

For calendar year 2018, or tax year beginning 01-01-2018, and ending 12-31-2018

Name of foundation FARRER ENDOWMENT FOUNDATION		A Employer identification number 42-1214699	
Number and street (or P O box number if mail is not delivered to street address) P O BOX 1567		Room/suite	B Telephone number (see instructions) (641) 423-5154
City or town, state or province, country, and ZIP or foreign postal code MASON CITY, IA 504021567		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <div><input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change</div>		D 1. Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) <b>\$ 5,624,889</b>	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis )	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)				
	2 Check <input checked="" type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities . . .	191,930	191,930		
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2) . . .		153,861		
	8 Net short-term capital gain . . . . .			0	
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less Cost of goods sold . . . . .				
	c Gross profit or (loss) (attach schedule) . . . . .	0			
	11 Other income (attach schedule) . . . . .	0			
	12 <b>Total.</b> Add lines 1 through 11 . . . . .	191,930	345,791	0	
	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule) . . . . .	17,942	17,942		17,942
	b Accounting fees (attach schedule) . . . . .	0			
	c Other professional fees (attach schedule) . . . . .	0			
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . .	8,152			
	19 Depreciation (attach schedule) and depletion . . .	0			
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .	0			
	24 <b>Total operating and administrative expenses.</b> Add lines 13 through 23 . . . . .	26,094	17,942		17,942
	25 Contributions, gifts, grants paid . . . . .	286,600			286,600
	26 <b>Total expenses and disbursements.</b> Add lines 24 and 25	312,694	17,942		304,542
	27 Subtract line 26 from line 12				
	a <b>Excess of revenue over expenses and disbursements</b>	-120,764			
	b <b>Net investment income</b> (if negative, enter -0-)		327,849		
	c <b>Adjusted net income</b> (if negative, enter -0-) . . .			0	

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			
		Beginning of year (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
Assets	1	Cash—non-interest-bearing . . . . .	4,741	12,244	12,244
	2	Savings and temporary cash investments . . . . .	301,449	220,434	220,431
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .		0	
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____		0	
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .			
	10a	Investments—U S and state government obligations (attach schedule)	79,575	71,456	45,371
	b	Investments—corporate stock (attach schedule) . . . . .	3,572,280	3,836,895	4,008,626
	c	Investments—corporate bonds (attach schedule) . . . . .	1,598,557	1,443,870	1,338,217
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____		0	
	12	Investments—mortgage loans . . . . .			
	13	Investments—other (attach schedule) . . . . .		0	
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____		0	
15	Other assets (describe ▶ _____)	0	0	0	
16	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	5,556,602	5,584,899	5,624,889	
Liabilities	17	Accounts payable and accrued expenses . . . . .			
	18	Grants payable . . . . .			
	19	Deferred revenue . . . . .			
	20	Loans from officers, directors, trustees, and other disqualified persons		0	
	21	Mortgages and other notes payable (attach schedule) . . . . .		0	
	22	Other liabilities (describe ▶ _____)	-3,600	-8,400	
	23	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	-3,600	-8,400	
Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>				
	24	Unrestricted . . . . .			
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>				
	27	Capital stock, trust principal, or current funds . . . . .			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds	5,560,202	5,593,299	
	30	<b>Total net assets or fund balances</b> (see instructions) . . . . .	5,560,202	5,593,299	
31	<b>Total liabilities and net assets/fund balances</b> (see instructions) .	5,556,602	5,584,899		

**Part III Analysis of Changes in Net Assets or Fund Balances**

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	5,560,202
2	Enter amount from Part I, line 27a . . . . .	2	-120,764
3	Other increases not included in line 2 (itemize) ▶ _____	3	153,861
4	Add lines 1, 2, and 3 . . . . .	4	5,593,299
5	Decreases not included in line 2 (itemize) ▶ _____	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	5,593,299

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
<b>1a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss) <span style="float:right;">{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }</span>	<b>2</b>	153,861
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 <span style="float:right;">{ }</span>	<b>3</b>	-505

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

**1** Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2017	291,392	5,901,606	0 049375
2016	302,051	5,562,263	0 054304
2015	302,767	5,694,577	0 053168
2014	285,998	5,846,613	0 048917
2013	251,326	5,524,231	0 045495

<b>2</b> Total of line 1, column (d) <span style="float:right;">{ }</span>	<b>2</b>	0 251259
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years <span style="float:right;">{ }</span>	<b>3</b>	0 050252
<b>4</b> Enter the net value of noncharitable-use assets for 2018 from Part X, line 5 <span style="float:right;">{ }</span>	<b>4</b>	5,986,110
<b>5</b> Multiply line 4 by line 3 <span style="float:right;">{ }</span>	<b>5</b>	300,814
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b) <span style="float:right;">{ }</span>	<b>6</b>	3,278
<b>7</b> Add lines 5 and 6 <span style="float:right;">{ }</span>	<b>7</b>	304,092
<b>8</b> Enter qualifying distributions from Part XII, line 4 <span style="float:right;">{ }</span>	<b>8</b>	304,542

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	3,278
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	0
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	3,278
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	0
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	3,278
<b>6</b>	Credits/Payments		
<b>a</b>	2018 estimated tax payments and 2017 overpayment credited to 2018	<b>6a</b>	8,400
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	8,400
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	<b>8</b>	1
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .	<b>9</b>	
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .	<b>10</b>	5,121
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2019 estimated tax</b> <input checked="" type="checkbox"/> 5,121 <b>Refunded</b> <input type="checkbox"/>	<b>11</b>	

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .	<b>1a</b>	No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). . . . . <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	<b>1b</b>	No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<b>1c</b>	No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities</i>	<b>2</b>	No
<b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .	<b>3</b>	No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>4a</b>	No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>4b</b>	
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T</i>	<b>5</b>	No
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	<b>6</b>	Yes
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i> . . . . .	<b>7</b>	Yes
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> IA _____		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i> .	<b>8b</b>	Yes
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2018 or the taxable year beginning in 2018? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i> . . . . .	<b>9</b>	No
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> . . . . .	<b>10</b>	No

**Part VII-A Statements Regarding Activities** (continued)

<b>11</b>	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions. . . . .	<b>11</b>		<b>No</b>
<b>12</b>	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions. . . . .	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>►</b> N/A	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of <b>►</b> HEINY LAW FIRM PLC Telephone no <b>►</b> (641) 423-5154			
	Located at <b>►</b> 11 FOURTH ST NE MASON CITY IA ZIP+4 <b>►</b> 50401			
<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here . . . . . <b>►</b> <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . <b>►</b> <b>15</b>			
<b>16</b>	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . . See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country <b>►</b>	<b>16</b>	<b>Yes</b>	<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			<b>Yes</b>	<b>No</b>
<b>1a</b>	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions. . . . . <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. <b>►</b> <input type="checkbox"/>	<b>1b</b>		
<b>c</b>	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018? . . . . .	<b>1c</b>		<b>No</b>
<b>2</b>	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
<b>a</b>	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <b>►</b> 20____, 20____, 20____, 20____			
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions). . . . .	<b>2b</b>		
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here <b>►</b> 20____, 20____, 20____, 20____			
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2018). . . . .	<b>3b</b>		
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>		<b>No</b>
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	<b>4b</b>		<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required** (continued)

		Yes	No
<b>5a</b>	During the year did the foundation pay or incur any amount to		
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<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.		<b>5b</b>
<b>c</b>	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)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>6a</b>	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>b</b>	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870		<b>6b</b> No
<b>7a</b>	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>b</b>	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		<b>7b</b>
<b>8</b>	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

<b>1 List all officers, directors, trustees, foundation managers and their compensation. See instructions</b>				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
COLLIN DAVISON MASON CITY, IA 50401	PRESIDENT 7 00	0	0	0
FRANK B INGRAM MASON CITY, IA 50401	V-P, TREASURER 12 00	0	0	0
GERALD M STAMBAUGH MASON CITY, IA 50401	SEC'Y 7 00	0	0	0
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b>				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
<b>Total number of other employees paid over \$50,000.</b>				<b>0</b>

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**
**3 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
NONE		
<b>Total</b> number of others receiving over \$50,000 for professional services. . . . . ►		0

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
<b>1</b>	
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	
<b>Total.</b> Add lines 1 through 3 . . . . . ►	

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	6,069,071
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	8,198
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	6,077,269
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	6,077,269
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	91,159
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	5,986,110
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	299,306

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	299,306
<b>2a</b>	Tax on investment income for 2018 from Part VI, line 5.	<b>2a</b>	3,278
<b>b</b>	Income tax for 2018 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	3,278
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	296,028
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	
<b>5</b>	Add lines 3 and 4.	<b>5</b>	296,028
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	296,028

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	304,542
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	304,542
<b>5</b>	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.	<b>5</b>	3,278
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	301,264

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.



**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
<b>1</b> Distributable amount for 2018 from Part XI, line 7				296,028
<b>2</b> Undistributed income, if any, as of the end of 2018				
<b>a</b> Enter amount for 2017 only. . . . .			189,574	
<b>b</b> Total for prior years 20____, 20____, 20____				
<b>3</b> Excess distributions carryover, if any, to 2018				
<b>a</b> From 2013. . . . . 0				
<b>b</b> From 2014. . . . . 0				
<b>c</b> From 2015. . . . . 0				
<b>d</b> From 2016. . . . . 0				
<b>e</b> From 2017. . . . . 0				
<b>f</b> Total of lines 3a through e. . . . . 0	0			
<b>4</b> Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ 304,542				
<b>a</b> Applied to 2017, but not more than line 2a			189,574	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .				
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2018 distributable amount. . . . .				114,968
<b>e</b> Remaining amount distributed out of corpus	0			
<b>5</b> Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a) )				
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .				
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019 . . . . .				181,060
<b>7</b> 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). . . . .				
<b>8</b> Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions). . . .	0			
<b>9</b> Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a . . . . .	0			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2014. . . . . 0				
<b>b</b> Excess from 2015. . . . . 0				
<b>c</b> Excess from 2016. . . . . 0				
<b>d</b> Excess from 2017. . . . . 0				
<b>e</b> Excess from 2018. . . . . 0				

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. . . . . ▶

**b** Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

**2a** Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .

	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)**

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )  
NONE

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest  
NONE

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

**a** The name, address, and telephone number or e-mail address of the person to whom applications should be addressed  
GERALD M STAMBAUGH SECRETARY  
P O BOX 1567  
MASON CITY, IA 504021567  
(641) 423-5154

**b** The form in which applications should be submitted and information and materials they should include  
WRITTEN REQUEST IN SPECIFIC FORM

**c** Any submission deadlines  
JANUARY THRU APRIL 30 EACH YEAR

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors  
NONE

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total</b> . . . . .			▶ <b>3a</b>	
<b>b</b> <i>Approved for future payment</i>				
<b>Total</b> . . . . .			▶ <b>3b</b>	

Enter gross amounts unless otherwise indicated

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2018)

**Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

<b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		<b>Yes</b>	<b>No</b>
<b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of			
<b>(1)</b> Cash. . . . .	<b>1a(1)</b>		<b>No</b>
<b>(2)</b> Other assets. . . . .	<b>1a(2)</b>		<b>No</b>
<b>b</b> Other transactions			
<b>(1)</b> Sales of assets to a noncharitable exempt organization. . . . .	<b>1b(1)</b>		<b>No</b>
<b>(2)</b> Purchases of assets from a noncharitable exempt organization. . . . .	<b>1b(2)</b>		<b>No</b>
<b>(3)</b> Rental of facilities, equipment, or other assets. . . . .	<b>1b(3)</b>		<b>No</b>
<b>(4)</b> Reimbursement arrangements. . . . .	<b>1b(4)</b>		<b>No</b>
<b>(5)</b> Loans or loan guarantees. . . . .	<b>1b(5)</b>		<b>No</b>
<b>(6)</b> Performance of services or membership or fundraising solicitations. . . . .	<b>1b(6)</b>		<b>No</b>
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees. . . . .	<b>1c</b>		<b>No</b>
<b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column <b>(b)</b> should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column <b>(d)</b> the value of the goods, other assets, or services received.			

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes ☒ No

**b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

<b>Sign Here</b>	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 taxpayer) is based on all information of which preparer has any knowledge.	2019-02-26	*****
	Signature of officer or trustee	Date	Title

May the IRS discuss this return with the preparer shown below (see instr )? ☐ Yes ☐ No

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	F B INGRAM		2019-04-15		P01220068
	Firm's name ► HEINY MCMANIGAL LAW FIRM PLC				Firm's EIN ►
	Firm's address ► PO BOX 1567 MASON CITY, IA 504021567				Phone no (641) 423-5154

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1	100 FIRST TRUST HI YLD #2	P	2012-02-22	2018-02-21
1	365 SH EXXON MOBIL	P	2005-09-13	2018-05-15
	200 SH FIRST TRUST PORT #3	P	2012-02-23	2018-08-20
	50 SH ADVISORS ASSET MGMT #42	P	2001-12-22	2018-08-22
	201 SH ADVISORS ASSET MGMT #46	P	2012-02-02	2018-08-22
	GOLDMAN SACS	P	2018-06-05	2018-12-12
	CAPITAL GAIN DIVIDENDS	P	2017-12-31	2018-12-31

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
3,936	0	9,409	-5,473
29,410	0	22,743	6,667
8,758	0	26,905	-18,147
2,488	0	6,069	-3,581
10,430	0	38,503	-28,073
0	0	505	-505
202,973	0	0	202,973

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
0	0	0	-5,473
0	0	0	6,667
0	0	0	-18,147
0	0	0	-3,581
0	0	0	-28,073
0	0	0	-505
0	0	0	202,973

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
TLC BROADCASTING CORPORATION 600 FIRST STREET N W MASON CITY, IA 50401		501C3	DIGITALCONVERSION	15,000
CHARLIE BROWN PRESCHOOL 600 FIRST STREET N W MASON CITY, IA 50401		501C3	IMPROVEMENTS TOMASON CITY & CLEAR LAKE LOCATIONS	7,500
COMMUNITY KITCHEN N IP O BOX 58 MASON CITY, IA 50402		501C3	FOOD & SUPPLIES	4,500
<b>Total . . . . . ▶ 3a</b>				286,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MEALS ON WHEELSP O BOX 58 MASON CITY, IA 50402		501C3	MEAL EXPENSE FOR DELIVERY	4,000
YOUTH AND SHELTER SERVICES 50 NORTH EISENHOWER AVE MASON CITY, IA 50401		501C3	ON-GOING SUPPORT	20,000
NIACC FOUNDATION 500 COLLEGE DRIVE MASON CITY, IA 50401		501C3	KEEPING NIACCFIRST CAMPAIGNFARRER SCHOLARSHIP	30,000
<b>Total . . . . . ▶ 3a</b>				286,600



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
NORTH IOWA VOCATIONAL CENTER INC 1225 SOUTH HARRISON AVE MASON CITY, IA 50401		501C3	COMMUNITY CONNECTIONSYOUNG ADULTPROGRAMS	6,000
NORTH CENTRAL IA AG IN THE CLASS PROGRAM 65 STATE STREET PO BOX 68 GARNER, IA 504380068		501C3	AGRICULTURE EDUCATION	2,000
NORTH IOWA BAND FESTIVAL FD 9 FEDERAL AVE N MASON CITY, IA 50401		501C3	TRAVEL STIPENDS FOR HIGH SCHOOLMARCHING BANDS	7,000
<b>Total . . . . . ▶ 3a</b>				286,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HANCOCK CO AGRICULTURAL MUSEUM 2090 JAMES AVENUE BRITT, IA 50423		501C3	BUILDINGADDITION	2,000
CITY OF MASON CITY PD303 2ND ST SE MASON CITY, IA 50401		501C3	UPGRADE SOFTINTERVIEWROOM	1,000
CITY OF SWALEDALE FD 3 WALNUT COURT ROCKWELL, IA 50469		501C3	PURCHASE 4 NEW SETS OF STRUCTURALFIRE FIGHTING GEAR	5,000
<b>Total . . . . . ▶ 3a</b>				286,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
NIAD CENTER FOR HUMAN DEV P O BOX 656 MASON CITY, IA 50402		501C3	ENHANCE ACCESSIBILITYTO MAIN OFFICE	7,500
NORTH IOWA COMMUNITY ACTION P O BOX 1627 MASON CITY, IA 50401		501C3	SUPPORT SELFSUFFICIENCY PROGRAM	35,000
WINNEBAGO HISTORIAL SOCIETY P O BOX 27 FOREST CITY, IA 504360027		501C3	CONVERSION OFYARD LIGHTS TOLED	3,000
<b>Total . . . . . ▶ 3a</b>				286,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CITY OF MASON CITY NORTH IOWA DIVERSITY TEAM MASON CITY, IA 50401		501C3	ART/WRITINGCONTEST	500
RIVER CITY SOCIETY FOR HISTORIC PRESERVATION 431 1ST STREET SE MASON CITY, IA 50401		501C3	FENCE	2,000
LUTHERAN SERVICES IN IOWA INC 3116 UNIVERSITY AVE DES MOINES, IA 50311		501C3	SUPPORT EARLYCHILDHOODPROGRAM	5,000
<b>Total . . . . .</b> ► <b>3a</b>				286,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
MASON CITY PUBLIC LIBRARY FDN 225 2ND ST SE MASON CITY, IA 50401		501C3	YOUTH SERVICESPROGRAMMING	1,500
NEWMAN CATHOLIC SCHOOLS 2445 19TH ST SW MASON CITY, IA 50401		501C3	PURCHASE I-PADS FOR PRE-KCLASSROOM	3,800
CITY OF ROCKWELL FIRE DEPT 213 JEFFERSON STREET ROCKWELL, IA 50469		501C3	PURCHASE FIRE HOSESFITTINGS ANDNOZZLES	2,500
<b>Total . . . . . ▶ 3a</b>				286,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
CITY OF MASON CITY78 S GEORGIA MASON CITY, IA 50401		501C3	REPLACE LIGHTS ATTACHED TO RIFLES	2,000
NORTHERN LIGHTS ALLIANCE FOR THE HOMELESS INC 202 1ST STREET N W MASON CITY, IA 50401		501C3	OPERATIONS	5,000
MOHAWK ARCHERY1603 PLYMOUTH RD MASON CITY, IA 50401		501C3	PURCHASETARGET WALL	2,000
<b>Total . . . . . ▶ 3a</b>				286,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ELDERBRIDGE AGENCY ON AGING 22 NORTH GEORGIA AVE SUITE 216 MASON CITY, IA 50401		501C3	SUPPORT BENEFITENROLLMENT CTR	5,000
MERCY MEDICAL CENTER FOUNDATION 1000 4TH STREET S W MASON CITY, IA 50401		501C3	SCHOLARSHIPS ANDSTUDENT LOANSFOR MERCY NURSES	10,000
MASON CITY CHAMBER OF COMMERCE FDN 9 NORTH FEDERAL AVENUE MASON CITY, IA 50401		501C3	OPERATIONALEXPENSES	2,500
<b>Total . . . . . ▶ 3a</b>				286,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
RIVER CITY SCULPTURES ON PARADE INC 9 NORTH FEDERAL AVENUE MASON CITY, IA 50401		501C3	EXPAND MURALPROJECT	5,000
CENTRAL GARDENS OF NORTH IOWA INC P O BOX 735 CLEAR LAKE, IA 50428		501C3	OPERATIONAL FUNDS	2,000
CERRO GORDO COUNTY IOWA 22 NORTH GEORGIA AVE MASON CITY, IA 50401		501C3	SENIORHEALTHCLINICS	2,500
<b>Total . . . . . ▶ 3a</b>				286,600



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CARING PREGNANCY CENTER INC 830 15TH STREET SW MASON CITY, IA 50401		501C3	PURCHASE ITEMSFOR BABY BUCKSPROGRAM	4,000
THE SALVATION ARMY 10755 BURR STREET OMAHA, NE 68114		501C3	STEPPING UP BOOTS PROGRAM	2,000
CITY OF SHEFFIELD PUBLIC LIBRARY P O BOX 616 SHEFFIELD, IA 504750616		501C3	NEW CARPET	1,000
<b>Total . . . . .</b> ► <b>3a</b>				286,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
APPLE DAYCARE INCP O BOX 693 SHEFFIELD, IA 504750693		501C3	FURNITURE	1,300
LINN GROVE RECREATION CENTER INC 2 WALNUT COURT ROCKWELL, IA 50469		501C3	UPGRADE AND ENHANCEMENTS	4,000
HABITAT FOR HUMANITY OF NORTH CENTRAL IOWA INC 517 1ST STREET NW MASON CITY, IA 50401		501C3	PURCHASE MODULAR RAMP	3,000
<b>Total . . . . . ▶ 3a</b>				286,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
WEST FORK COMMUNITY SCHOOL DISTRICT 404 BRICKYARD ROAD SHEFFIELD, IA 50475		501C3	UNIFORMS SUPPLIES	1,500
BOY SCOUTS OF AMERICA 2929 AIRPORT BLVD WATERLOO, IA 50703		501C3	SUPPORT POSITIVEYOUTH ACTIVITIES	2,000
UNITED WAY OF NORTH CENTRAL IOWA P O BOX 1465 MASON CITY, IA 504021465		501C3	UPGRADE PHONE SYSTEM	2,000
<b>Total . . . . . ▶ 3a</b>				286,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FRIENDS OF THE 457 CITY OF MASON CITY 365 SUMAC ROAD MASON CITY, IA 50401		501C3	EXTENSION OFCANNONBALL GARDENS	5,000
FRIENDS OF WINNEBAGO CO COUNTY CONSERVATION FD INC 34496 110TH AVENUE FORSET CITY, IA 50436		501C3	CONSTRUCTION OFEDUCATIONCENTER	10,000
CHARLES CITY COMM DISTRICT 500 NORTH GRAND AVENUE CHARLES CITY, IA 50616		501C3	CONSTRUCT SOFTBALL AND BASEBALL FIELDS	10,000
<b>Total . . . . . ▶ 3a</b>				286,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MASON CITY CHAMBER OF COMMERCE FD 9 NORTH FEDERAL AVENUE MASON CITY, IA 50401		501C3	FUNDING RESTORATIONOF EGLOFF HOUSE	5,000
FOSSIL & PRAIRIE CENTER FD P O BOX 54 CHARLES CITY, IA 50616		501C3	CABIN PROJECT	2,000
CITY OF ROCKFORD PUBLIC LIBRARY 202 WEST MAIN AVENUE ROCKFORD, IA 50469		501C3	COMPLETIONS OFRENOVATIONS	2,500
<b>Total . . . . . ▶ 3a</b>				286,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CLEAR LAKE ARTS COUNCIL 17 SOUTH 4TH STREET CLEAR LAKE, IA 50428		501C3	COMPLETION OF OUTDOOR COURTYARD AND STUDIO	1,000
THE CHORAL MUSIC GUILD INC 622 EAST STATE STREET MASON CITY, IA 50401		501C3	TOWARDS 10% OF COST OF GRAND PIANO	3,000
MASON CITY FAMILY YMCA 1840 SOUTH MONROE AVENUE MASON CITY, IA 50401		501C3	EQUIPMENT FOR YMCA KID FIT PROGRAM	2,000
<b>Total . . . . .</b> ► <b>3a</b>				286,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CITY OF BRITT IA 804 1ST AVENUE NORTHWEST BRITT, IA 50423		501C3	NEW PLAYGROUNDEQUIPMENT	5,000
ONE VISION 1200 NORTH 9TH STREET WEST CLEAR LAKE, IA 50428		501C3	SUPPORT DEVELOPMENTOF LEADERS	10,000
MANLY HEAT SOFTBALL 402 4TH STREET NORTHEAST NORA SPRINGS, IA 50458		501C3	SOFTBALLEQUIPMENT	2,000
<b>Total . . . . .</b> ► <b>3a</b>				286,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
NORTH IOWA FAIR ASSOCIATION 3799 4TH STREET SOUTHWEST MASON CITY, IA 50401		501C3	AIR CONDITIONING SYSTEM FORALL SEASONS BUILDING	3,000
ACCESS INCORPORATED 20 5TH STREET NORTHWEST HAMPTON, IA 50441		501C3	PURCHASE 4USED VEHICLES	2,000
STEBENS CHILDRENS THEATRE 616 NORTH DELAWARE AVENUE MASON CITY, IA 50401		501C3	SCHOLARSHIPPROGRAM	2,500
<b>Total . . . . . ▶ 3a</b>				286,600



## TY 2018 Investments Corporate Bonds Schedule

**Name:** FARRER ENDOWMENT FOUNDATION

**EIN:** 42-1214699

### Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
VAN KAMPEN INCOME TRUSTS 43,47,49,74,75	161,229	185,253
50 CLAYMORE SER GUG CORP SER 15	22,845	17,247
50 CLAYMORE SER GUG CORP SER 17	28,815	21,931
45 CLAYMORE SER GUG CORP SER 21	27,203	20,232
62 CLAYMORE SER GUG CORP SER 24	52,829	43,887
60 ADVISORS ASSET MGMT 59	19,712	13,744
40 ADVISORS ASSET MGMT 62	14,747	10,346
100 INVESCO INV GRD TR SER 16	95,534	87,802
56 1ST TR PORT SER 7	44,834	35,454
20 GUGG SHRT DUR HI YLD SER 29	9,136	6,548
50 ADVISORS ASSET MGMT 73	31,030	23,172
25 ADVISORS ASSET MGMT 77	21,783	17,749
25 ADVISORS ASSET MGMT 88	27,056	22,268
15 ADVISORS ASSET MGMT 89	14,878	13,028
50 ADVISORS ASSET MGMT 91	53,978	50,311
25 INVESCO INV GRADE SER 38	27,237	25,957
25 ADVISORS ASSET MGMT 82	25,880	22,130
5000 FIRST TRUST EQUITY INC 49	46,652	52,000
39 INVESCO INV GRD TR SER 10	39,635	38,591
20 INVESCO INV GRF TR SER 44	22,344	20,582

**Investments Corporate Bonds Schedule**

<b>Name of Bond</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
20 ADVISORS ASSET MGMT 93	21,763	20,051
50 ADVISORS ASSET MGMT 100	50,686	49,796
40 ADVISORS ASSET MGMT SER 111C	40,966	38,127
35 INVESCO INV GRD TR SER 55	36,565	34,867
25 INVESCO INV GRF TR SER 14	25,532	24,574
25 INVESCO INV GRD TR SER 57	27,124	25,231
10 INVESCO AMER BDS SER 67	10,637	9,690
20 ACT NAV HIGH INCOME 112	20,992	19,449
25 ACT NAV HIGH INCOME 113	26,012	24,133
25 FIRST TRUST HIGH INC SER 23	26,763	24,418
35 FIRST TRUST PORT SER 25	36,916	32,942
25 FIRST TRUST BOND SER 12	23,329	21,869
25 INVESCO INV GRD TR SER 26	26,992	24,582
30 INVESCO INV GRD TR SER 27	32,773	29,498
25 INVESCO INV GRD TR SER 61	27,711	25,618
3000 INVESCO EURO DIV 2017-2	29,818	26,820
30 ADVISORS ASSET MGMT SER 104	30,421	28,459
25 FIRST TRUST HIGH INC SER 26	25,680	24,058
50 INVESCO INV GRD SER 30	53,494	48,772
30 ADVISORS ASSET MGMT SER 128	30,290	27,743

**Investments Corporate Bonds Schedule**

<b>Name of Bond</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
50 INVESCO CORP TR SER33C	52,049	49,288

**TY 2018 Investments Corporate Stock Schedule**

**Name:** FARRER ENDOWMENT FOUNDATION  
**EIN:** 42-1214699

**Investments Corporation Stock Schedule**

Name of Stock	End of Year Book Value	End of Year Fair Market Value
300 SH CHEVRON CORPORATION	16,649	32,637
500 SH EXXON MOBIL CORPORATION	31,153	34,095
DAVIS NY VENTURE FUND	289,038	200,361
DWS HIGH INCOME FUND A	155,347	112,729
EURO PACIFIC GROWTH FD	75,715	62,315
FRANKLIN UTILITY FUND	57,088	96,329
GROWTH FUND OF AMERICA	248,043	297,530
INCOME FUND OF AMERICA	372,235	436,857
INVESTMENT CO OF AMERICA	434,191	482,630
TEMPLETON GLOBAL GOVT FD	187,856	176,261
TEMPLETON GLOB TOTAL FD A	175,000	161,645
WASHINGTON MUTUAL FD	500,060	563,826
FRANKLIN GROWTH FUND	112,047	225,296
FRANKLIN INCOME FUND	230,856	217,398
FRANKLIN SMALL CAP FUND	40,606	37,252
1000 PS BUS PARKS 5.75% PFD	21,219	23,450
1000 CAPITAL ONE PFD 6.2%	26,366	25,270
1000 QWEST CORP PFD 6.625%	25,000	18,850
1500 JP MORGAN PFD 6.1%	37,500	38,310
1000 BANK OF AMERICA PFD 6.5%	25,000	25,380
2000 WELLS FARGO PFD 6%	50,000	50,220
INTL GROWTH & INC FD	100,014	99,051
1000 CITIGROUP 6.3% PFD	26,769	25,500
1000 HUNTINGTON BANC 6.25% PFD	26,970	24,820
1000 U S CELLULAR CORP PFD	27,629	23,550
1000 PUBLIC STORAGE 5.4% PFD	25,000	22,800
1000 STORE CAPITAL CORP	23,750	28,310
300 FEDERAL RLTY INVT TRUST REIT	39,099	35,412
3774.472 FRANKLIN MUTUAL FD	78,207	90,587
6402.049 FRANKLIN MUTUAL INTERNATIONAL FD	100,000	81,754

# Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
2650.127 NEW PERSPECTIVE FD	110,166	99,830
1000 METLIFE INC 5.625% PFD	25,618	23,550
6184.869 C & S REALTY FUND	90,021	84,671
2000 BANK OF AMERICA 6% PFD	52,683	50,150

**TY 2018 Investments Government Obligations Schedule****Name:** FARRER ENDOWMENT FOUNDATION**EIN:** 42-1214699**US Government Securities - End  
of Year Book Value:**

71,456

**US Government Securities - End  
of Year Fair Market Value:**

45,371

**State & Local Government  
Securities - End of Year Book  
Value:****State & Local Government  
Securities - End of Year Fair  
Market Value:**

**TY 2018 Legal Fees Schedule****Name:** FARRER ENDOWMENT FOUNDATION**EIN:** 42-1214699

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
HEINY LAW FIRM PLC TAX PREPARATION & ACCOUNTING	17,942	17,942		17,942

**TY 2018 Other Increases Schedule**

**Name:** FARRER ENDOWMENT FOUNDATION  
**EIN:** 42-1214699

Description	Amount
CAPITAL GAINS	153,861



**TY 2018 Other Liabilities Schedule****Name:** FARRER ENDOWMENT FOUNDATION**EIN:** 42-1214699

Description	Beginning of Year - Book Value	End of Year - Book Value
FEDERAL TAX ESTIMATE	-3,600	-8,400

**TY 2018 Taxes Schedule****Name:** FARRER ENDOWMENT FOUNDATION**EIN:** 42-1214699

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX	8,152			