Change in Accounting Period
Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation

► Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990PF for instructions and the latest information

OMB No 1545-0052

2017

Department of the Treasury Internal Revenue Service

Open to Public Inspection

For ca	endar year 2017 or tax year beginning	7/01 ,2017	and ending 12/	31 , 2017	-
				Employer identification nu	mber
	HOWE FOUNDATION		ļ.,	42-1395312  Telephone number (see ins	
	WEST MISSISSIPPI DRIVE #600 ATINE, IA 52761		1	3 Telephone number (see ins 563-263-7478	tructions)
MOSC	Aline, IA 52761		<u> </u>	·	
			(	If exemption application is	s pending, check here 🕨 🔲 🕻
G Ch	eck all that apply Initial return	Initial return of a form	ner public charity	1 Foreign organizations, che	rk here ► ☐
	Final return	Amended return			
	Address change	Name change	- 11	2 Foreign organizations mee here and attach computati	eting the 85% test, check
H Ch		(c)(3) exempt private f		nore and attach computati	
	Section 4947(a)(1) nonexempt charitable t			E If private foundation statu	
	5	ounting method $X$ C	ash Accrual	under section 507(b)(1)(A	o), check here
		Other (specify)		F If the foundation is in a 60	
<b>►</b> \$	3/030/020:	column (d) must be or	cash basis )	under section 507(b)(1)(B	o), check here
Part	Analysis of Revenue and Expenses (The total of amounts in	(a) Revenue and	(b) Net investment		(d) Disbursements
	columns (b), (c), and (d) may not neces-	expenses per books	income	income	for charitable purposes
	sarily equal the amounts in column (a)				(cash basis only)
	(see instructions))  Contributions, gifts, grants, ris recoverd (attach schodule)	2,450,960.			1
	2 Check I if the found	2,450,500.			
_	3 Interest on savings and temp			<u> </u>	DECEN/ED
2019	4 Dividends and interest from 5 a Gross rents	276,554.	276,554	276,554.	RECEIVED
$\approx$	<b>b</b> Net rental income			- 6	<del> </del>
<i>~</i> ₩ B	or (loss)  6 å (Net gain or (loss) from sale of assets not on line 10	143,167.			B DEC 1 4 2018
r=d Ê	<b>b</b> Gross sales price for all 1/12 167	143,107.			1
¥ 2	assets on line ba. 143, 167.  7 Capital gain net income (from Part IV, line 2)		143,167	7.	OGDEN, UT
MAR	8 Net short-term capital gain			143,167	CODEIN, OF
U	9 Income modifications				
	10 a Gross sales less returns and				
<b>≥</b>	allowances b Less Cost of				
2	goods sold				
3	C Gross profit or (loss) (attach schedule)  11 Other income (attach schedule).				
Ø					
	12 Total. Add lines-1 through 11	2,870,681.	419,721	419,721.	
	13 Compensation of officers. directors, trustees, etc.	0.			
	14 Other employee salaries and wages 15 Pension plans, employee the nefits				
		<u> </u>			
A	16a Legaldees (attach schedule)				
Ņ	b Accounting fees (attach strill				
Ņ	c Other professional tees (attach son)				
O I S T R A T	17 Interest 18 Taxes (attaches page land) See Stm 1	69,028.	_		
ŘŘ	19 Depreciation lattact	09,020.	-		1
A A	schedule) and depletion				
N V G E	20 Occupancy				
	21 Travel, conferences, and materiles 22 Printing and publications	**			
A E N X D P	22 Printing and publications 23 Other expenses (attach schedule)	-		<del></del>	<del>                                       </del>
Ė	See Statement 2	31,416.	11,702	$_{2}$ .	
N S	24 Total operating and administrative		_		
S E S	expenses. Add lines 13 through 23	100,444.	11,702	2.	
	25 Contributions, gifts, grants paid Part XV	359,500.			359,500.
	26 Total expenses and disbursements Add lines 24 and 25	459,944.	11,702	2. 0.	359,500.
	27 Subtract line 26 from line 12	403,344.	11,702	·· <u> </u>	337,300.
	a Excess of revenue over expenses				
	and disbursements	2,410,737.	100 000	<del></del>	
	<b>b</b> Net investment income (if negative, enter -0-)		408,019		
	C Adjusted net income (if negative, enter 0-).		L	419,721.	1

42-1395312

Parl	11 1	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	of year
ran			(See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest	-			
	2	Savings and tempora	ary cash investments	685,472.	330,322.	330,322.
	3	Accounts receivable	•		<del> </del>	
	1	Less allowance for	doubtful accounts •		<del> </del>	
	4	Pledges receivable	<b></b>			
		Less allowance for	doubtful accounts •		_	
	5	Grants receivable	,			
	6	Receivables due from offic disqualified persons (attac	cers, directors, trustees, and other ch schedule) (see instructions)			
_	7	Other notes and loans rec	eivable (attach sch)			
S		Less allowance for	doubtful accounts •			_
Š	8	Inventories for sale				
A S E T	9	Prepaid expenses ar	nd deferred charges			
S		obligations (attach s	· ·			
		Investments — corporate	· · · · · · · · · · · · · · · · · · ·	5,971,682.	8,789,924.	9,267,698.
		: Investments — corporate	, , , , , , , , , , , , , , , , , , ,			
	11	Investments — land, equipment basis	buildings, and			
		Less accumulated deprec (attach schedule)	ration ►			
	12	Investments - morte	gage loans			
	13	Investments - other	(attach schedule)			
	14	Land, buildings, and	equipment basis -			
		Less accumulated deprec (attach schedule)	iation			
		Other assets (descri		<u></u>		
	16	Total assets (to be of see the instructions	completed by all filers — — — — — — — — — — — — — — — — — — —	6,657,154.	9,120,246.	9,598,020.
L	17	Accounts payable ar				1
A	18	Grants payable				
ĝ	19	Deferred revenue				1 !
¦ ¦	20	Loans from officers, direc	tors, trustees, & other disqualified persons			1
Ī	21	Mortgages and other notes	s payable (attach schedule)			]
I I F	22	Other liabilities (des	cribe ► <u>See Statement 3</u> )		1.	-
E S	23	Total liabilities (add	lines 17 through 22)	0.	1.	] ]
		Foundations that for and complete lines	llow SFAS 117, check here 24 through 26, and lines 30 and 31.			
N F E U T N	24	Unrestricted				]
E U T N	25	Temporarily restricted	ed			
D	26	Permanently restrict	_			_
A B S A E L T A		Foundations that do and complete lines	o not follow SFAS 117, check here X 27 through 31.	ï		
ΕL	27	Capital stock, trust p	principal, or current funds	6,657,154.	9,120,245.	1
T A S N	28	Paid-in or capital surplus,	or land, bldg , and equipment fund		· ,	1
O E	29	Retained earnings, accumi	ulated income, endowment, or other funds			]
RS	30	Total net assets or f	und balances (see instructions)	6,657,154.	9,120,245.	1
	31	Total liabilities and (see instructions)	net assets/fund balances	6,657,154.	9,120,246.	
Parl		Analysis of Chan	ges in Net Assets or Fund Balance	es		
1	Total end-c	net assets or fund ba	alances at beginning of year – Part II, colu d on prior year's return)	mn (a), line 30 (must aç	gree with	6,657,154.
2	Ente	r amount from Part I,	line 27a		2	2,410,737.
3	Other	increases not included in li	ne 2 (Itemize) See Statement	4	3	52,355.
4	Add I	lines 1, 2, and 3		- <b></b>	4	9,120,246.
		ases not included in line 2 (			5	1.
6	Total	net assets or fund ba	alances at end of year (line 4 minus line 5)	- Part II, column (b), II	ine 30 <b>6</b>	9,120,245.

Page 3

• (a) List and describe 2-story brick ware	e the kind(s) of property sold (for example chouse, or common stock, 200 shares	MLC Company)   P =	ow acquired Purchase Donation	(C) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a NET DISPOSITIONS			P	Various	Various
<u>b</u>					
<u> </u>			_		
d e	<del></del> -				
<del>-</del>	(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or	(loss)
(e) Gross sales price	(or allowable)	plus expense of sale		((e) plus (f) m	inus (g))
a 143,167			-		143,167.
b c	+			<del>.</del>	
d					
e					
Complete only for assets sho	owing gain in column (h) and owned b	y the foundation on 12/31/69		(i) Gains (Col	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		ain minus col (k), t an -0-) or Losses (f	
a					143,167.
b	+				
C					
d e	+				
		enter in Part I, line 7			
2 Capital gain net income or (r	iet capital loss)if (loss), ente	er -0- in Part I, line 7	2		143,167.
3 Net short-term capital gain o	r (loss) as defined in sections 1222(5)	and (6)			
If gain, also enter in Part I, I in Part I, line &	ine 8, column (c) See instructions If	(lóss), enter -0-	3		142 167
-	er Section 4940(e) for Reduced	Tax on Net Investment			143,167.
'Yes,' the foundation doesn't qua	ection 4942 tax on the distributable ar alify under section 4940(e) Do not cor	nplete this part		Yes	X No
	n each column for each year, see the ins	tructions before making any entrie	es		
(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		( <b>d)</b> Distribution (col (b) divided	ratio by col (c))
2016	2,029,212.	8,446,55			0.240241
2015	266, 834.	7,490,63			0.035633
2014	562,481.				
2013		8,828,68			0.063711
	131,980.	5,931,64	12.		0.063711 0.022250
2012			12.	T	0.063711 0.022250
	131,980.	5,931,64	12.		0.063711 0.022250 0.061571
2012  2 Total of line 1, column (d)  3 Average distribution ratio for the	131,980.	5, 931, 64 4, 829, 72 In line 2 by 5 0, or by the	20.		0.063711 0.022250 0.061571 0.423395
2012  2 Total of line 1, column (d)  3 Average distribution ratio for th number of years the foundation	131, 980. 297, 372.	5, 931, 64 4, 829, 72 In line 2 by 5 0, or by the 5 years	20.		0.063711 0.022250 0.061571 0.423395 0.084679
2012  2 Total of line 1, column (d)  3 Average distribution ratio for th number of years the foundation	131, 980. 297, 372.	5, 931, 64 4, 829, 72 In line 2 by 5 0, or by the 5 years	20.		0.063711 0.022250 0.061571 0.423395 0.084679 9,034,965.
2012  2 Total of line 1, column (d)  3 Average distribution ratio for th number of years the foundate  4 Enter the net value of nonch  5 Multiply line 4 by line 3	131, 980. 297, 372.	5, 931, 64 4, 829, 72 In line 2 by 5 0, or by the 5 years	20.		0.063711 0.022250 0.061571 0.423395 0.084679 9,034,965. 765,072.
2012  2 Total of line 1, column (d)  3 Average distribution ratio for th number of years the foundate  4 Enter the net value of nonch  5 Multiply line 4 by line 3	131, 980. 297, 372.  e 5-year base period – divide the total or ion has been in existence if less than aritable-use assets for 2017 from Part	5, 931, 64 4, 829, 72 In line 2 by 5 0, or by the 5 years	20.		0.035622 0.063711 0.022250 0.061571 0.423395 0.084679 9,034,965. 765,072. 4,080.
2012  2 Total of line 1, column (d)  3 Average distribution ratio for th number of years the foundate  4 Enter the net value of nonch  5 Multiply line 4 by line 3  6 Enter 1% of net investment in	131, 980. 297, 372.  se 5-year base period – divide the total or ion has been in existence if less than arritable-use assets for 2017 from Part income (1% of Part I, line 27b)	5, 931, 64 4, 829, 72 In line 2 by 5 0, or by the 5 years	2		0.063711 0.022250 0.061571 0.423395 0.084679 9,034,965. 765,072.

Part.VI Excise Tax Based on Investment Income (Section 4940(a)	42-1393312 42-1393312 42-1393312 42-1393312	) = \		aye 4	,
	nter 'N/A' on line 1	15)			į
Date of ruling or determination letter (attach copy of letter if necess	i 1 <del></del> -1				1
b Domestic foundations that meet the section 4940(e) requirements in Part V,			0 1	60.	
check here ► and enter 1% of Part I, line 27b			0,1	. 60.	ĺ
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Practice and Company of the Com	ert Line 12 col (b)	_			İ
, , , ,					
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	2			0.	
3 Add lines 1 and 2	3		8,1		,
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foun			0,1	0.	
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less	1		0 1	60.	,
6 Credits/Payments	, cinci -o-		0,1	. 00 .	i
a 2017 estimated tax pmts and 2016 overpayment credited to 2017	6a   10,000.				i
<b>b</b> Exempt foreign organizations — tax withheld at source	6b				i
c Tax paid with application for extension of time to file (Form 8868)	6c 20,000.				l
d Backup withholding erroneously withheld	6d 20,000.				i
7 Total credits and payments Add lines 6a through 6d	7		30,0	<u> </u>	ı
	rm 2220 is attached		50,0	,00.	
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	► 9			0.	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	► 10		21,8		
	1,840. Refunded • 11		21,0	0.	
Part VII-A Statements Regarding Activities	11,040.			<u> </u>	
			Yes	No	
1 a During the tax year, did the foundation attempt to influence any national, sta participate or intervene in any political campaign?	ate, or local legislation or did it	1 a		X	
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for politic See the instructions for the definition	al purposes?	1 b		Х	
If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and co or distributed by the foundation in connection with the activities	opies of any materials published				
c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imp (1) On the foundation    • \$ 0. (2) On foundation e Enter the reimbursement (if any) paid by the foundation during the year for political foundation managers  • \$ 0.	managers ►\$ 0.	1 c		X	
2 Has the foundation engaged in any activities that have not previously been r If 'Yes,' attach a detailed description of the activities	reported to the IRS?	2		X	İ
3 Has the foundation made any changes, not previously reported to the IRS, in its go of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a co	overning instrument, articles onformed copy of the changes.	3			
4a Did the foundation have unrelated business gross income of \$1,000 or more	during the year?	4 a		Х	
<b>b</b> If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?		4b	N	/A	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		Х	
If 'Yes,' attach the statement required by General Instruction T				1	l
<ul> <li>Are the requirements of section 508(e) (relating to sections 4941 through 49</li> <li>By language in the governing instrument, or</li> </ul>	45) satisfied either				
• By state legislation that effectively amends the governing instrument so that no with the state law remain in the governing instrument?	mandatory directions that conflict	6	<u>X</u>		
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete P	art II, col (c), and Part XV	7	Х		
8 a Enter the states to which the foundation reports or with which it is registered IA	d See instructions		,		
<b>b</b> If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorne (or designate) of each state as required by <i>General Instruction G?</i> If 'No,' attach explanation	y General	8 b	<u>.</u>		
9 Is the foundation claiming status as a private operating foundation within the for calendar year 2017 or the tax year beginning in 2017? See the instruction	e meaning of section 4942(j)(3) or 4942(j)(5) ns for Part XIV If 'Yes,' complete Part XIV	9			0
10 Did any persons become substantial contributors during the tax year? If 'Yes,' atta and addresses	ch a schedule listing their names	10		Х	_
BAA	Fo	rm 990	)-PF (2		

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Pai	rt VII-A   Stateme	ents Regardi	ng Activi	ties (co	ntinuea)				
11	At any time during the within the meaning of	he year, did the of section 512(b	foundation (13)? If 'Y	n, directly 'es,' attac	or indirectly, own a controlled entity th schedule See instructions		11	Yes	No X
12	Did the foundation ma advisory privileges?				and over which the foundation or a disqualifications	ed person had	12		х
13	Did the foundation c	omply with the	public insp	ection red	quirements for its annual returns and exe	emption application?	13	X	
	Website address			► <u>N</u> /					
14	The books are in car	re of ► <u>JAME</u>	S HOWE		Tel	ephone no <a> 770-</a>	289-1	356_	
					COMMING ON	°+4► <u>30040</u>			
15					orm 990-PF in lieu of Form 1041 — check	1 1	N/A		Ц
	and enter the amour	nt of tax-exemp	t interest r	eceived o	r accrued during the year	► 15		1	N/A
16	At any time during cal bank, securities, or o	lendar year 2017 other financial a	, did the foi account in a	undation ha a foreign (	ave an interest in or a signature or other au country?	uthority over a	16	Yes	No X
	See the instructions enter the name of the		and filing r	equireme	nts for FinCEN Form 114 If 'Yes,'				
Pai	rt VII-B Stateme	nts Regardi	ng Activi	ities for	Which Form 4720 May Be Requ	ired			
	File Form 4720 if an	y item is check	ed in the '\	res' colur	nn, unless an exception applies.			Yes	No
1 a	<b>a</b> During the year, did th	ne foundation (ei	ther directly	or indirec	tly)				
	(1) Engage in the sa	ale or exchange	e, or leasing	g of prope	erty with a disqualified person?	∐Yes XINd	·		
	(2) Borrow money for disqualified pers	rom, lend mone son?	ey to, or oth	nerwise ex	xtend credit to (or accept it from) a	Yes X No			
	• •	•	•	-	nem from) a disqualified person?	Yes X No	·		
	(4) Pay compensati	on to, or pay or	reimburse	the expe	enses of, a disqualified person?	∐Yes ⊠No	·		
	(5) Transfer any inc for the benefit o	ome or assets r use of a disqu	to a disqua ialified pers	llified pers son)?	son (or make any of either available	Yes X No	,	•	
	(6) Agree to pay mo foundation agreed of government s	d to make a gran	it to or to en	nploy the c	fficial? (Exception. Check 'No' if the official for a period after termination 5.)	Yes X No	.   .		`
ŀ					fail to qualify under the exceptions descr regarding disaster assistance? See instr	ribed in uctions	1 b	N	/A
	Organizations relying	g on a current r	notice rega	rding disa	ster assistance, check here		}	,	
•	c Did the foundation e that were not correc	ngage in a prio ted before the f	r year in ai first day of	ny of the a the tax ye	acts described in 1a, other than excepte ear beginning in 2017?	d acts,	1 c		X
2	Taxes on failure to operating for				es not apply for years the foundation wa 3) or 4942(j)(5))	as a			
á	At the end of tax year and 6e, Part XIII) for	ar 2017, did the r tax year(s) be	foundation ginning be	n have an fore 2017	y undistributed income (lines 6d ?	Yes X No			
	If 'Yes,' list the year	s ► 20	, 20	, 20	, 20				
ı	(relating to incorrect	valuation of as	sets) to the	e year's u	n is <b>not</b> applying the provisions of section indistributed income? (If applying section	on 4942(a)(2) n 4942(a)(2) to	-		
	all years listed, answ				e instructions) I to <b>any</b> of the years listed in 2a, list the	vears here	2 b	I N	/A
•				ig applied	i to any or the years listed in Za, list the	years nere	,		
_	► 20 <sub></sub> , 20 <sub></sub>						+ 5	1	
3 6	a Did the foundation henterprise at any time	old more than a ne during the ye	a 2% direct ear?	t or indire	ct interest in any business	Yes X No	•		
1	or disqualified perso by the Commissione (3) the lapse of the	ons after May 26 er under section 10-, 15-, or 20-y	5, 1969, <b>(2)</b> , 4943(c)(7) ,ear first ph	the lapse ) to disponase holdi	s a result of (1) any purchase by the four e of the 5-year period (or longer period a use of holdings acquired by gift or beque ling period? (Use Schedule C, Form 4720 or in 2017)	pproved st, or			<u> </u>
	determine if the four	iuation nad exc	.ess busine	ישומומוט פפי	ys III 2017 j		3 b	IN.	/A
4 :	a Did the foundation in charitable purposes?		e year any a	amount in	n a manner that would jeopardize its		4 a		X
<u> </u>	<b>b</b> Did the foundation n jeopardize its charitat the tax year beginni	ole purpose that	tment in a phad not bee	prior year n removed	(but after December 31, 1969) that could from jeopardy before the first day of		4 b	, , , , , , , , , , , , , , , , , , ,	X
BAA	4		<u> </u>		-		Form <b>99</b>	0-PF (	(2017)

Part VII-B   Statements Regarding Activit	es for Which Form	4720 May Be Reg	uired (	continue	<u>d)</u>			
5a During the year, did the foundation pay or incur a				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u>-,                                      </u>	1.	Yes	No
(1) Carry on propaganda, or otherwise attempt	•	n (section 4945(e))?		Yes	X N	, ·	1.55	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	ilic election (see section	4955), or to carry		Yes	X N	0 : .	ļ.' ·	
(3) Provide a grant to an individual for travel,		purposes?		Yes	XN	1 .		•
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? See instructions	a charitable, etc , organi	zation described		Yes	XN	io   .		•
(5) Provide for any purpose other than religio educational purposes, or for the prevention				Yes	XN	lo .		,
<b>b</b> If any answer is 'Yes' to 5a(1)—(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance?								
See instructions Organizations relying on a current notice regarding disaster assistance, check here								/A
c If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If 'Yes,' attach the statement required by Regulations section 53 4945–5(d)								
6 a Did the foundation, during the year, receive as on a personal benefit contract?	ny funds, directly or ind	rectly, to pay premium	s	Yes	XN	ю		4
<b>b</b> Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	iums, directly or indirec	tly, on a personal bene	fit contra	ct <sup>7</sup>	_	6 b		·X
7 a At any time during the tax year, was the found				Yes	XN		· 	
b If 'Yes,' did the foundation receive any process Part VIII Information About Officers, D	•				N/			
and Contractors	irectors, Trustees,	Foundation Manag	gers, m	gilly Fal	iu Lii	iipioyee	э,	
1 List all officers, directors, trustees, and foun	dation managers and th	neir compensation. See	instruct	ions.				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	empl plans	tributions oyee bene and deferi ipensation	efit   ¹	(e) Expense account, other allowances		
ERIC J THOMSEN 2447 SUNFLOWER RIDGE	Treasurer 0	0.		(	٥.			0
MUSCATINE, IA 52761 HELEN H. HOWE	Director	0.			<b>)</b> .			0
101 WEST MISSISSIPPI DRIVE	1.00	0.		`	J.			U
MUSCATINE, IA 52761  JAMES HOWE	Director	0.			5. +			0
6635 CHELSEA GARDEN WAY CUMMING, GA 30040	2.00	0.		`	·			U
				· · ·				
2 Compensation of five highest-paid employees (o	ther than those included	on line 1 – see ınstructio	ns). If non	e, enter 'No	ONE.			•
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	emplo plans	tributions to oyee bene and deferi opensation	fit 📙	(e) Expens other a	se acc allowar	ount, nces
None								
			:					
					-			
Total number of other employees paid over \$50,00	0				•			(
							DF /2	017

	Five highest-paid independent contractors for professional services. See instructions. If none, enter 'NONE.'	
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
Non	e	
	·	
	·	
Total	number of others receiving over \$50,000 for professional services.	C
Part	IX-A Summary of Direct Charitable Activities	
	THE PARTY OF THE P	<del></del>
organiz	foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	FINANCIAL SUPPORT TO SELECTED QUALIFYING SECTION 501(c)(3) EDUCATIONAL	
	CHARITIES	
•	ETNANCIAL CURRORE CON ORUER CUARTEARIE ORGANIZATIONS	24,000.
2	FINANCIAL SUPPORT FOR OTHER CHARITABLE ORGANIZATIONS	
	·	51,000.
3	FINANCIAL SUPPORT FOR LOCAL SECTION 501 (c) (3) ORGANIZATIONS	
		001 500
4	FINANCIAL SUPPORT FOR LOCAL RELIGIOUS ORGANIZATIONS	201,500.
-	FINANCIAL SUFFORT FOR LOCAL RELIGIOUS ORGANIZATIONS	
		83,000.
	IX-B   Summary of Program-Related Investments (see instructions)	
	ibe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	<u>N/A</u>	
2		
All o	her program-related investments. See instructions	
3	and program related investments occurs detions	
-		
	Add lines 1 through 3	0.

٠..

Page 8

	see instructions.)		<u> </u>
	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes Average monthly fair market value of securities	1 a	0 012 600
	Average of monthly cash balances	1 b	8,812,609. 359,944.
	Fair market value of all other assets (see instructions)	1 c	339, 344.
	Total (add lines 1a, b, and c)	1 d	9,172,553.
	Reduction claimed for blockage or other factors reported on lines 1a and	<b>├</b>	9,112,333.
_	1c (attach detailed explanation) 1el 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	9,172,553.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	137,588.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	9,034,965.
6	Minimum investment return. Enter 5% of line 5  Short Year Modified Percentage 2.5205 %	6	227,726.
_	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private opera	ting for	
	and certain foreign organizations, check here ▶ □ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	227,726.
2 a	Tax on investment income for 2017 from Part VI, line 5 2a 8,160.		•
t	Income tax for 2017 (This does not include the tax from Part VI)	1	
c	Add lines 2a and 2b	2 c	8,160.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	219,566.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	219,566.
6	Deduction from distributable amount (see instructions)	6	·
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	219,566.
Par	t XII Qualifying Distributions (see instructions)		
	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1 a	359,500.
t	Program-related investments – total from Part IX-B	1 b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 a	Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required)	3 a	
b	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	359,500.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b. See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	359,500.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the four qualifies for the section 4940(e) reduction of tax in those years	ndation	
BAA			Form 990-PF (2017)

TEEA0308L 09/12/17

## Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	<b>(c)</b> 2016	<b>(d)</b> 2017
1 Distributable amount for 2017 from Part XI, line 7				219,566.
2 Undistributed income, if any, as of the end of 2017				213,300.
a Enter amount for 2016 only			0.	
<b>b</b> Total for prior years 20 , 20 , 20		0.		
3 Excess distributions carryover, if any, to 2017				
<b>a</b> From 2012 62,191.				
<b>b</b> From 2013				
<b>c</b> From 2014 131,895.	1			
<b>d</b> From 2015 .	}			
<b>e</b> From 2016 1, 767, 846.	<u> </u>			
f Total of lines 3a through e	1,961,932.			
4 Qualifying distributions for 2017 from Part				,
XII, linc 4 ► \$ 359,500.				
a Applied to 2016, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior years (Election required — see instructions)		0.	`	,
c Treated as distributions out of corpus				
(Election required – see instructions)	0.			
<b>d</b> Applied to 2017 distributable amount				219,566.
e Remaining amount distributed out of corpus	139,934.			
5 Excess distributions carryover applied to 2017	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
(-),				
6 Enter the net total of each column as				
indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,101,866.			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed			,	
income for which a notice of deficiency has been issued, or on which the section 4942(a)				Î
tax has been previously assessed		0.		
<b>d</b> Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2016 Subtract line 4a from				
line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2017 Subtract lines				
4d and 5 from line 1. This amount must be				
distributed in 2018				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2012 not				
applied on line 5 or line 7 (see instructions).	62,191.			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	2,039,675.		4.	
10 Analysis of line 9				
a Excess from 2013			1	į
<b>b</b> Excess from 2014 131, 895.	]			
c Excess from 2015	]			
<b>d</b> Excess from 2016 1,767,846.	]			
<b>e</b> Excess from 2017 139, 934.	L			5 200 75 (0017)

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

c Any submission deadlines

3 Grants and Contributions Paid During the	Year or Approved for Ful	ure Paymen	ıt	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	contribution	
a Paid during the year				
See Statement 6				
				}
			-	
				li i
			•	
Total	·		► 3a	359,500.
<b>b</b> Approved for future payment				
				}
			<u> </u>	
Total	·		► 3b	1

	ss amounts unless otherwise indicated		d business income		by section 512, 513, or 514	(e)
		(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion	<b>(d)</b> Amount	Related or exempt function income (See instructions)
-	gram service revenue			code		
а Ь						_
c						
d						
е						
f						
	s and contracts from government agencies obsership dues and assessments.					
	est on savings and temporary cash investments			14	· <u>-</u>	
	dends and interest from securities		· · · · · · · · · · · · · · · · · · ·	14	276,554.	·
5 Net	rental income or (loss) from real estate	1 7 7 7	1 / 1 1 1 a	1 1	**	
a Deb	t-financed property					
<b>b</b> Not	debt-financed property					
6 Net re	ental income or (loss) from personal property					
	er investment income					
	or (loss) from sales of assets other than inventory					143,167
	income or (loss) from special events					
	ss profit or (loss) from sales of inventory	***********	\$1.5 \$4.7 mg	, , , , ,	HA MAY BY SOLE TO	There is the second
11 Othe a	erreveriue	N. S	N + 1 * 1 * 2 * 2 * 2 * 2 * 2 * 2	1	4 ha 12 % max 4	6
ъ						
c			<del></del>			
d						
е						
	total Add columns (b), (d), and (e)			, -	276,554.	
12 Subi	al. Add line 12, columns (b), (d), and (e)				276,554.	
12 Subt 13 Tota See work	al. Add line 12, columns (b), (d), and (e) asheet in line 13 instructions to verify calculate		ishment of Evens		13	
Substitution 12 Substitution 13 Total See work	al. Add line 12, columns (b), (d), and (e) scheet in line 13 instructions to verify calculate   (I-B   Relationship of Activities to the	e Accompl	<del>-</del>	t Purpo	oses	419,721
Substitution 12 Substitution 13 Total See work	al. Add line 12, columns (b), (d), and (e) scheet in line 13 instructions to verify calculate [/I-B   Relationship of Activities to the	e Accompl	orted in column (e) of F	t Purpo	DSes A contributed important	419,721 v to the
12 Subi 13 Tota See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate.  (I-B   Relationship of Activities to the Explain below how each activity for which its content of the columns.	e Accompl	orted in column (e) of F	t Purpo	DSes A contributed important	419,721 v to the
Substitution 12 Substitution 13 Total See work Part XV	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate.  (I-B   Relationship of Activities to the Explain below how each activity for which its content of the columns.	e Accompl	orted in column (e) of F	t Purpo	DSes A contributed important	419,721 v to the
12 Subi 13 Tota See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate.  (I-B   Relationship of Activities to the Explain below how each activity for which its content of the columns.	e Accompl	orted in column (e) of F	t Purpo	DSes A contributed important	419,721 v to the
12 Subi 13 Tota See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate.  (I-B   Relationship of Activities to the Explain below how each activity for which its content of the columns.	e Accompl	orted in column (e) of F	t Purpo	DSes A contributed important	419,721 v to the
12 Subi 13 Tota See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate.  (I-B   Relationship of Activities to the Explain below how each activity for which its content of the columns.	e Accompl	orted in column (e) of F	t Purpo	DSes A contributed important	419,721
12 Subi 13 Tota See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate.  (I-B   Relationship of Activities to the Explain below how each activity for which its content of the columns.	e Accompl	orted in column (e) of F	t Purpo	DSes A contributed important	419,721
12 Subi 13 Tota See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate.  (I-B   Relationship of Activities to the Explain below how each activity for which its content of the cont	e Accompl	orted in column (e) of F	t Purpo	DSes A contributed important	419,721 v to the
12 Subi 13 Tota See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate.  (I-B   Relationship of Activities to the Explain below how each activity for which its content of the cont	e Accompl	orted in column (e) of F	t Purpo	DSes A contributed important	419,721 v to the
12 Subi 13 Tota See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate.  (I-B   Relationship of Activities to the Explain below how each activity for which its content of the cont	e Accompl	orted in column (e) of F	t Purpo	DSes A contributed important	419,721 v to the
12 Subi 13 Tota See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate.  (I-B   Relationship of Activities to the Explain below how each activity for which its content of the cont	e Accompl	orted in column (e) of F	t Purpo	DSes A contributed important	419,721 v to the
12 Subi 13 Tota See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate.  (I-B   Relationship of Activities to the Explain below how each activity for which its content of the cont	e Accompl	orted in column (e) of F	t Purpo	DSes A contributed important	419,721 v to the
12 Subi 13 Tota See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate.  (I-B   Relationship of Activities to the Explain below how each activity for which its content of the cont	e Accompl	orted in column (e) of F	t Purpo	DSes A contributed important	419,721 v to the
12 Subi 13 Tota See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate.  (I-B   Relationship of Activities to the Explain below how each activity for which its content of the cont	e Accompl	orted in column (e) of F	t Purpo	DSes A contributed important	419,721 v to the
12 Subi 13 Tota See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate.  (I-B   Relationship of Activities to the Explain below how each activity for which its content of the cont	e Accompl	orted in column (e) of F	t Purpo	DSes A contributed important	419,721 v to the
12 Subi 13 Tota See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate.  (I-B   Relationship of Activities to the Explain below how each activity for which its content of the cont	e Accompl	orted in column (e) of F	t Purpo	DSes A contributed important	419,721 v to the
12 Subi 13 Tota See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate.  (I-B   Relationship of Activities to the Explain below how each activity for which its content of the cont	e Accompl	orted in column (e) of F	t Purpo	DSes A contributed important	419,721 v to the
12 Subi 13 Tota See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate.  (I-B   Relationship of Activities to the Explain below how each activity for which its content of the cont	e Accompl	orted in column (e) of F	t Purpo	DSes A contributed important	419,721 v to the
12 Subi 13 Tota See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate.  (I-B   Relationship of Activities to the Explain below how each activity for which its content of the cont	e Accompl	orted in column (e) of F	t Purpo	DSes A contributed important	419,721 v to the
12 Subi 13 Tota See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate.  (I-B   Relationship of Activities to the Explain below how each activity for which its content of the cont	e Accompl	orted in column (e) of F	t Purpo	DSes A contributed important	419,721 v to the
12 Subi 13 Tota See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate.  (I-B   Relationship of Activities to the Explain below how each activity for which its content of the cont	e Accompl	orted in column (e) of F	t Purpo	DSes A contributed important	419,721 v to the
12 Subi 13 Tota See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate.  (I-B   Relationship of Activities to the Explain below how each activity for which its content of the cont	e Accompl	orted in column (e) of F	t Purpo	DSes A contributed important	143,167 419,721  y to the istructions)

Yes No

## Rart XVIII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

des	the organization directl scribed in section 501(c) ating to political organiza	of the Code (o	ngage in any of ther than section	the following wi n 501(c)(3) orgai	th any other on hizations) or in	rganizatior n section 5	า 27,				
<b>a</b> Tra	nsfers from the reportin	g foundation to	a noncharitable	exempt organiz	ation of						
(1)	Cash								1 a (1)		Х
(2)	Other assets								`1 a (2)		Х
<b>b</b> Oth	ner transactions							[			
(1)	Sales of assets to a no	ncharitable exe	mpt organizatio	n					1 b (1)		Х
(2)	Purchases of assets fro	om a noncharita	able exempt orga	anızatıon				[	1 b (2)		Х
(3)	Rental of facilities, equ	iipment, or othe	r assets					[	1 b (3)		Х
(4)	Reimbursement arrang	ements							1 b (4)		Х
(5)	Loans or loan guarante	ees						[	1 b (5)		Х
(6)	Performance of service	es or membersh	ip or fundraising	solicitations					1 b (6)		Х
<b>c</b> Sha	aring of facilities, equipr	ment, mailing lis	sts, other assets	, or paid employ	ees			Į	1 c		Х
d If the the any	ne answer to any of the goods, other assets, or so transaction or sharing  (b) Amount involved	arrangement, s	complete the fo the reporting four how in column (	<b>d)</b> the value of the	ne goods, othe	er assets, o	ays show the fair market vor services r	eceived	<u>t</u>		
N/A	(b) Amount mvoived	(c) Harrie	or noncharitable exer	inpr organization	(4) 505011	ipaon or a and	, or o, transastro	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	maning arran	igomoni	
N/ A	<del></del>	-				_					
	- " .	-				-					
				-							
des	he foundation directly or in scribed in section 501(c) Yes,' complete the follow	of the Code (o	ther than section	n 501(c)(3)) or ır	section 527?				Yes	X	No
	(a) Name of organiza	ition	<b>(b)</b> Type	e of organization		(c)	Description	of rela	itionship		
N/A											
				<u> </u>							
Sign	Under penalties of perjury, I declorerect, and complete Declaration	are that I have examon of preparer (other	ined this return, inclu than taxpayer) is bas	ding accompanying so ed on all information	hedules and stater of which preparer h	ments, and to nas any knowle	the best of my k	knowledge	May the I	RS disc	uss
Here	Signature of officer or trustee	/ PAG	no ·	Date J	Dire Title	ctor			preparer See instri		no No
	Print/Type preparer's n	ame	Preparer's	Stopatyle	- Date	1/12/11/11	Check	X ıf	PTIN		
Paid	Eric Thomse	en	Eric	Thomsen		1/13/18	self-employ	yed	P00752	266	
Prepare			HOMSEN LAW	OFFICE	•		Firm's EIN				
Use Or	· .	2447 SUNFI	_							_	
	-	MUSCATINE,	IA 52761-	-9399			Phone no	<u>563-</u> 2	260-13 <u>9</u>	97	
BAA									Form <b>99</b>	0-PF (	2017)

2017.	Federal Statements		
Client 6865	THE HOWE FOUNDATION	42-1395312	
11/12/18		05 31PM	
Statement 1 Form 990-PF, Part I, Line 18 Taxes			
EXCISE TAXES	(a) (b) Net (c)  Expenses per Books Investment Adjusted Net Income  S 69,028.  Total \$ 69,028. \$ 0. \$ 0.	(d) Charitable Purposes  \$ 0.	
Statement 2 Form 990-PF, Part I, Line 23 Other Expenses			
INVESTMENT FEES	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income \$ 11,702. \$ 11,702.	(d) Charitable Purposes	
MISC	Total $\frac{19,714.}{\$ 31,416.} \frac{\$ 11,702.}{\$ 0.}$	\$ 0.	
Statement 3 Form 990-PF, Part II, Line 22 Other Liabilities Rounding		1.	
	Total <u>\$</u>	1.	
Statement 4 Form 990-PF, Part III, Line 3 Other Increases			
ADJUSTMENT TO EQUITY FOR ADD	'L BASIS AT 7/1/17  Total \$\frac{\\$}{\\$}	52,355. 52,355.	
Statement 5 Form 990-PF, Part III, Line 5 Other Decreases			
ROUNDING	Total <u>\$</u>	1.	

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2017.	Federal Stat	tements		Page 2
Client 6865	THE HOWE FOUNDATION		•	<b>42</b> -13 <b>9</b> 5312
11/12/18				05 31PM
Statement 6 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				
Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant	<u>Amount</u>
WESLEY UNITED METHODIST CHURCH 400 IOWA AVENUE MUSCATINE IA 52761	NONE	PUBLIC	BUILDING RENOVATION	\$ 80,000.
ROCK IN PREVENTION 7628 HICKMAN ROAD DES MOINES IA 50324	NONE	PUBLIC	GENERAL OPERATIONS	25,000.
FLICKINGER LEARNING CENTER 413 MULBERRY AVENUE MUSCATINE IA 52761	NONE	PUBLIC	GENERAL OPERATIONS	24,000.
FRIENDS OF GRIST MILL PO BOX 1205 MUSCATINE IA 52761	NONE	PF	GENERAL SUPPORT	500.
MUSCATINE BEYOND 2000 2673 NORTHWOOD DRIVE MUSCATINE IA 52761	NONE	PC	GENERAL SUPPORT	200,000.
HOLY FAMILY CHURCH 505 17TH ST SE AUBURN WA 98002	NONE	PC	GENERAL SUPPORT	3,000.
PLANNED PARENTHOOD 818 5TH ST, STE 200 DES MOINES IA 50309	NONE	PC	GENERAL SUPPORT	1,000.
HOOVER PRESIDENTIAL LIBRARY 302 PARKSIDE DRIVE WEST BRANCH IA 52358	NONE	PC	GENERAL SUPPORT	25,000.
UNITED WAY 208 W 2ND STREET, STE 203 MUSCATINE IA 52761	NONE	PC	GENERAL SUPPORT	1,000.
			Total	\$ 359,500.

4 . in. 1

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

Department of the Treasury Internal Revenue Service

Name of the organization

## **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

2017

Employer identification number

THE HOWE FOUNDATION		42-1395312	
Organization type (check one)			
Filers of:	Section:		
Form 990 or 990-EZ	501(c)( ) (enter number) organization		
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a	private foundation	
	527 political organization		
Form 990-PF	X 501(c)(3) exempt private foundation		
FOIII 330-FF			
	4947(a)(1) nonexempt charitable trust treated as a priva	ite foundation	
	501(c)(3) taxable private foundation		
Check if your organization is covered by the <b>General</b>	Rule or a Special Rule.		
Note. Only a section 501(c)(7), (8), or (10) orga	inization can check boxes for both the General Rule and a S	pecial Rule See instructions	
General Rule			
X For an organization filing Form 990, 990-EZ	., or 990-PF that received, during the year, contributions tota te Parts I and II. See instructions for determining a contribut	ling \$5,000 or more (in money or	
property) from any one contributor Comple	te i arts i and ii Gee instructions for determining a contribut	or s total contributions	
Special Rules		•	
For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations			
under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II			
Form 990, Part VIII, line 1h, or (ii) Form 990	D-EZ, line 1 Complete Parts I and II	270 of the amount off (i)	
For an organization described in section 50	1(c)(7), (8), or (10) filing Form 990 or 990-EZ that received fi	rom any one contributor.	
during the year, total contributions of more purposes, or for the prevention of cruelty to	1(c)(7), (8), or (10) filing Form 990 or 990-EZ that received fithan \$1,000 exclusively for religious, charitable, scientific, lit children or animals. Complete Parts I, II, and III	erary, or educational	
	, and an an an an an an an an an an an an an		
For an organization described in section 50	1(c)(7), (8), or (10) filing Form 990 or 990-EZ that received fi	rom any one contributor.	
during the year, contributions exclusively for	r religious, charitable, etc., purposes, but no such contribution	ons totaled more than	
\$1,000 If this box is checked, enter here the	e total contributions that were received during the year for a	n <i>exclusively</i> religious,	
	ly of the parts unless the <b>General Rule</b> applies to this organible, etc., contributions totaling \$5,000 or more during the yea		
ic reserved heriexerasively religious, charitas	the year and the second total and the year	•	
<b>Caution.</b> An organization that isn't covered by t	he General Rule and/or the Special Rules doesn't file Sched e 2, of its Form 990, or check the box on line H of its Form 9	ule B (Form 990, 990-EZ, or 990-EZ or on its Form 990-PF	
Part I, line 2, to certify that it doesn't meet the	filing requirements of Schedule B (Form 990, 990-EZ, or 990	1-PF)	

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

1 of Part I

Name of organization

THE HOWE FOUNDATION

Employer identification number 42-1395312

Part I	<b>Contributors</b> (see instructions) Use duplicate copies of Part I if additional space	is needed	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	STANLEY M HOWE-FROM DECEDENT'S IRA 101 W MISSISSIPPI DR; STE 600	\$195,485.	Person X  Payroll   Noncash
	MUSCATINE, IA 52761		(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$2 <u>,255,475.</u>	Person Payroll Noncash X  (Complete Part II for
	MUSCATINE, IA 52761	<b>(2)</b>	noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
·		\$	Person Payroll Complete Part II for noncash contributions Part II for noncash contributions Part II for noncash contributions Part II for noncash contributions Part II for noncash contributions Part II for noncash contributions Part II for noncash contributions Part II for noncash contributions Part II for noncash contributions Part II for noncash contributions Part II for noncash Contributions Part II for nonc
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions )
		<u> </u>	

Page

1 to

1 of Part II

THE HOWE FOUNDATION

42-1395312

Employer identification number

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	PUBLICLY TRADED SECURITES PER BROKERAGE	-	
		\$2,255,475.	8/29/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		-	
		]  \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		-	,
	<u> </u>	  \$ 	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	<u> </u>	-	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		]  \$	
BAA	Sch	   edule B (Form 990, 990-E2	or 990-PE) (201

1 to

1 of Part III

Name of organ	nization WE FOUNDATION		Employer identification number 42-1395312	
		he year from any one contributo ompleting Part III, enter the total of (Enter this information once. See ii	ations described in section 501(c)(7), (8), or. Complete columns (a) through (e) and exclusively religious, charitable, etc.	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	N/A			
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d)  Description of how gift is held	
	(e) Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	(e) Transfer of gift Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	L		<del> </del>	

(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)