations. Answer (a) and (b) below.			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E

☐

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI) _____		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount		Current Year	
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions) <input type="checkbox"/>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2015			
a			
b			
c			
d From 2013.			
e From 2014.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2016. Add lines 3j and 4c			
8 Breakdown of line 7			
a			
b			
c Excess from 2013.			
d From 2014.			
e From 2015.			

Part VI Supplemental Information.

Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference

Explanation

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.
▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization THE GREATER CEDAR RAPIDS COMMUNITY FOUNDATION	Employer identification number 42-6053860
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV	
2	Political expenditures	\$
3	Volunteer hours	

Part I-B Complete if the organization is exempt under section 501(c)(3).

1	Enter the amount of any excise tax incurred by the organization under section 4955	\$
2	Enter the amount of any excise tax incurred by organization managers under section 4955	\$
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," describe in Part IV	

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	\$
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	\$
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	\$
4	Did the filing organization file Form 1120-POL for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
2				
3				
4				
5				
6				

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount Enter the amount from the following table in both columns														
<table><tr><th>If the amount on line 1e, column (a) or (b) is:</th><th>The lobbying nontaxable amount is:</th></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a If zero or less, enter -0-														
i	Subtract line 1f from line 1c If zero or less, enter -0-														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?														

☐ Yes

☐ No

4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity		(a)		(b)	
		Yes	No	Amount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
a	Volunteers?		No		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No		
c	Media advertisements?		No		
d	Mailings to members, legislators, or the public?		No		
e	Publications, or published or broadcast statements?		No		
f	Grants to other organizations for lobbying purposes?		No		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		1,460	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No		
i	Other activities?		No		
j	Total. Add lines 1c through 1i.			1,460	
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No		
b	If "Yes," enter the amount of any tax incurred under section 4912.				
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912.				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				

Part III-A

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV

Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
PART II-B, LINE 1	THE FOUNDATION PAYS A LOBBYIST TO DISCUSS THE ENDOW IOWA TAX CREDIT WITH THE STATE LEGISLATURE

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
THE GREATER CEDAR RAPIDS COMMUNITY FOUNDATION

Employer identification number
42-6053860

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	209	3
2 Aggregate value of contributions to (during year)	4,976,622	5,242
3 Aggregate value of grants from (during year)	3,218,669	20,700
4 Aggregate value at end of year	22,458,171	406,077

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 ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

☒ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education)

☐ Protection of natural habitat

☐ Preservation of open space

☐ Preservation of an historically important land area

☐ Preservation of a certified historic structure

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 Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4 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 violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
►

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
► \$

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

☐ Yes ☐ No

9 In Part XIII, 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" on Form 990, Part IV, line 8.

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

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

(i) Revenue included on Form 990, Part VIII, line 1

► \$

(ii) Assets included in Form 990, Part X

► \$

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

a Revenue included on Form 990, Part VIII, line 1

► \$

b Assets included in Form 990, Part X

► \$

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

Cat No 52283D

Schedule D (Form 990) 2015

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets
(continued)

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

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?

☐ Yes

☐ No

Part IV Escrow and Custodial Arrangements.
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☒ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☒ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☒

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	104,418,805	102,892,673	90,365,236	80,312,002	84,326,973
b Contributions	6,425,741	3,647,845	7,107,815	5,394,012	2,671,999
c Net investment earnings, gains, and losses	3,398,306	3,542,909	9,592,629	9,209,790	-443,475
d Grants or scholarships	2,572,572	2,888,093	2,449,694	3,054,513	4,614,950
e Other expenditures for facilities and programs					
f Administrative expenses	9,106,775	2,776,529	1,723,313	1,496,055	1,628,545
g End of year balance	102,563,505	104,418,805	102,892,673	90,365,236	80,312,002

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment ▶ 100 000 %

b

Permanent endowment ▶

c

Temporarily restricted endowment ▶

The percentages on lines 2a, 2b, and 2c should equal 100%

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

(ii) related organizations

	Yes	No
3a(i)		No
3a(ii)		No

b

If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

3b		
----	--	--

4

Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.
Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a)Cost or other basis (investment)	(b)Cost or other basis (other)	Accumulated (c)depreciation	(d)Book value
1a Land		70,000		70,000
b Buildings		1,543,010	209,796	1,333,214
c Leasehold improvements				
d Equipment		233,031	119,620	113,411
e Other		208,090	151,996	56,094
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) ▶				1,572,719

Schedule D (Form 990) 2015

Part VII

Investments—Other Securities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) REAL ESTATE BASED SECURITIES	1,879,502	F
(B) HEDGE FUNDS	6,069,282	F
(C) PRIVATE EQUITY FUNDS	19,748,733	F
(D) GLOBAL FIXED INCOME BOND FUNDS	6,974,998	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	34,672,515	

Part VIII

Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		

Part IX

Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15

(a) Description	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	

Part X

Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
Federal income taxes	
AMOUNTS DUE UNDER ANNUITY & UNITRUST AGREEMENTS	2,007,824
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	2,007,824

2. Liability for uncertain tax positions. In Part XIII, 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). Check here if the text of the footnote has been provided in Part XIII

☒

Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	7,029,654
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	-11,480,224
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	-11,480,224
3	Subtract line 2e from line 1	3	18,509,878
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	308,438
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	308,438
5	Total revenue Add lines 3 and 4c.(This must equal Form 990, Part I, line 12)	5	18,818,316

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	9,444,950
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	309,100
e	Add lines 2a through 2d	2e	309,100
3	Subtract line 2e from line 1	3	9,135,850
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	308,438
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	308,438
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	9,444,288

Part XIII

Supplemental Information

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, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
PART IV, LINE 2B	THE FOUNDATION ACTS AS AN AGENT FOR CERTAIN UNRELATED ORGANIZATIONS. THE TOTAL AMOUNT OF THE FUNDS HELD ON BEHALF OF THESE ORGANIZATIONS HAS BEEN REFLECTED AS A LIABILITY ON THE STATEMENT OF FINANCIAL POSITION. ON THE STATEMENT OF ACTIVITIES, THE FOUNDATION REPORTS THE GROSS AMOUNT OF SUPPORT, REVENUE AND EXPENSES WITH THE AMOUNT RAISED AND EXPENDED ON BEHALF OF OTHERS BEING SHOWN AS A REDUCTION IN THE GROSS AMOUNTS OF SUPPORT, REVENUE AND EXPENSES.

Part XIII **Supplemental Information** *(continued)*

Return Reference	Explanation
PART X, LINE 2	THE FOUNDATION IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND A SIMILAR SECTION OF THE IOWA INCOME TAX LAW, WHICH PROVIDES INCOME TAX EXEMPTION FOR CORPORATIONS ORGANIZED AND OPERATED EXCLUSIVELY FOR RELIGIOUS, CHARITABLE, OR EDUCATIONAL PURPOSES CERTAIN INVESTMENTS OF THE FOUNDATION ARE SUBJECT TO THE UNRELATED BUSINESS INCOME TAX REGULATIONS, AND OCCASIONALLY WILL REQUIRE THE FOUNDATION TO PAY TAX ON THIS UNRELATED BUSINESS INCOME THE FOUNDATION IS NOT CLASSIFIED AS A PRIVATE FOUNDATION THE FOUNDATION FOLLOWS THE ACCOUNTING GUIDANCE FOR ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES IN ACCORDANCE WITH THE GUIDANCE FOR UNCERTAINTY IN INCOME TAXES, MANAGEMENT HAS EVALUATED THEIR MATERIAL TAX POSITIONS AND DETERMINED THAT THERE ARE NO INCOME TAX EFFECTS WITH RESPECT TO ITS FINANCIAL STATEMENTS THE FOUNDATION IS NO LONGER SUBJECT TO EXAMINATION BY FEDERAL AND STATE AUTHORITIES FOR YEARS PRIOR TO 2012, NOR HAVE WE BEEN NOTIFIED OF ANY IMPENDING EXAMINATION AND NO EXAMINATIONS ARE CURRENTLY IN PROCESS
PART XII, LINE 2D - OTHER ADJUSTMENTS	ADJUSTMENT FOR TRANSFER OF FUNDS FROM AMOUNTS HELD ON BEHALF OF OTHERS 46,012 ACTUARIAL ADJUSTMENT ON ANNUITIES AND UNITRUST AGREEMENTS 263,088

Open to Public Inspection

42-6053860

Schedule I (Form 990) 2015

Part III

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) REIMBURSEMENT TO STUDENTS WHO RECEIVED A SCORE OF 3 OR HIGHER ON ADVANCED PLACEMENT TESTS	523	24,960			
(2) CASH AWARDS TO WASHINGTON HIGH SCHOOL AND FRANKLIN MIDDLE SCHOOL STUDENTS FOR ACCOMPLISHMENT IN ART, WRITING, AND/OR MUSIC	37	1,480			

Part IV

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
PART I, LINE 2	FOR COMPETITIVELY AWARDED GRANTS AND FOR DONOR-ADVISED PROJECT GRANTS OF \$5,000 OR MORE, THE ORGANIZATION REQUIRES A FINAL REPORT

Additional Data

Software ID:
Software Version:
EIN: 42-6053860
Name: THE GREATER CEDAR RAPIDS COMMUNITY
FOUNDATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ABBE INC DBA ABBEHEALTH 740 N 15TH AVE HIAWATHA, IA 52233	42-1373123	501(C)(3)	30,000				ABBE, INC RE-BRANDING & WEBSITE PROJECT AND RESILIENCE-BUILDING DEVELOPING AN ELECTRONIC BILLING SYSTEM
ACADEMY FOR SCHOLASTIC & PERSONAL SUCCESS PO BOX 2842 CEDAR RAPIDS, IA 52406	45-4289211	501(C)(3)	8,300				MARKETING AND SOCIAL MEDIA FOR THE ACADEMY SPS 2015 PLAN B
AFRICAN AMERICAN HERITAGE FOUNDATION DBA AFRICAN AMERICAN MUSEUM OF IOWA 55 12TH AVE SE CEDAR RAPIDS, IA 524012202	42-1415305	501(C)(3)	43,636				ANNUAL DESIGNATED DISTRIBUTION, 2016 ENDLESS POSSIBILITIES PHASE 2, ENDLESS POSSIBILITIES, AND FOR GENERAL PURPOSE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AG INNOVATIONS NETWORK 101 MORRIS ST STE 212 SEBASTOPOL, CA 95472	68-0462304	501(C)(3)	11,064				DONATION - SUSTAINABLE FOOD LAB - SUSTAINABLE VANILLA INITIATIVE
AGING SERVICES INC 317 7TH AVE SE STE 302B CEDAR RAPIDS, IA 524012009	23-7085316	501(C)(3)	34,024				ANNUAL DESIGNATED DISTRIBUTION, GENERAL SUPPORT, MILESTONES FOR "O" AVE FACILITY, AGING SERVICES DEVELOPS ELECTRONIC CLINICAL RECORDS, AND RESILIENCE-BUILDING AGING SERVICES DEVELOPS ELECTRONIC CLINICAL RECORDS
ALBURNETT COMMUNITY SCHOOL DISTRICT PO BOX 400 ALBURNETT, IA 522020400	42-6000620	GOVERNMENT	10,000				2016 ALBURNETT ELEMENTARY SCHOOL WELLNESS AND PLAYGROUND PROJECT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALL SAINTS CATHOLIC CHURCH 720 29TH ST SE CEDAR RAPIDS, IA 524033007	42-0698056	501(C)(3)	7,161				CAPITAL CAMPAIGN, ANNUAL DESIGNATED DISTRIBUTION, ANNUAL DISTRIBUTION TO SUPPORT GIRL SCOUTS PROGRAMMING AT ALL SAINTS CATHOLIC CHURCH, AND HAITI COMMITTEE
ALZHEIMER'S ASSOCIATION - EAST CENTRAL IOWA CHAPTER 317 7TH AVE SE SUITE 402 CEDAR RAPIDS, IA 52401	13-3039601	501(C)(3)	10,055				GEN SUPPORT, RESEARCH, CEDAR RAPIDS WALK- "MOVE" SUPPORT, ANNUAL DESIGNATED DISTRIBUTION, 2015 WALK TO END ALZHEIMER'S - THE BRAINS BEHIND SAVING YOURS, EMPLOYEE MATCH, AND 2016 ROUND TO REMEMBER GOLF CLASSIC
AMERICAN CANCER SOCIETY - CEDAR RAPIDS 4080 1ST AVE NE STE 101 CEDAR RAPIDS, IA 524023160	13-1788491	501(C)(3)	52,596				2015 LINN GALA, ANNUAL DESIGNATED DISTRIBUTION, GARY STREIT- RELAY FOR LIFE, AND EMPLOYEE MATCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN HEART ASSOCIATION 1035 N CENTER POINT RD STE B HIAWATHA, IA 522332070	13-5613797	501(C)(3)	10,043				GALA SUPPORT, RESEARCH, ANNUAL DESIGNATED DISTRIBUTION, EMPLOYEE MATCH, AND HEART BALL
AMERICAN NATIONAL RED CROSS - SOUTH AND EASTERN IOWA 6300 ROCKWELL DRIVE NE CEDAR RAPIDS, IA 52402	53-0196605	501(C)(3)	27,335				ANNUAL SUPPORT, ANNUAL DESIGNATED DISTRIBUTION FOR THE GRANT WOOD AREA CHAPTER, AND RED CROSS BIOMEDICAL VEHICLE MATCH
ARCHDIOCESE OF DUBUQUE DBA PRAIRIEWOODS FRANCISCAN SPIRITUALITY CENTER 120 E BOYSON RD HIAWATHA, IA 522331277	42-0680409	501(C)(3)	25,000				PRAIRIEWOODS STREAM RESTORATION AND EDUCATION PROJECT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AREA SUBSTANCE ABUSE COUNCIL 3601 16TH AVE SW CEDAR RAPIDS,IA 524042328	42-1114396	501(C)(3)	107,750				YOUTH RESIDENTIAL FACILITY CONVERSION PROJECT, TECHNOLOGY IMPROVEMENT PROJECT, HELPING FAMILIES BE SAFE PROJECT, ADULT RESIDENTIAL VISION FOR THE FUTURE, GENERAL PROGRAM SUPPORT, 2016 PREVENTING YOUTH SUBSTANCE ABUSE IN RURAL LINN COUNTY, AND RESILIENCE-BUILDING PROJECT
ARTISAN'S SANCTUARY 45 16TH AVE SW CEDAR RAPIDS,IA 52404	47-2882005	501(C)(3)	10,000				THE ARTISAN'S SANCTUARY - A COMMUNITY RESOURCE FOR THE VISUAL AND PERFORMING ARTS
BIG BROTHERS BIG SISTERS OF CEDAR RAPIDS & EAST CENTRAL IOWA INC 3150 E AVE NW STE 103 CEDAR RAPIDS,IA 524052900	42-1170475	501(C)(3)	111,550				ANNUAL SUPPORT, GENERAL SUPPORT, GREATAMERICA FINANCIAL SERVICES EMPLOYEE VOLUNTEERS CHOOSE TO INSPIRE POSSIBILITIES, BIG MAGIC PROGRAM, AGENCY OPERATIONS, REDUCING ETHNIC DISPARITY (RED PARTNERSHIP), 2016 BOWL FOR KIDS SAKE, MALE MENTOR PROJECT, AND LINN COUNTY MATCHES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIG RIVER UNITED WAY PO BOX 251 KEOKUK,IA 52632	42-6036779	501(C)(3)	7,400				SUPPORT 2016 GIVING CAMPAIGN AND GENERAL SUPPORT
BOYS AND GIRLS CLUB OF CEDAR RAPIDS 420 6TH STREET SE SUITE 240 CEDAR RAPIDS,IA 52401	42-1434056	501(C)(3)	53,476				FISH-O-RAMA TROUT LEVEL SUPPORT, DUCK RACE SUPPORT, ANNUAL DESIGNATED DISTRIBUTION, SUSTAINING OUT OF SCHOOL PROGRAMMING, WESTSIDE OUT OF SCHOOL PROGRAM, FOR GENERAL PURPOSE, AND 2016 GALA- PEARL SUPPORT
BRUCEMORE 2160 LINDEN DR SE CEDAR RAPIDS,IA 524031748	42-1170531	501(C)(3)	4,439				OPERATING SUPPORT, ANNUAL DESIGNATED DISTRIBUTION, AND GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAMP COURAGEOUS OF IOWA PO BOX 418 MONTICELLO, IA 523100418	23-7210932	501(C)(3)	82,543				IN MEMORY OF ALLAN L HARMS GENERAL SUPPORT, SPRINT TRIATHLON SUPPORT, GENERAL SUPPORT, CAMPERSHIP FUND, ANNUAL DESIGNATED DISTRIBUTION, ANNUAL DISTRIBUTION, AND SUMMER CAMP
CAMP WYOMING 9106 42ND AVE WYOMING, IA 523627647	42-0848153	501(C)(3)	5,210				ANNUAL DESIGNATED DISTRIBUTION
CATHERINE MCAULEY CENTER INC 866 4TH AVE SE CEDAR RAPIDS, IA 524032423	42-1342872	501(C)(3)	29,800				GENERAL SUPPORT, TO CONTINUE WORKING WITH RECENT IMMIGRANTS AS WELL AS WOMEN IN TRANSITION, MOVIN' FOR MCAULEY CENTER, IMPROVING CHILDREN'S OUTCOMES THROUGH ADULT LITERACY EDUCATION, INCREASING ACCESS TO BASIC EDUCATION FOR ENGLISH LANGUAGE LEARNERS IN HIAWATHA, AND ADULT BASIC EDUCATION RESPONDING TO GROWING COMMUNITY LITERACY NEEDS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CEDAR RAPIDS COMMUNITY SCHOOL DISTRICT 2500 EDGEWOOD RD NW CEDAR RAPIDS, IA 524051015	42-6023551	GOVERNMENT	53,867				ANNUAL DESIGNATED DISTRIBUTION FOR JEFFERSON HIGH SCHOOL, ANNUAL DISTRIBUTION TO SUPPORT JEFFERSON HIGH SCHOOL SCHOLARSHIP PROGRAMS, MNR ZOMBIE PROM FUNDRAISER AT METRO HIGH SCHOOL- WITCHES BREW LEVEL, STEAM LAB AT JOHNSON ELEMENTARY SCHOOL, SUPPORT FOR THE ROBOTICS CLUB AT MCKINLEY MIDDLE SCHOOL, SUPPORT FOR FINE ARTS AT MCKINLEY MIDDLE SCHOOL, A P GHOSH SCHOLARS SHIRTS, CERTIFICATES AND MEDALLIONS AT WASHINGTON HIGH SCHOOL, T-SHIRTS AND CERTIFICATES AT WASHINGTON HIGH SCHOOL, US HUMANITIES TRIP TO CHICAGO IN THE SPRING OF 2016 AT WASHINGTON HIGH SCHOOL, DESIGNATED DISTRIBUTION FOR 2014 FIELD TRIPS TO ORCHESTRA IOWA CONCERT, KIDS ON COURSE UNIVERSITY-HIAWATHA/NIXON PILOT, AND STEAM INTEGRATED LEARNING SUPPORTS
CEDAR RAPIDS COMMUNITY SCHOOL DISTRICT FOUNDATION 2500 EDGEWOOD RD NW CEDAR RAPIDS, IA 52405	42-1197912	501(C)(3)	5,100				ANNUAL DESIGNATED DISTRIBUTION, IOWA BIG SCHOOL, RESTAURANT CONSULTANT THAT WILL SUPPORT RESTAURANT DESIGNATIONS BLUE ZONES CERTIFICATION,
CEDAR RAPIDS METRO ECONOMIC ALLIANCE 501 1ST ST SE CEDAR RAPIDS, IA 524012011	42-0172900	501(C)(6)	18,000				RESTAURANT CONSULTANT THAT WILL SUPPORT RESTAURANT DESIGNATIONS BLUE ZONES CERTIFICATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CEDAR RAPIDS MUSEUM OF ART 410 3RD AVE SE CEDAR RAPIDS, IA 524011606	42-0680248	501(C)(3)	273,684				AGENCY DISTRIBUTION, IN MEMORY OF JO MCGRATH, ANNUAL DESIGNATED DISTRIBUTION, 3RD CAPITAL CAMPAIGN TO ENHANCE THE CEDAR RAPIDS MUSEUM OF ART, SUMMER SEASON SUPPORT 2015, ANNUAL FUND, EXHIBITION SEASON SUPPORT, AND GENERAL SUPPORT
CEDAR RAPIDS OPERA THEATRE 425 2ND ST SE SUITE 960 CEDAR RAPIDS, IA 52401	42-1476568	501(C)(3)	77,119				2014-15 17TH SEASON SUPPORT, SUPPORT OF GALA, YOUNG ARTIST PROGRAM PRODUCTION SUPPORT -- MAN OF LA MANCHA, YOUNG ARTIST PROGRAM/SCHOOL OUTREACH OPERAS 2016-2018, OPERATIONS, GENERAL SUPPORT, BOARD MEMBER CONTRIBUTION, NONPROFIT LEADERSHIP EXCELLENCE AWARD STAFF DEVELOPMENT IN HONOR OF KATHY HALL, OPERA SEASON SUPPORT, AND ADVANCING THE CEDAR RAPIDS OPERA THEATRE THROUGH BOARD AND STAFF DEVELOPMENT
CEDAR RAPIDS PUBLIC LIBRARY 450 5TH AVENUE SE CEDAR RAPIDS, IA 52401	42-6004336	GOVERNMENT	11,225				ANNUAL DESIGNATED DISTRIBUTION FOR THE WILLIAM MARTIN KACENA AND LIBBY MARTINEK KACENA MEMORIAL FUND AND ANNUAL DESIGNATED DISTRIBUTION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CEDAR RAPIDS PUBLIC LIBRARY FOUNDATION 450 5TH AVENUE SE CEDAR RAPIDS,IA 52401	23-7292786	501(C)(3)	57,136				CAPITAL DEVELOPMENT FUND, ANNUAL DESIGNATED DISTRIBUTION, GREEN ROOF PLANTERS, GENERAL SUPPORT, FAMILY CONNECTIONS LIBRARY, SUPPORT FOR CEDAR RAPIDS PUBLIC LIBRARY'S NONPROFIT COLLECTION, ANNUAL DISTRIBUTION, LIBRARY 3 0 THE CAMPAIGN TO BUILD YOUR NEW CEDAR RAPIDS PUBLIC LIBRARY
CEDAR RAPIDS SYMPHONY ORCHESTRA ASSOCIATION DBA ORCHESTRA IOWA 119 3RD AVE SE CEDAR RAPIDS,IA 524011403	42-0772544	501(C)(3)	186,485				IN MEMORY OF JO MCGRATH, ANNUAL DESIGNATED DISTRIBUTION, ANNUAL DESIGNATED DISTRIBUTION FOR THE SYMPHONY CENTER, ANNUAL DESIGNATED DISTRIBUTION FOR FIRST TRUMPET, ANNUAL DISTRIBUTION FOR SYMPHONY SCHOOL SCHOLARSHIPS OR INSTRUMENT RENTAL FOR YOUNG PEOPLE WHO HAVE A DEMONSTRATED PASSION AND WOULD OTHERWISE BE UNABLE TO PARTICIPATE, AGENCY DISTRIBUTION, GENERAL SUPPORT, EDUCATION & OUTREACH, ORCHESTRA IOWA'S MUSIC IN THE SCHOOLS, ORCHESTRA IOWA'S FIFTH GRADE FIDDLES, ANNUAL OPERATING GRANT, ORCHESTRA IOWA'S 2015/16 FINE ARTS SERIES, AND ORCHESTRA IOWAS 93RD FINE ARTS SEASON
CEDAR RAPIDS SYMPHONY ORCHESTRA FOUNDATION INC 119 THIRD AVENUE SE CEDAR RAPIDS,IA 52401	42-1335662	501(C)(3)	25,507				ANNUAL DESIGNATED DISTRIBUTION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CEDAR VALLEY FRIENDS OF THE FAMILY PO BOX 784 WAVERLY, IA 50677	42-1390144	501(C)(3)	20,500				EMERGENCY SAFE SHELTER AND HOUSING STABILITY
CEDAR VALLEY HUMANE SOCIETY 7411 MT VERNON RD SE CEDAR RAPIDS, IA 524037131	42-0814023	501(C)(3)	12,716				ANNUAL DESIGNATED DISTRIBUTION AND CVHS DIGITAL APPLICATION PROJECT - 2015
CENTRAL COLLEGE 812 UNIVERSITY STREET PELLA, IA 50219	42-0680344	501(C)(3)	6,501				MEN'S TENNIS PROGRAM SUPPORT AND SCHOLARSHIPS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CHICAGO SYMPHONY ORCHESTRA 220 S MICHIGAN AVE CHICAGO, IL 606042596	36-2167823	501(C)(3)	31,675				ANNUAL DESIGNATED DISTRIBUTION
CHILDREN'S THEATRE OF CEDAR RAPIDS DBA PLAYTIME POPPY CHILDREN'S THEATRE 102 3RD STREET SE CEDAR RAPIDS, IA 524011221	42-6018183	501(C)(3)	6,500				ANNUAL DESIGNATED DISTRIBUTION, EMERGING OPPORTUNITY ONE GREAT LINE, AND TECHNOLOGY FOR CAPACITY BUILDING
CITY OF CEDAR RAPIDS 101 FIRST STREET SE CEDAR RAPIDS, IA 52401	42-6004336	GOVERNMENT	279,853				ANNUAL DESIGNATED DISTRIBUTION FOR AMPHITHEATRE MAINTENANCE, GREENE SQUARE REVIVAL PROJECT UPCOMING CONSTRUCTION, FINAL AGENCY DISTRIBUTION FOR THE AMPHITHEATRE, AND ANNUAL DESIGNATED DISTRIBUTION FOR OLD MCDONALD'S FARM

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CITY OF CENTRAL CITY 137 4TH ST N CENTRAL CITY, IA 522149596	42-6004353	GOVERNMENT	10,000				SENIOR DINING-HOME DELIVERED MEALS 2015/2016
CITY OF WALKER 408 ROWLEY ST WALKER, IA 523529683	42-6005308	GOVERNMENT	8,267				WALKER BASKETBALL COURT REPLACEMENT
COE COLLEGE OFFICE OF FINANCIAL AID 1220 1ST AVE NE CEDAR RAPIDS, IA 524025092	42-0686467	501(C)(3)	293,925				ANNUAL DESIGNATED DISTRIBUTION, GENERAL SUPPORT, AND SCHOLARSHIPS

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COGGON AREA BETTERMENT ASSOCIATION 5529 S HWY 13 COGGON, IA 52218	45-5125345	501(C)(3)	7,750				GLASS & PORCELAIN
COMMUNITY FOUNDATION OF JOHNSON COUNTY 325 E WASHINGTON ST IOWA CITY, IA 522403968	42-1508117	501(C)(3)	25,000				IOWA YOUTH WRITING PROJECT - GENERAL SUPPORT
COMMUNITY HEALTH FREE CLINIC 947 14TH AVE SE CEDAR RAPIDS, IA 524012610	13-4228071	501(C)(3)	205,805				DIRECT PATIENT CARE - FY2015, AGENCY DISTRIBUTIONANNUAL DESIGNATED DISTRIBUTION, ANNUAL GIFT, HEALTHCARE SERVICES FOR THE UNDERSERVED - FY16, PRESCRIPTION SERVICES - FY16, GENERAL OPERATING PURPOSES, AND GENERAL SUPPORT

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COMMUNITY THEATRE OF CEDAR RAPIDS DBA THEATRE CEDAR RAPIDS 102 3RD ST SE CEDAR RAPIDS, IA 524011246	42-0890913	501(C)(3)	175,757				CRST BROADWAY SERIES SUPPORT, ANNUAL DESIGNATED DISTRIBUTION, THEATRE EDUCATION EXPANSION GRANT, ANNUAL GIFT, ANNUAL CAMPAIGN, GENERAL SUPPORT, SPOTLIGHT ON KIDS, FAMILY SERIES SUPPORT, A CHRISTMAS STORY PROGRAM SUPPORT, THEATRE TIX TO AT RISK YOUTH & FAMILIES, ANNUAL FUND, THEATRE ACCESSIBILITY FOR YOUTH, NEXT TO NORMAL, MARY POPPINS SHOW SUPPORT
CORNELL COLLEGE 600 1ST ST SW MOUNT VERNON, IA 523141006	42-0680335	501(C)(3)	203,267				BERRY CENTER, ANNUAL DESIGNATED DISTRIBUTION, ANNUAL FUND, PRESIDENT'S HOUSE RENOVATION, CORNELL COLLEGE/MOUNT VERNON COMMUNITY CULTURAL FILM SERIES, AND GENERAL SUPPORT
COUNCIL ON FOUNDATIONS INC 2121 CRYSTAL DR STE 700 ARLINGTON, VA 222023706	13-6068327	501(C)(3)	10,220				CHARITABLE PORTION OF MEMBERSHIP DUES

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DIVERSITY FOCUS 200 2ND ST SE CEDAR RAPIDS, IA 524011406	20-3420207	501(C)(3)	42,000				GENERAL SUPPORT, BLACK AND BROWN EDUCATOR RECRUITMENT AND RETENTION (BBERR), WORKPLACE (R) EVOLUTION POSITIONING IOWA'S CREATIVE CORRIDOR AS A NATIONAL LEADER IN WORKFORCE RECRUITMENT, RETENTION AND ENGAGEMENT, AND COMMUNITY FINANCIAL ACCESS (CFA) MICROLOAN PROJECT
DONORSCHOOSEORG FINANCIAL OPERATIONS 134 W 37TH ST FLOOR 11 NEW YORK, NY 10018	13-4129457	501(C)(3)	25,000				FUND FOR EDUCATIONAL EXCELLENCE MATCH PARTNERSHIP WITH DONORS CHOOSE
DRAKE UNIVERSITY OFFICE OF ALUMNI AND DEVELOPMENT 2507 UNIVERSITY AVENUE DES MOINES, IA 503114505	42-0680460	501(C)(3)	11,000				DRAKE UNIVERSITY SUMMER RESEARCH FELLOWSHIPS 2016 AND SCHOLARSHIPS

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EASTERN IOWA ARTS ACADEMY 1841 E AVE NE CEDAR RAPIDS,IA 52402	26-0557542	501(C)(3)	38,750				ARTS IMAGINARIUM OPEN STUDIO PROJECT, EXTENDED OUTREACH PROGRAM - SUMMER OF 2015, HARVESTING THE ARTS-"CREW SUPPORT" LEVEL, 2015 PROGRAMMING SUPPORT, 2015-2016 AFTER SCHOOL ENRICHMENT PROGRAM SUPPORT, AND 2016 MUSIC AND ARTS STUDIOS PROGRAMMING
EASTERN IOWA HONOR FLIGHT C/O ROGER UTHOFF TREASURER 2876 61ST STREET LANE VINTON,IA 52349	27-1666013	501(C)(3)	61,750				GENERAL SUPPORT, EASTERN IA HONOR FLIGHT GOLF TOURNAMENT-HOLE SUPPORT, AND SCHOLARSHIPS FOR THE GUARDIANS
ESSENTIAL INSTRUCTION CO MARION MIXERS PO BOX 2107 CEDAR RAPIDS,IA 524062107	46-5762244	501(C)(3)	8,000				PHYSICAL PRESENCE IN CR AND GENERAL SUPPORT

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FAMILIES HELPING FAMILIES OF IOWA 3516 CENTER POINT RD CEDAR RAPIDS,IA 52402	71-0985937	501(C)(3)	19,000				GENERAL SUPPORT, PROGRAM SUPPORT, FOSTER CARE PROGRAM SUPPORT - LINN CO NON METRO, AND SUPPORT FOR ABUSED AND NEGLECTED CHILDREN
FEED IOWA FIRST 1622 42ND ST NE CEDAR RAPIDS,IA 52402	45-4058376	501(C)(3)	10,000				GENERAL SUPPORT
FIRST LUTHERAN CHURCH 1000 3RD AVE SE CEDAR RAPIDS,IA 524032481	42-0752621	501(C)(3)	23,223				ANNUAL DESIGNATED DISTRIBUTION AND SATURDAY EVENING MEAL PROGRAM 2015

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FIRST PRESBYTERIAN CHURCH OF CEDAR RAPIDS 310 5TH ST SE CEDAR RAPIDS, IA 524011676	42-0680489	501(C)(3)	8,206				ANNUAL PAYMENT FOR GENERAL SUPPORT, IN MEMORY OF EVELYN MAXINE MOORE, DEACON FUND, AND SUNDAY EVENING MEALS PROGRAM (SEMP)
FOUNDATION 2 INC 1714 JOHNSON AVE NW CEDAR RAPIDS, IA 524054865	42-1078444	501(C)(3)	32,680				ANNUAL DESIGNATED DISTRIBUTION, CONNECTION TO CULTURAL EXPERIENCES FOR FOUNDATION 2 SHELTER RESIDENTS, MEETING STORAGE AND FOOD NEEDS FOR THE AFTER HOURS FOOD PANTRY, SUPPORTING FOUNDATION 2 JUVENILE AND FAMILY ASSISTANCE AND STABILIZATION TRACK (J-FAST), EXPANDED STAFFING TO FEED THOSE IN CRISIS, AND RESILIENCE-BUILDING REACHING CLIENTS THROUGH TEXTING
FOUR OAKS FAMILY & CHILDREN'S SERVICES 5400 KIRKWOOD BLVD SW CEDAR RAPIDS, IA 52404	42-0998726	501(C)(3)	297,038				TOTALCHILD - COMMIT TO A CHILD CAMPAIGN, MENTAL HEALTH RELATED PROGRAM, ANNUAL DESIGNATED DISTRIBUTION, GENERAL SUPPORT, SMART SUPERVISED MILIEU AT A RISKY TIME, MINNIE RUBECK STAFF EXCELLENCE AWARD FOR STAFF DEVELOPMENT IN HONOR OF DAVE O'CLAIR, GOLF CLASSIC- IRON LEVEL SUPPORT, PROGRESS MANAGEMENT, AND RESILIENCE-BUILDING IN TECHNOLOGY DISASTER RECOVERY

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FRIENDS OF CEDAR LAKE INC 1821 GRANDE AVENUE SE CEDAR RAPIDS, IA 52403	47-2974571	501(C)(3)	7,550				DISTRIBUTION
FRIENDS OF THE HIAWATHA PUBLIC LIBRARY 150 WEST WILLMAN ST HIAWATHA, IA 52233	26-2946986	501(C)(3)	10,000				PLAY & LEARN AT HIAWATHA PUBLIC LIBRARY 2015-2016
GEMS OF HOPE 420 6TH STR SE CEDAR RAPIDS, IA 52401	20-3155610	501(C)(3)	12,950				BUILDING A TOMORROW BY MANAGING INFORMATION AND DATA TODAY AND HOPE BLOOMS DAFFODIL FUNDRAISER- TOPAZ PARTNER

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GIRLS ON THE RUN OF JOHNSON COUNTY IOWA PO BOX 3222 IOWA CITY,IA 52244	45-1294227	501(C)(3)	15,250				SCHOLARSHIPS FOR PARTICIPANTS IN NEED AND PROGRAM SUPPORT FOR HIGH-NEED SITES IN LINN COUNTY
GREEN SQUARE MEALS INC PO BOX 5303 CEDAR RAPIDS,IA 524065303	42-1307429	501(C)(3)	10,650				GENERAL SUPPORT, GREEN SQUARE MEALS 2014, AND FEEDING THE HOMELESS
HABITAT FOR HUMANITY INTERNATIONAL DBA CEDAR VALLEY HABITAT FOR HUMANITY 350 6TH AVE SE CEDAR RAPIDS,IA 52401	42-1320296	501(C)(3)	87,529				IN MEMORY OF ALLAN L HARMS GENERAL SUPPORT FOR LINN COUNTY, 2015 CORPORATE HOPE BUILDERS HOME, ANNUAL DESIGNATED DISTRIBUTION, 2015 WOMEN BUILD, CVHFH AND AHNI A COLLABORATIVE NEIGHBORHOOD REINVESTMENT PLAN FOR WELLINGTON HEIGHTS, 2015 PALO PARTNERSHIP BUILD, AND 2015 AND 2016 A BRUSH WITH KINDNESS

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HAWKEYE AREA COMMUNITY ACTION PROGRAM PO BOX 490 HIAWATHA,IA 522330490	42-0898405	501(C)(3)	27,971				IN MEMORY OF ALLAN L HARMS GENERAL SUPPORT, OPERATION BACKPACK, ANNUAL DESIGNATED DISTRIBUTION, ANNUAL DESIGNATED DISTRIBUTION FOR HACAP INN CIRCLE, COLLABORATIVE TRANSPORTATION PROGRAM FOR HOMELESS VETERANS AND FAMILIES, GENERAL OPERATIONS, FOOD FOR RESERVOIR, AND GENERAL SUPPORT
HAWKEYE AREA COUNCIL--BOY SCOUTS 660 32ND AVE SW CEDAR RAPIDS,IA 524043910	42-0680304	501(C)(3)	6,648				GENERAL SUPPORT, ANNUAL DESIGNATED DISTRIBUTION, EMPLOYEE MATCH FOR PACK 214, AND ANNUAL DISTRIBUTION
HEIGHTS CENTER INC 15570 HAGIE DRIVE FORT MYERS,FL 33908	45-5595206	501(C)(3)	12,000				PATHWAYS TO PROSPERITY 2015

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HLV COMMUNITY SCHOOL 402 HARRISON ST VICTOR,IA 52347	42-6037189	GOVERNMENT	31,869				ANNUAL DESIGNATED DISTRIBUTION
HOLY FAMILY PARISH 710 S WACOUTA AVE PRAIRIE DU CHIEN,WI 53821	80-0823428	501(C)(3)	10,000				PROGRAM SUPPORT FOR SCHOLARSHIP FUND
HOOVER PRESIDENTIAL FOUNDATION PO BOX 696 WEST BRANCH,IA 523580696	42-0848288	501(C)(3)	68,621				ANNUAL DESIGNATED DISTRIBUTION AND ANNUAL DESIGNATED DISTRIBUTION TO SUPPORT THE TEMPORARY EXHIBIT FUND IN THE QUARTON GALLERY

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INDIAN CREEK NATURE CENTER 6665 OTIS RD SE CEDAR RAPIDS, IA 524037134	23-7260197	501(C)(3)	103,392				ANNUAL DISTRIBUTION, ENHANCE SONG BIRD HABITAT, ANNUAL DESIGNATED DISTRIBUTION, ANNUAL DISTRIBUTION TO MANAGE, RESTORE AND UPGRADE LANDS AND FACILITIES, ANNUAL DESIGNATED DISTRIBUTION TO HOST CHILDREN AND CARE FOR THE LAND, ANNUAL DESIGNATED DISTRIBUTION FOR TRAILS, ANNUAL CAMPAIGN, CONNECTING THE CLASSROOM TO NATURE - JUNE 2014, CREATING AND ENHANCING AN AMAZING SPACE, GENERAL SUPPORT
IOWA ART WORKS INC DBA THE CERAMICS CENTER 329 10TH AVE SE SUITE 117 CEDAR RAPIDS, IA 524012339	42-1112539	501(C)(3)	10,000				MAKING A DIFFERENCE FOR AT-RISK KIDS COGNITIVE, EMOTIONAL, SOCIAL AND SKILL DEVELOPMENT THROUGH 3-DIMENSIONAL EDUCATION AND MATERIAL MANIPULATION
IOWA BROADCASTERS ASSOCIATION FOUNDATION PO BOX 71186 DES MOINES, IA 50325	45-4574664	501(C)(3)	133,721				ANNUAL DESIGNATED DISTRIBUTION

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IOWA COLLEGE FOUNDATION 505 5TH AVE STE 1034 DES MOINES,IA 503092396	42-0745995	501(C)(3)	18,000				GENERAL FUNDING
IOWA JAG INC GRIMES STATE OFFICE BUILDING 400 E 14TH STREET--3RD FLOOR DES MOINES,IA 50319	42-1492988	501(C)(3)	31,000				SUPPORTING STUDENT SUCCESS IN GRADUATION AND CAREERS IN CEDAR RAPIDS 2015-2018 AND 9-10 GRADE AT JEFFERSON HIGH SCHOOL IN CEDAR RAPIDS
IOWA LEGAL AID 317 SEVENTH AVE SE SUITE 404 CEDAR RAPIDS,IA 524012003	42-1079227	501(C)(3)	25,300				VOLUNTEER RECRUITMENT & COORDINATION PROJECT, GENERAL SUPPORT, AND RESILIENCE BUILDING-DISASTER MOBILE APPLICATION PROJECT

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IOWA PUBLIC TELEVISION FOUNDATION PO BOX 6400 JOHNSTON,IA 50131	42-1169207	501(C)(3)	279,675				"BEYOND AMERICAN GOTHIC THE STORY OF GRANT WOOD"
IOWA STARTUP ACCELERATOR INC DBA NEWBOCO 415 12TH AVENUE SE CEDAR RAPIDS,IA 52401	46-4387860	501(C)(3)	32,000				BUILD HERE' IOWA STARTUP ACCELERATOR, INNOVATION PROGRAM COORDINATION, AND GENERAL SUPPORT
IOWA STATE UNIVERSITY OFFICE OF STUDENT FINANCIAL AID 0210 BEARDSHEAR HALL AMES,IA 500112028	42-6004224	GOVERNMENT	29,350				SCHOLARSHIPS

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IOWA VALLEY RESOURCE CONSERVATION & DEVELOPMENT 920 48TH AVENUE AMANA, IA 52203	42-1481272	501(C)(3)	12,000				BUILDING IOWA VALLEY RC&D'S OUTREACH CAPACITY TO BENEFIT THE LINN COUNTY FOOD SYSTEM
IOWA VETERANS WELCOME CENTER AKA FREEDOM FOUNDATION 50 2ND AVENUE BRIDGE CEDAR RAPIDS, IA 52401	46-3280693	501(C)(3)	14,000				VETERANS EMERGENCY ASSISTANCE FUNDS
IWLC - IOWA WOMEN LEAD CHANGE 200 1ST ST STE 2100 CEDAR RAPIDS, IA 52401	45-2932668	501(C)(3)	13,567				IWLC WEBSITE UPGRADE WHICH INCLUDES RESPONSIVE DESIGN AND GENERAL SUPPORT

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JANE BOYD COMMUNITY HOUSE 943 14TH AVE SE CEDAR RAPIDS, IA 524012610	42-0680359	501(C)(3)	19,841				BRONZE LEVEL SUPPORT OF GREG BROWN FUNDRAISER, 10K DONATION, AND ANNUAL DESIGNATED DISTRIBUTION
JDRF INTERNATIONAL DBA EASTERN IOWA CHAPTER JDRF EASTERN IOWA CHAPTER 1026 A AVE NE STE 113 CEDAR RAPIDS, IA 52406	23-1907729	501(C)(3)	54,178				2015 JDRF ONE WALK BRONZE SUPPORT, GENERAL SUPPORT, CORPORATE SUPPORT OF JDRF WALK TO CURE DIABETES, ELMCREST PRO-AM SILVER SUPPORT, EMPLOYEE MATCH, AND COMMUNITY EDUCATION AND AWARENESS
JUNIOR ACHIEVEMENT OF EASTERN IOWA 324 3RD ST SE STE 200 CEDAR RAPIDS, IA 524011841	42-0919209	501(C)(3)	51,578				EMPOWERING KINDERGARTEN THROUGH 12TH GRADE STUDENTS IN URBAN AND RURAL LINN COUNTY TO SUCCEEDANNUAL DESIGNATED DISTRIBUTION, CREATING A WELL EDUCATED FUTURE WORKFORCE IN LINN COUNTY, ANNUAL GIFT, FLASHBACK BOWL-4-EDUCATION, BUSINESS HALL OF FAME EVENT, STIMULATING ECONOMIC SUCCESS IN LINN COUNTY, AND GENERAL SUPPORT

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JUNIOR LEAGUE OF CEDAR RAPIDS 317 7TH AVE SE STE 24 CEDAR RAPIDS, IA 524012007	42-6060212	501(C)(3)	9,750				TABLE SUPPORT-FOSTERING STRENGTH EVENT AND BRIDGING THE G A P 2016
KEOKUK AREA COMMUNITY FOUNDATION PO BOX 367 KEOKUK, IA 526320367	20-1838372	501(C)(3)	39,326				GENERAL SUPPORT
KIDS FIRST LAW CENTER 420 6TH ST SE STE 160 CEDAR RAPIDS, IA 52401	20-2199649	501(C)(3)	42,000				ADVOCATES FOR CHILDREN OF HIGH-CONFLICT DIVORCE INSIDE AND OUTSIDE THE METRO AREA

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KIRKWOOD COMMUNITY COLLEGE FOUNDATION PO BOX 2068 CEDAR RAPIDS,IA 52406	23-7076632	501(C)(3)	107,047				IN MEMORY OF ALLAN L HARMS GENERAL SUPPORT OF KCCK-FM, FUNDING KCCK-FM'S JAZZ EDUCATION PROGRAMS, SCHOLARSHIPSGENERAL SUPPORT, CAPITAL CAMPAIGN CONTRIBUTION, ANNUAL DESIGNATED DISTRIBUTION FOR SCHOLARSHIPS FOR STUDENTS ENROLLED IN FINANCIAL SERVICES OR AGRICULTURAL BUSINESS, ANNUAL DESIGNATED DISTRIBUTION FOR THE GARY ROZEK ENDOWED GOLF SCHOLARSHIP, ANNUAL DESIGNATED DISTRIBUTION TO SUPPORT THE JERRY AND ANN PEARSON ENDOWED SCHOLARSHIP, ANNUAL DESIGNATED DISTRIBUTION TO "THE AREA OF GREATEST NEED FOR UNRESTRICTED SCHOLARSHIP SUPPORT AND/OR OTHER EMERGENCY FINANCIAL ASSISTANCE FOR KIRKWOOD STUDENTS", ANNUAL DESIGNATED DISTRIBUTION, ANNUAL DESIGNATED DISTRIBUTION FOR SCHOLARSHIP ACTIVITIES, ANNUAL DESIGNATED DISTRIBUTION FOR THE PAT & SANDY COBB ENDOWED SCHOLARSHIP, SCHOLARSHIPS FOR STUDENT IN CULINARY ARTS PROGRAM, SCHOLARSHIPS FOR STUDENTS IN ADN PROGRAM, PROJECT FINISH SCHOLARSHIP, REAL WORLD SUCCESS - MULTI YEAR SUPPORT, ANNUAL DESIGNATED DISTRIBUTION FOR HERITAGE AREA AGENCY ON AGI
LBA FOUNDATION PO BOX 544 CEDAR RAPIDS,IA 524010544	27-5343988	501(C)(3)	21,500				RAISING THE BAR ON WHAT'S POSSIBLE THROUGH ACADEMIC & LEADERSHIP SKILLS FOR ALL STUDENTS
LEGION ARTS INC 1103 3RD ST SE CEDAR RAPIDS,IA 524012305	42-1154136	501(C)(3)	19,442				RESTORATION OF CSPS HALL, ANNUAL DESIGNATED DISTRIBUTION, LANDFALL FESTIVAL OF WORLD MUSIC 2015, OPERATING EXPENSES, AND AGENCY DISTRIBUTION

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LINN COUNTY 800 WALFORD RD SW CEDAR RAPIDS, IA 52404	42-6004338	GOVERNMENT	11,462				ANNUAL DESIGNATED DISTRIBUTION FOR RYAN WHITE MEDICAL CASE MANAGEMENT AND TRAUMA-INFORMED YOGA FOR INCARCERATED YOUTH- JUVENILE DETENTION AND DIVERSION SERVICES
LINN COUNTY HISTORICAL SOCIETY DBA THE HISTORY CENTER 716 OAKLAND RD NE STE 103 CEDAR RAPIDS, IA 52402	23-7311415	501(C)(3)	48,197				GENERAL FUNDING, EMERGING OPPORTUNITY STRATEGIC PLANNING NEEDS TO START NOW, ANNUAL DESIGNATED DISTRIBUTION, HOW JUDGE GEORGE GREENE CREATED CEDAR RAPIDS, AND FOR GREATEST NEED
LINN-MAR SCHOOL FOUNDATION 2999 N 10TH STREET MARION, IA 52302	42-1267125	501(C)(3)	16,074				ANNUAL DISTRIBUTION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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LUTHER COLLEGE OFFICE OF FINANCIAL AID 700 COLLEGE DR DECORAH,IA 521011041	42-0680466	501(C)(3)	7,000				BIOLOGY DEPARTMENT AND SCHOLARSHIPS
LUTHERAN SERVICES IN IOWA 3125 COTTAGE GROVE AVE DES MOINES,IA 503113809	42-0698267	501(C)(3)	7,394				ANNUAL DISTRIBUTION
LYRIC OPERA OF CHICAGO 20 N WACKER DR CHICAGO,IL 606062806	36-6008929	501(C)(3)	31,675				ANNUAL DESIGNATED DISTRIBUTION

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MARCH OF DIMES FOUNDATION 2910 WESTOWN PKWY 301 WEST DES MOINES,IA 50266	13-1846366	501(C)(3)	17,000				GENERAL SUPPORT, MARCH FOR BABIES-BRONZE LEVEL SUPPORT, ANNUAL CONTRIBUTION
MARION CARES INC 1050 MCGOWAN BLVD MARION,IA 52302	26-0585390	501(C)(3)	18,250				GENERAL SUPPORT, IMPACT CITIZENS AWARD SUPPORT, AND MARION STUDENTS EXCEL IN SCHOOL AND LIFE
MATTHEW 25 201 THIRD AVE SW CEDAR RAPIDS,IA 52404	26-0467321	501(C)(3)	129,756				ANNUAL CAMPAIGN, ANNUAL DESIGNATED DISTRIBUTION, GROW POSSIBILITIES CAPITAL CAMPAIGN, CULTIVATE HOPE URBAN FARM AND SCHOOL GARDENS, FLOOD THE RUN-SPLASH LEVEL, GENERAL SUPPORT, RESILIENCE-BUILDING OF MATTHEW 25, TECHNOLOGY EFFICIENCY PROJECT, GROW TAYLOR

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MERCY MEDICAL CENTER FOUNDATION 315 18TH AVE HIAWATHA,IA 522332042	51-0233180	501(C)(3)	46,900				ESPECIALLY FOR YOU RACE AGAINST BREAST CANCER SUPPORT, CRYSTAL HERITAGE HISTORY WALL, MERCY AUXILIARY SCHOLARSHIP FUND TO MOUNT MERCY UNIVERSITY STUDENT IN THE HEALTH CAREER FIELD, ANNUAL DESIGNATED DISTRIBUTION, GENERAL SUPPORT FOR MERCY CANCER CENTER, GREATEST NEEDS, HALL-PERRINE CANCER CENTER PATIENT CARE SERVICES, FAMILY CAREGIVER CENTER, GENERAL SUPPORT, ANNUAL DISTRIBUTION AND GENERAL SUPPORT FOR OLDORF HOSPICE HOUSE OF MERCY
METH-WICK COMMUNITY 1224 13TH ST NW CEDAR RAPIDS,IA 524052404	42-0838541	501(C)(3)	64,037				ANNUAL DESIGNATED DISTRIBUTION, REJUVENATE -- THE CAMPAIGN TO ENHANCE METH-WICK COMMUNITY, GENERAL SUPPORT
MOUNT MERCY UNIVERSITY 1330 ELMHURST DRIVE NE CEDAR RAPIDS,IA 524024797	42-0681046	501(C)(3)	255,879				MOUNT MERCY ATHLETIC COMPLEX, GENERAL SUPPORT, ANNUAL SUPPORT, MOUNT MERCY UNIVERSITY GRADUATE CENTER, ANNUAL DISTRIBUTION FOR BUSINESS OR FINE ARTS SCHOLARSHIPS, DESIGNATED DISTRIBUTION FOR THE MOUNT MERCY LIBRARY, ANNUAL DESIGNATED DISTRIBUTION FOR THE GROTTO RECONSTRUCTION PROJECT, CAPITAL CAMPAIGN, GENERAL SUPPORT FOR DUGOUT, SCHOLARSHIPS, VIETNAM MOVING WALL, AND MOUNT MERCY UNIVERSITY CRST INTERNATIONAL GRADUATE CENTER

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NATIONAL COUNCIL ON YOUTH LEADERSHIP 533 E POST RD SE CEDAR RAPIDS,IA 52403	43-1252781	501(C)(3)	6,000				SCHOLARSHIP SUPPORT
NATIONAL CZECH & SLOVAK MUSEUM & LIBRARY 1400 INSPIRATION PLACE SW CEDAR RAPIDS,IA 52404	51-0189030	501(C)(3)	140,491				SUPPORT FOR MUSIC @ MUSEUM AND THE GREAT STORIES AUTHOR SERIES IN 2015, GENERAL SUPPORT, ANNUAL DESIGNATED DISTRIBUTION, CORPORATE CONTRIBUTOR, MUSEUM AUDIENCE ENGAGEMENT TRAINING AND IMPLEMENTATION, AND ENHANCING ACCESSIBILITY AND ENGAGEMENT THE NCSML ONLINE COLLECTION PHASE II
NATURE CONSERVANCY 505 5TH AVE STE 930 DES MOINES,IA 503092316	53-0242652	501(C)(3)	59,500				RESTORING A WETLAND UPSTREAM OF CEDAR RAPIDS FOR REDUCED FLOOD RISK AND IMPROVED WATER QUALITY

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NEW COVENANT BIBLE CHURCH 3090 N CENTER POINT RD CEDAR RAPIDS,IA 52411	51-0139200	501(C)(3)	12,567				PROGRAM SUPPORT FOR MISSIONS OUTREACH
NEWBO CITY MARKET 1100 THIRD STREET SE CEDAR RAPIDS,IA 524012306	27-0600567	501(C)(3)	29,420				OVERALLS ALL OVER A GRANT WOOD EXPERIENCE, GENERAL SUPPORT, NEW BO CITY MARKET CAPITAL CAMPAIGN, AND 1ST ANNUAL MARKET LUNCHEON
OAK HILL CEMETERY ASSOCIATION POBOX 1962 CEDAR RAPIDS,IA 524061962	42-0445460	501(C)(3)	8,000				FOR GREATEST NEED

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OAK HILL JACKSON NEIGHBORHOOD ASSOCIATION 1230 5TH ST SE CEDAR RAPIDS,IA 52401	39-1906031	501(C)(3)	10,000				OAK HILL JACKSON NEIGHBORHOOD RESOURCE CENTER
OLD CREAMERY THEATRE COMPANY 39 38TH AVE STE 200 AMANA,IA 522038200	42-0985212	501(C)(3)	10,250				THEATRE FOR YOUNG AUDIENCES TOURS OF "CHARACTER CHRONICLES AND "CHARACTERROCKS COM"
OLD OPERA HOUSE COMMUNITY ARTS COUNCIL PO BOX 121 COGGON,IA 522180121	42-1354260	501(C)(3)	10,000				COGGON OLD OPERA HOUSE STREET FRONT RENOVATION

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OLIVET PRESBYTERIAN CHURCH 230 10TH ST NW CEDAR RAPIDS, IA 524053905	42-0757412	501(C)(3)	14,864				ANNUAL DESIGNATED DISTRIBUTION, ANNUAL DESIGNATED DISTRIBUTION FOR OLIVET NEIGHBORHOOD MISSION, AND OLIVET NEIGHBORHOOD MISSION EMERGENCY FOOD PANTRY AND CLOTHING CLOSET
OXFAM-AMERICA INC 226 CAUSEWAY ST FIFTH FLOOR BOSTON, MA 02114	23-7069110	501(C)(3)	10,000				NEPAL EARTHQUAKE RELIEF
PLANNED PARENTHOOD OF THE HEARTLAND INC 1171 7TH ST DES MOINES, IA 503142505	42-0727488	501(C)(3)	77,490				PREVENTIVE HEALTH SERVICES AND PATIENT EDUCATION, ANNUAL DESIGNATED DISTRIBUTION FOR LINN COUNTY SERVICES, ANNUAL DESIGNATED DISTRIBUTION TO BE USED IN EAST CENTRAL IOWA, AND PREVENTION EDUCATION

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PROSPECT MEADOWS 1890 COUNTY HOME ROAD MARION,IA 52402	45-1186453	501(C)(3)	32,500				CAPITAL CAMPAIGN AND AND BUILD NEW BALL FIELDS
RED CEDAR CHAMBER MUSIC PO BOX 154 MARION,IA 523020154	42-1473672	501(C)(3)	17,915				ANNUAL DISTRIBUTION, ANNUAL DESIGNATED DISTRIBUTION, MUSIC IN RURAL LINN COUNTY LIBRARIES 2016, AND GENERAL SUPPORT
REVIVAL THEATRE COMPANY 1380 60TH ST NE PO BOX 11274 CEDAR RAPIDS,IA 52410	46-5106582	501(C)(3)	11,797				2014, 2015-2016 SEASON AND CHILDREN'S ACADEMY

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RIDERS CLUB OF AMERICA 1700 B AVE NE 213 CEDAR RAPIDS,IA 52402	27-0832680	501(C)(3)	5,800				CEDAR RAPIDS RIDE SHARE PROGRAM AND GENERAL SUPPORT
RODALE INSTITUTE 611 SIEGFRIEDALE RD KUTZTOWN,PA 19530	23-7206884	501(C)(3)	25,000				DESIGNING COMPOST EXTRACTS TO REDUCE EROSION, YEAR 2
SALVATION ARMY NATIONAL CORP DBA SALVATION ARMY OF CEDAR RAPIDS 1000 C AVE NW CEDAR RAPIDS,IA 524053819	22-2406433	501(C)(3)	51,348				ANNUAL SUPPORT, ANNUAL DESIGNATED DISTRIBUTION, MOBILE FEEDING, FLOOD THE RUN-SPLASH LEVEL, 2015 KETTLE MATCH DAY, GENERAL SUPPORT

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SHRINERS HOSPITALS FOR CHILDREN DEVELOPMENT OFFICE 2900 ROCKY POINT DR TAMPA, FL 33607	36-2193608	501(C)(3)	5,237				GENERAL SUPPORT
SPT THEATRE COMPANY 1103 THIRD STREET SE CEDAR RAPIDS, IA 52401	20-0644595	501(C)(3)	15,000				TALES FROM THE WRITERS' ROOM SEASON 9
ST AMBROSE UNIVERSITY 518 W LOCUST ST DAVENPORT, IA 52803	42-0703280	501(C)(3)	11,000				SCHOLARSHIP, CAPITAL CAMPAIGN - WELLNESS & RECREATION CENTER, AND ACADEMY FOR THE STUDY OF ST AMBROSE OF MILAN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ST LUKE'S HEALTH CARE FOUNDATION 855 A AVE NE STE LL1 CEDAR RAPIDS, IA 524025064	42-1106819	501(C)(3)	37,684				HELEN G NASSIF CANCER CENTER HEALTH & WELLNESS NEEDS (NAME A ROOM), ANNUAL DESIGNATED DISTRIBUTION, ANNUAL DESIGNATED DISTRIBUTION FOR ST LUKE'S HOSPITAL WOMEN'S HEALTH CARE FUND, HOSPICE INPATIENT UNIT ENDOWMENT, EMBRACING LIFE ~ A CAPITAL CAMPAIGN FOR ST LUKE'S HOSPICE INPATIENT UNIT, COMMUNITY CANCER CENTER SPIRIT FUND, AND GENERAL SUPPORT
ST MARK'S LUTHERAN CHURCH 8300 C AVE NE MARION, IA 523029362	42-0810662	501(C)(3)	5,885				GENERAL SUPPORT
ST PAUL'S UMC OF CR FOUNDATION 1340 3RD AVE SE CEDAR RAPIDS, IA 524034019	75-3093308	501(C)(3)	5,931				ANNUAL DISTRIBUTION AND ANNUAL SUPPORT

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ST PAUL'S UNITED METHODIST CHURCH 1340 3RD AVE SE CEDAR RAPIDS,IA 524034019	42-0680303	501(C)(3)	11,958				ANNUAL DISTRIBUTION TO SUPPORT MIDDLE AND HIGH SCHOOL YOUTH PROGRAMS, ANNUAL DESIGNATED DISTRIBUTION, FORWARD IN FAITH, AND BUILDING FUND
SYSTEMS UNLIMITED INC 2533 SCOTT BLVD SE IOWA CITY,IA 522408195	42-0985205	501(C)(3)	26,239				TO SUPPORT THE PURCHASE OF TRANSPORTATION VEHICLES AND MENTAL HEALTH SERVICES
TANAGER PLACE 2309 C ST SW CEDAR RAPIDS,IA 524043707	42-0688079	501(C)(3)	144,132				EXPRESSIVE ARTS GALA "SEASONS OF CHANGE", GENERAL SUPPORT, CAMP TANAGER - ALL YEAR!, DUCK RACE SUPPORT, ANNUAL DESIGNATED DISTRIBUTION, YOUTHPORT NEIGHBORHOOD OUTREACH COORDINATOR, ANNUAL CAMPAIGN, "YOUR CHILD OUR FOCUS" CAPITAL CAMPAIGN, GROWTH IN THE SERVICE AREA FOR YOUNG PEOPLE, GOLF INVITATIONAL HOLE SUPPORT, YOUR CHILD OUR FOCUS, T O P S - TRAINING OUTREACH PROGRAM FOR SUSTAINABILITY, RESILIENCE-BUILDING EMERGENCY MANAGEMENT (RB-EM) PROJECT, YOUTH MENTAL HEALTH FIRST AID (YMHFA) PROJECT, AND SOARING BEYOND THE CAMPAIGN FOR TANAGER PLACE CHILDREN

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THE ARC OF EAST CENTRAL IOWA 680 2ND ST SE STE 200 CEDAR RAPIDS, IA 524012026	42-0805377	501(C)(3)	5,085				ARC MARCH SUPPORT, CAPITAL CAMPAIGN CONTRIBUTION, ANNUAL DESIGNATED DISTRIBUTION, AND GENERAL SUPPORT
THE ORGANIC CENTER INC 28 VERNON ST SUITE 413 BRATTLEBORO, VT 05301	02-0626006	501(C)(3)	45,000				PESTICIDE CONTAMINATION SUPPLY CHAIN STUDY, PART 2
THISTLE FARMS INC AKA MAGDALENE INC 5122 CHARLOTTE PIKE NASHVILLE, TN 37209	58-2050089	501(C)(3)	25,000				GENERAL SUPPORT

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TREES FOREVER 770 7TH AVE STE B MARION,IA 523025773	42-1419181	501(C)(3)	23,764				KEEPING I-380 BEAUTIFUL IN 2015, CEDAR RAPIDS FRUIT TREEKEEPERS, TREES FOREVER TREEKEEPERS BECAUSE EVERY TREE NEEDS A LEADER, AND AGENCY DISTRIBUTION
UNITED STATES CONFERENCE OF CATHOLIC BISHOPS DBA METRO CATHOLIC OUTREACH 420 6TH ST SE CEDAR RAPIDS,IA 52401	53-0196617	501(C)(3)	5,500				FOOD PANTRY AND GENERAL SUPPORT
UNITED WAY OF EAST CENTRAL IOWA 317 7TH AVE SE STE 401 CEDAR RAPIDS,IA 52401	42-0861239	501(C)(3)	155,869				GENERAL SUPPORT FOR LAP-AID, PUBLIC ALLY POSITION FOR LAP-AID, 2013 CAMPAIGN SUPPORT, READING INTO SUCCESS GRANT FROM IOWA COUNCIL OF FOUNDATIONS, READING INTO SUCCESS GRANT FROM PEARSON, ANNUAL SUPPORT, TO BENEFIT KIDS ON COURSE, ANNUAL DESIGNATED DISTRIBUTION, ANNUAL CAMPAIGN, WHEELS UNITED EVENT, WOMEN'S LEADERSHIP INITIATIVE, 2015 - 2016 ANDERSON FAMILY GRANT, READING INTO SUCCESS WEBSITE, AND GENERAL SUPPORT

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UNIVERSITY OF CHICAGO SENIOR PHILANTHROPIC ADVISOR OFFICE OF GIFT PLANNING 5235 S HARPER COUR CHICAGO, IL 60615	36-2177139	501(C)(3)	73,854				SCHOLARSHIP AND ANNUAL DESIGNATED DISTRIBUTION TO COLLEGE FUND, GRADUATE BUSINESS SCHOOL, AND MAINTENANCE OF THE GERALD RATNER ATHLETIC CENTER
UNIVERSITY OF IOWA 5 JESSUP HALL RM B 5 W JEFFERSON ST ST IOWA CITY, IA 52242	42-6004813	GOVERNMENT	36,299				SCHOLARSHIPS, EXPENSES FOR DELEGATES ATTENDING A MEETING IN UPPSALA, SWEDEN IN JUNE 26, 2015, AND ANNUAL DESIGNATED DISTRIBUTION FOR JOURNALISM WORKSHOP SCHOLARSHIPS FOR LINN COUNTY STUDENTS AND TEACHERS
UNIVERSITY OF IOWA FOUNDATION PO BOX 4550 IOWA CITY, IA 522444550	42-0796760	501(C)(3)	31,786				AS NEEDED FOR THE CHILDREN'S MIRACLE NETWORK, CMKHAK15, 2015 PROGRAM SUPPORT FOR THE BELIN-BLANK CENTER, CHILDREN'S HOSPITAL SUPPORT, ANNUAL DESIGNATED DISTRIBUTION FOR BRADLEY LECTURE SERIES AND UPKEEP OF THE HENDRICKS SUITE AT THE IOWA HOUSE, ANNUAL DESIGNATED DISTRIBUTION FOR THE UNIVERSITY OF IOWA COLLEGE OF LAW, ANNUAL DISTRIBUTION, SUPPORT IOWA IMPACT FUND MADE ON 5/19/2015 BY IVAN L HASSELBUSCH, GRANT TO ACCOUNTING DEPARTMENT GIFT FUND, DANCE MARATHONHANCHER CIRCLE, BELIN-BLANK CENTER FOR GIFTED AND TALENTED EDUCATION ANNUAL OPERATING SUPPORT, AND GREATEST NEED FOR THE UI CHILDREN'S HOSPITAL FUND

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UNIVERSITY OF NORTHERN IOWA OFFICE OF STUDENT FINANCIAL AID 105 GILCHRIST HALL CEDAR FALLS, IA 50614	42-6004333	GOVERNMENT	12,250				SCHOLARSHIPS
VARIETY - THE CHILDREN'S CHARITY OF IOWA 505 5TH AVE STE 310 DES MOINES, IA 503092322	42-6077108	501(C)(3)	30,000				VARIETY STAR PLAYGROUND AT NOELRIDGE PARK
WAYPOINT SERVICES FOR WOMEN CHILDREN AND FAMILIES 318 5TH ST SE CEDAR RAPIDS, IA 524011601	42-0680307	501(C)(3)	136,651				MADGE PHILLIPS CENTER, TO FURTHER THE ORGANIZATION'S CHARITABLE PURPOSE, GENERAL SUPPORT, ANNUAL DESIGNATED DISTRIBUTION, ANNUAL DISTRIBUTION, ANNUAL CAMPAIGN, 2014-OPERATIONS SUPPORT FOR THE MADGE PHILLIPS CENTER FOR HOMELESS WOMEN AND CHILDREN, FY2016 MADGE PHILLIPS CENTER SHELTER BED BUG PREVENTION, COLLABORATIVE GRANT COORDINATED INTAKE OPERATIONS TO SUPPORT INDIVIDUALS EXPERIENCING A HOUSING CRISIS, FY2016 ENHANCING THE FAMILY SYSTEM FOR LOW-INCOME FAMILIES, RENOVATION OF 1911 YWCA BUILDING, AND BUILDING A SAFETY NET FOR WOMEN EXPERIENCING DOMESTIC VIOLENCE

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WELLINGTON HEIGHTS NEIGHBORHOOD ASSOCIATION PO BOX 2654 CEDAR RAPIDS, IA 524062654	42-1363173	501(C)(3)	9,610				WELLINGTON HEIGHTS RESOURCE PERSON - 2015
WHOLE PLANET FOUNDATION 550 BOWIE STREET AUSTIN, TX 787034677	20-2376273	501(C)(3)	100,000				GENERAL SUPPORT
WILLIS DADY EMERGENCY SHELTER INC 1247 4TH AVE SE CEDAR RAPIDS, IA 524034020	42-1311668	501(C)(3)	52,900				2015 RUN/WALK FOR SHELTER, GENERAL SUPPORT, BUNK BEDS FOR WILLIS DADY EMERGENCY SHELTER 2015, PREVENTION CASE MANAGEMENT, AND BUILDING FUND

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XAVIER FOUNDATION PO BOX 10956 CEDAR RAPIDS,IA 524100956	42-1479238	501(C)(3)	7,625				GENERAL SUPPORT, XAVIER FOUNDATION BUSINESS CAMPAIGN, EMPLOYEE MATCH, ANNUAL FUND, ANNUAL DISTRIBUTION, AND XAVIER HIGH SCHOOL ART DEPARTMENT
YMCA OF THE CEDAR RAPIDS METROPOLITAN AREA 207 7TH AVE SE CEDAR RAPIDS,IA 524012001	42-0680306	501(C)(3)	44,465				TRIVYA NIGHT SUPPORT, ANNUAL DESIGNATED DISTRIBUTION FOR CAMP WAPSIE, ANNUAL DESIGNATED DISTRIBUTION FOR PARTNERSHIP WITH YOUTH PROGRAM WHICH SUPPORTS MEMBERSHIPS FOR DISADVANTAGED YOUTH, ANNUAL DESIGNATED DISTRIBUTION, GENERAL SUPPORT, INTERN STIPENDS, SWITCH PROGRAM, AND YMCA PROGRAM ACTIVITIES AND SUPPORT
YOUNG PARENTS NETWORK 420 6TH ST SE STE 260 CEDAR RAPIDS,IA 52401	42-1355480	501(C)(3)	45,650				METRO HIGH SCHOOL PRENATAL PROJECT, GENERAL SUPPORT, BROADWAY MAYBIES, DUCK RACE SUPPORT, AND ENHANCING TECHNOLOGY TO MEET EMERGING NEEDS PROJECT

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
THE GREATER CEDAR RAPIDS COMMUNITY FOUNDATION

Employer identification number
42-6053860

Part I Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <div><div><input type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Tax indemnification and gross-up payments</div><div><input checked="" type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>		
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	Yes	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	Yes	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. <div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Written employment contract</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment?		No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?		No
c Participate in, or receive payment from, an equity-based compensation arrangement?		No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization?		No
b Any related organization? If "Yes," on line 5a or 5b, describe in Part III		No
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization?		No
b Any related organization? If "Yes," on line 6a or 6b, describe in Part III		No
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III		No
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		No
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		

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

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

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 LESLIE H GARNER JR PRESIDENT & CEO	(i)	187,254 -----	0 -----	8,044 -----	14,077 -----	19,411 -----	228,786 -----	0 -----
	(ii)	0	0	0	0	0	0	0

Part III **Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
PART I, LINE 1A	PAYMENT OF SOCIAL CLUB DUES FOR THE PRESIDENT & CEO AND VICE PRESIDENT OF DEVELOPMENT IS PRIMARILY FOR BUSINESS USE. THE PERSONAL USE PORTION OF DUES IS INCLUDED IN THE PRESIDENT & CEO'S AND VICE PRESIDENT OF DEVELOPMENT'S TAXABLE WAGES.
PART I, LINE 1B	THERE IS NO WRITTEN POLICY, HOWEVER THE BOARD APPROVED THE PAYMENT OF THE DUES AS PART OF THE PRESIDENT & CEO'S OVERALL COMPENSATION PACKAGE.

SCHEDULE M
(Form 990)

Noncash Contributions

OMB No 1545-0047

2015

Open to Public Inspection

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

► Attach to Form 990.

►Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990

Department of the Treasury
Internal Revenue Service

Name of the organization
THE GREATER CEDAR RAPIDS COMMUNITY FOUNDATION

Employer identification number
42-6053860

Part I

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	(d) Method of determining noncash contribution amounts
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	33	688,984	STOCK EXCHANGE
10 Securities—Closely held stock	X	1	367,653	APPRAISAL
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► ()				
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	29			1
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a		No	
b If "Yes," describe the arrangement in Part II				
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	Yes		
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		No	
b If "Yes," describe in Part II				
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II				

Part II

Supplemental Information.

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.

Return Reference	Explanation
PART I, COLUMN (B)	REPORTING NUMBER OF CONTRIBUTIONS

**SCHEDULE O
(Form 990 or
990-EZ)**Department of the
Treasury
Internal Revenue
Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at
www.irs.gov/form990.**2015****Open to Public
Inspection**Name of the organization
THE GREATER CEDAR RAPIDS COMMUNITY
FOUNDATION**Employer identification number**

42-6053860

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	THE FORM 990 IS PREPARED BY AN INDEPENDENT ACCOUNTING FIRM AND REVIEWED IN DETAIL BY THE ORGANIZATION A COPY OF THE ORGANIZATION'S FINAL FORM 990 IS PROVIDED, IN ELECTRONIC FORM, TO EACH VOTING MEMBER OF THE GOVERNING BODY OF THE ORGANIZATION PRIOR TO FILING WITH THE IRS
FORM 990, PART VI, SECTION B, LINE 12C	BOARD MEMBERS, INVESTMENT COMMITTEE MEMBERS, AND EMPLOYEES COMPLETE AND SIGN A CONFLICT OF INTEREST DECLARATION AT THE BEGINNING OF EACH YEAR GRANT COMMITTEE MEMBERS COMPLETE AND SIGN CONFLICT OF INTEREST DECLARATIONS AT EACH GRANT COMMITTEE MEETING FOR GRANT APPROVALS SENT ELECTRONICALLY TO THE EXECUTIVE COMMITTEE, CONFLICT OF INTEREST DECLARATIONS ARE MADE WHEN EACH MEMBER VOTES FOR GRANTS APPROVED AT BOARD MEETINGS, BOARD MEMBERS COMPLETE AND SIGN CONFLICT OF INTEREST DECLARATIONS BEFORE VOTING

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	A) THE PROCESS FOR DETERMINING THE COMPENSATION OF THE ORGANIZATION'S PRESIDENT & CEO INCLUDES AN ANNUAL REVIEW PROCESS BASED ON THE INDIVIDUAL'S AND ORGANIZATION'S PERFORMANCE AND SALARY BENCHMARKING DATA FROM THE COUNCIL ON FOUNDATIONS THE PROCESS IS CONDUCTED BY THE EXECUTIVE COMMITTEE AND REVIEWED BY THE FULL BOARD IN AN EXECUTIVE SESSION THE BOARD CHAIR EMAILS THE CFO THE REVIEW PROCESS AND AGREED UPON COMPENSATION THE EMAIL IS FILED IN THE PRESIDENT & CEO'S PERSONNEL FILE. B) THE PROCESS FOR DETERMINING THE COMPENSATION OF OTHER OFFICERS INCLUDES AN ANNUAL REVIEW PROCESS BASED ON THE INDIVIDUAL'S AND ORGANIZATION'S PERFORMANCE AND SALARY BENCHMARKING DATA FROM THE COUNCIL ON FOUNDATIONS THE PROCESS IS CONDUCTED BY THE PRESIDENT & CEO A YEAR-END REVIEW FORM IS COMPLETED AND SIGNED BY THE PRESIDENT & CEO AND THE OFFICER BEING EVALUATED THE FORM IS FILED IN THE OFFICER'S PERSONNEL FILE
FORM 990, PART VI, SECTION C, LINE 19	THE FOLLOWING DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST - ARTICLES OF INCORPORATION - BY-LAWS - CONFLICT OF INTEREST POLICY - FINANCIAL STATEMENTS (ALSO AVAILABLE ON THE ORGANIZATION'S WEBSITE)

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	ACTUARIAL ADJUSTMENT ON ANNUITIES AND UNITRUST AGREEMENTS -263,088 ADJUSTMENT FOR TRANSFER OF FUNDS FROM AMOUNTS HELD ON BEHALF OF OTHERS -46,012

SCHEDULE R
(Form 990)

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization
THE GREATER CEDAR RAPIDS COMMUNITY
FOUNDATION

Employer identification number

42-6053860

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.							
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)GREATER CEDAR RAPIDS COMMUNITY FOUNDATION REAL ESTATE FUND 324 3RD ST SE CEDAR RAPIDS, IA 52401 42-1511300	SUPPORT GCRCF	IA	501(C)(3)	LINE 11B, II	GREATER CEDAR RAPIDS COMMUNITY FOUNDATION	Yes	

Part III

Identification of Related Organizations Taxable as a Partnership

Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust

Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No

Part V

Transactions With Related Organizations

Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1

During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a

Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

1a

No

b

Gift, grant, or capital contribution to related organization(s)

1b

No

c

Gift, grant, or capital contribution from related organization(s)

1c

No

d

Loans or loan guarantees to or for related organization(s)

1d

No

e

Loans or loan guarantees by related organization(s)

1e

No

f

Dividends from related organization(s)

1f

No

g

Sale of assets to related organization(s)

1g

No

h

Purchase of assets from related organization(s)

1h

No

i

Exchange of assets with related organization(s)

1i

No

j

Lease of facilities, equipment, or other assets to related organization(s)

1j

No

k

Lease of facilities, equipment, or other assets from related organization(s)

1k

No

l

Performance of services or membership or fundraising solicitations for related organization(s)
.

1l

No

m

Performance of services or membership or fundraising solicitations by related organization(s)

1m

No

n

Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

1n

No

o

Sharing of paid employees with related organization(s)

1o

No

p

Reimbursement paid to related organization(s) for expenses

1p

No

q

Reimbursement paid by related organization(s) for expenses

1q

No

r

Other transfer of cash or property to related organization(s)

1r

No

s

Other transfer of cash or property from related organization(s)

1s

No

2

If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

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

[illegible]

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation
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