2949336209615

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury

	Inter	nal Reven	ue Service	► Go to	www.irs.gov/Form990 for instruction	ns and the latest in	iformation.		inspection
	Α	For the	2018 calend	dar year, or tax year be	eginning	, 2018, and endin	g		1
	В	Check if a	applicable	C			DE	mployer iden	tification number
~.			ess change	OUD INDV OF WI	ICTORY FOUNDATION IN	C		42-1344	202
031.		\vdash	- 1		N, 1041 W. 57TH ST.	C		elephone num	
V 1/1	/	Nam	e change	DAVENPORT, IA	52006			•	
- 11	ら っ	Initia	il return	DAVENFORI, IA	32800			<u>(563) 3</u>	44-4900
ļv	/	Final r	return/terminated						
		Ame	nded return				G G	ross receipts	\$ 254,779.
		\vdash	ication pending	F Name and address of prii	noinal officer		H(a) Is this a group		10
				•	·				
				SAME AS C ABOV			H(b) Are all subord If "No," attach	a list (see in	d? Yes No
	<u> </u>	Tax-exe	empt status	X 501(c)(3) 501(c)) () ▼ (insert no.) 49	47(a)(1) or 52%			
	J	Webs	ite: ► WW	W.OLVJFK.COM		· U/I	H(c) Group exempt	iion number 🕨	•
	ĸ¯	Form of	f organization	X Corporation Trust	Association Other ►	L Year of formati	on 1989	M State of	legal domicile IA
	Pa	rt l	Summar						
,	<u> </u>	1 B	riefly describ	be the organization's n	nission or most significant activi	ties TO PROVIDI	FEINANCIA	AT STIPP	מוזף דר חווף
	- 1				IC CHURCH, DAVENPORT				
	일	+		VICTORI CATIOL	IC SCHOOL, A MINISTE			T 17777	21V1E2 VID
	盲	2	Oun E.	VENNEDT CATUOR	TIC SCHOOL' W WINISIE	TI OF THE CHO	RCn.		
	<u>=</u>	_ =				,,-,		 - ·	
	ğ				ation discontinued its operation	•	ore than 25% o		_
	8				overning body (Part VI, line 1a)		•	3	8
	S				bers of the governing body (Par			4	8
	ij				ed in calendar year 2018 (Part V	7, line 2a)		5	0
	Activities & Governance			of volunteers (estimate	- ·	2		6	8
,	₹				om Part VIII, column (C), line 12	2		7a	<u>0.</u>
, Q	<u></u>	<u> </u>	et unrelated	business taxable inco	me from Form 990-T, line 38			7b	0.
<u>න</u> ද	Revenue				RECEIVED	IN CORRES	Prior Y	ear	Current Year
5 4	ا به ا	8 C	ontributions	and grants (Part VIII,	line 1h) IRS - (OSC - 19			218,971.
~ 2	<u> </u>			ice revenue (Part VIII,					
1 6 2019	ا چُ	10 In	ivestment in	come (Part VIII, colum	n (A), lines 3, 4, and 7d) CT 2	8 2019			35,808.
(ă	11 0	ther revenue	e (Part VIII, column (A)), lines 5, 6d, 8c, 9c, 10c, and Î	1e)			
\mathcal{L}	T	12 To	otal revenue	- add lines 8 through	i 11 (must equal Part VIII, colun	nn (A), line 12)			254,779.
DEC	8	13 ∖ G	rants and sii	milar amounts paid (Pa	art IX, column (A), line\$7(3)El	V, UTAH			36,000.
/					art IX, column (A), line 4)				50,000.
					oyee benefits (Part IX, column ((A) lines 5 10)			
4	ès s				-	(A), IIIIes 3-10).			
-	Ех <u>р</u> елувея	16a Pi	rofessional f	undraising fees (Part I	X, column (A), line 11e)				
~~*	뺭	b To	otal fundrais	ing expenses (Part IX,	, column (D), line 25) ►	2,204.			
N	<u> </u>	17 O	ther expense	es (Part IX. column (A), lines 11a-11d, 11f-24e)				9,756.
3					ust equal Part IX, column (A), li	ne 25)	<u> </u>	\longrightarrow	45,756.
~				expenses. Subtract lin		110 20)			
-		19 R	everiue iess	expenses. Subtract iiii	ie 18 from line 12		 		209,023.
4	200	т		D. 1 V 1 16			Beginning of C		End of Year
	Salan		•	Part X, line 16)			76	9,690.	889,427.
	욁			s (Part X, line 26)				0.	<u> </u>
	울찬	22 No	et assets or	fund balances. Subtrac	ct line 21 from line 20		76	9,690.	889,427.
Γ	Pai	rtill	Signature	e Block					
			-		s return Archiding accompanying scheduler	s and statements, and to ti	he best of my knowl	edge and help	ef it is true correct and
Č	comp	lete Decla	aration of prepar	er (other than officer) is baset	s return recluding accompanying schedules I on all information of which preparer has	any knowledge	Jose of my miom	/ 1	,,
-				T SEVINI	1001		10	27.1	PIAS
	Sig	_	Signature	e of officer	<i>y</i>		Date	 	-01 (
i	oig Her	11 11	TOCE	IDIY C CDCDY			CECDEMAD.	7,	
	ıcı	C	JOSE	PH C./ CREEN			SECRETAR	<u> </u>	
-					10	Tsu			DTIN DTIN
				eparer's name	Preparer's signature	Date	Check	□ "	PTIN
	Pai	d	JEANNE	PYLE SCOTT	JEANNE PYLE SCOTT	10/22/	19 self-en	nptoyed	P01248513
Preparer Firm's name ► PYLE SCOTT & ASSOCIATES, PLLC								<u> </u>	
		Only	Firm's addres				Firm's	EIN ► 47-	-1487852
		,		DAVENPORT,	IA 52807-2771		Phone	15.00	
7	Marr	the IDS	S discuss the		arer shown above? (see instruct			(303	X Yes No
_									
	SΑΑ	. For Pa	aperwork Re	eauction Act Notice, so	ee the separate instructions.	TEE	40101L 08/20/18		Form 990 (2018)

	CTORY FOUNDATION INC	42-1344392	Page 2
Rartill Statement of Program S	•	- ··	
	a response or note to any line in this Part III		
1 Briefly describe the organization's mi			
	JPPORT TO OUR LADY OF VICTORY CATHOLIC		
FOR ITS CURRENT MINISTF	RIES AND JOHN F. KENNEDY CATHOLIC SCHOO	L, A MINISTRY OF T	HE
CHURCH.			
			
, ,	ificant program services during the year which were not listed on t	he prior	
Form 990 or 990-EZ?	•	Yes	X No
If "Yes," describe these new services or			
_	g, or make significant changes in how it conducts, any progra	am services? Yes	X No
If "Yes," describe these changes on Sch			
4 Describe the organization's program section 501(c)(3) and 501(c)(4) organ and revenue, if any, for each program	service accomplishments for each of its three largest program nizations are required to report the amount of grants and allow in service reported.	i services, as measured by excations to others, the total exp	rpenses penses,
4a (Code.) (Expenses \$	36,000 including grants of \$ 36,000	.) (Revenue \$)
	TED \$36,000 TO OUR LADY OF VICTORY CAT		18 TO
	RELIGIOUS MISSION AND THE CATHOLIC GRA		
	T THE OTHER RELIGIOUS SERVICES.		
110112221 1112 10 2011 01			
4b (Code) (Expenses \$	including grants of \$) (Revenue \$)
4c (Code) (Expenses \$	including grants of \$) (Revenue \$	<u> </u>
/ (
4 d Other program services (Describe in S	Schedule O)		
(Expenses \$	including grants of \$) (Revenue	\$)	
4e Total program service expenses ►	36,000.		
BAA	TEEA0102L 08/03/18	Form 9	990 (2018)



		_	Yes	No					
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х						
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х						
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х					
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II.								
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III.								
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I								
7									
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х					
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х					
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х					
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable								
	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI.	11 a		Х					
	b Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		Х					
	c Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х					
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х					
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X					
	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		х					
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII .	12a		х					
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х					
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X					
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X					
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		X					
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		Х					
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		Х					
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (Å), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		X					
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18							
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G. Part III	19		X					
20	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H .	20a		X					
ŀ	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b							
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	x						

	1 1
PartilV Checklist of Required Schedules (con	atini ida 1
i-altitam Clieckiist ol Neddited Scheddies (CO/	IIIIIIIIIIIII

			Yes	No					
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2° If 'Yes,' complete Schedule I, Parts I and III	22		Х					
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		Х					
24	4a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a								
1	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b							
•	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c							
(Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d							
25	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		х					
ı	b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		_ X					
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II	26		Х					
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		Х					
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		- 1 mg.						
ā	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X					
1	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		<u> x</u>					
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х					
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X					
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х					
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х					
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II .	32		Х					
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		X					
	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		X					
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X					
t	olf 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		_					
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	36		X_					
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		<u> x</u>					
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O .	38	Х						
Par	tivi Statements Regarding Other IRS Filings and Tax Compliance								
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No.					
1 a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable								
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0								
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c							
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Form 990 (2018) OUR LADY OF VICTORY FOUNDATION INC

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No					
2	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State- ments, filed for the calendar year ending with or within the year covered by this return 2 a)							
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b							
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)								
3	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х					
1	b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	3 b							
4	a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?								
Į	b If 'Yes,' enter the name of the foreign country: ►								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	1							
5	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х					
ı	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X					
•	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c							
6	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х					
1	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b							
7	Organizations that may receive deductible contributions under section 170(c).	1							
i	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a							
	p If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b							
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		х					
	d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d								
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X					
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X					
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 q							
ŀ	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7,6							
8	Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	7 h							
•	organization have excess business holdings at any time during the year?	8							
9	Sponsoring organizations maintaining donor advised funds.								
	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a							
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b							
	Section 501(c)(7) organizations. Enter:								
	Initiation fees and capital contributions included on Part VIII, line 12	i		l					
ŀ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1							
11	Section 501(c)(12) organizations. Enter:	1		ŀ					
ā	Gross income from members or shareholders	<u> </u>		İ					
t	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)								
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
t	olf 'Yes,' enter the amount of tax-exempt interest received or accrued during the year]							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
a	Is the organization licensed to issue qualified health plans in more than one state?	13a							
	Note. See the instructions for additional information the organization must report on Schedule O								
Ł	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans . 13b								
_	Enter the amount of reserves on hand .								
14 a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X					
t	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b							
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or								
	excess parachute payment(s) during the year?	15		<u> X</u>					
	If 'Yes,' see instructions and file Form 4720, Schedule N								
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X					
	If 'Yes,' complete Form 4720, Schedule O	لــــــــــــــــــــــــــــــــــــــ		ا_ي					
AΑ	TEEA0105L 12/31/18	Form	990 (2018)					

Form 990 (2018) OUR LADY OF VICTORY FOUNDATION INC 42-1344392 Page 6 Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI X Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 8 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O b Enter the number of voting members included in line 1a, above, who are independent 1 b 8 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? . Х 3 Did the organization make any significant changes to its governing documents Х since the prior Form 990 was filed? 4 X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X 6 Did the organization have members or stockholders? 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х 7 a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, Х stockholders, or persons other than the governing body? 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8 a Х a The governing body? **b** Each committee with authority to act on behalf of the governing body? 8 b Х Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No X 10 a Did the organization have local chapters, branches, or affiliates? 10 a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10 b operations are consistent with the organization's exempt purposes? . X 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 SEE SCHEDULE O X 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Х c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in SEE SCHEDULE Q Schedule O how this was done Х 12 c 13 X 13 Did the organization have a written whistleblower policy? X 14 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15 a X a The organization's CEO, Executive Director, or top management official X 15_b **b** Other officers or key employees of the organization

t	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the
	organization's exempt status with respect to such arrangements?
Sec	tion C. Disclosure
17	List the states with which a copy of this Form 990 is required to be filed ► NONE
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply
	Own website
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. SEE SCHEDULE O
20	State the name, address, and telephone number of the person who possesses the organization's books and records
	JOSEPH C. CREEN 1041 W. 57TH ST. DAVENPORT IA 52806 (563) 343-0781

16 a

taxable entity during the year?

If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a

Form 990 (2018)	OUR	LADY O	VICTORY	FOUNDATION	TNC

42-1344392

age 7

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1 a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of 'key employee'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

				(C))					
(A) Name and Title		thai	n one s both	box, an o ector	unles officer /truste	•	son I	(D) Reportable compensation from the organization	(E) Reportable compensation from	(F) Estimated amount of other compensation
	per week (list any hours for related organiza- tions betow dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) MIKE MATTHYS PRES/DIRECTOR	2	х		Х				0.	0.	0.
(2) VERONICA PIANCA	1	├^	Н				-		<u> </u>	
VP/DIRECTOR		х	Н	Х				0.	0.1	0.
(3) JOSEPH C. CREEN	5		П					÷.	-	
SEC/DIRECTOR	0	<u>x</u>		X				0.	0.	0.
(4) KATHY PETERSON	5									
TREAS/DIRECTOR	0	X	Ш	Х	_			0.	0.	0.
(5) BERNARD MACK	2	,,							0	0
DIRECTOR (6) BOB NOLAN	2	X	Н			-	-	0.	0.	0.
DIRECTOR		x						o.l	0.	0.
(7) FR. JACOB GREINER	2	<u> </u>								
DIRECTOR	0	Х						0.	0.	0.
(8) MARY ANN OTTE DIRECTOR	10	Х						0.	0.	0.
(9)										
(10)										
(11)										_
(12)									·	-
(13)										
(14)		-								

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Part VII Section A. Officers, Directors, Tre	istees,	ney		•	_	es,	alli	u nigilest coll	iperisateu Emi	Jioyees (continuea)
(A) Name and title		offic	, unle cer ar	Pos theck ess pe	(C) Position Ick more than one person is both an a director/trustee)			(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation
	(list any hours for related organiza tions below dotted line)	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	omer	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
<u>(15)</u>						<u></u>				
(16)										
(17)										
(18)										
<u>(19)</u>										
(20)										
(21)			\exists							
(22)										
(23)									. 	
(24)									·	
(25)										
b Sub-total c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)	on A	LI					A .	0. 0. 0.	0. 0.	0. 0. 0.
2 Total number of individuals (including but not limited from the organization ► 0)	to those I	sted a	abov	/e) v	vho i	ecen	ved			
3 Did the organization list any former officer, direct	tor, or tru	stee,	key	em	ploy	ee,	or h	ighest compensat	ed employee	Yes No
 on line 1a? If 'Yes,' complete Schedule J for such For any individual listed on line 1a, is the sum of the organization and related organizations greate 	reportabl	e cor	npei	nsat If 'Y	tion 'es,'	and com	oth ple	er compensation f te Schedule J for	rom	3 X
 such individual Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes 	e compen	satio	n fro	om a	any	unre	late	d organization or	ındıvıdual	4 X 5 X
Section B. Independent Contractors	, complet	ie 30	rieut	uie .	3 101	300	ii pi	ersori	 	1 3 1 X
Complete this table for your five highest compens compensation from the organization. Report compens	sated inde sation for t	penc he ca	lent Ilenc	cor lar y	ntrac /ear	tors endir	tha ng w	t received more th	ian \$100,000 of ganization's tax yea	r
(A) Name and business addr	ess				_			(B) Description o	f services	(C) Compensation
							Ţ		41	
2 Total number of independent contractors (including b \$100,000 of compensation from the organization		ted to	thos	se II	sted	abov	/е) \	wno received more	inan	ĺ
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Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (A) Total revenue (B) (C) (D) Related or Unrelated Revenue exempt business excluded from tax under sections 512-514 function revenue revenue Contributions, Gifts, Grants 1 a Federated campaigns 1 a and Other Similar Amounts **b** Membership dues 1 b c Fundraising events 1 c d Related organizations 1 d e Government grants (contributions) 1 e f All other contributions, gifts, grants, and similar amounts not included above 1 f 218,971 g Noncash contributions included in lines 1a-1f h Total. Add lines 1a-1f 218,971 Program Service Revenue **Business Code** 2 a f All other program service revenue g Total. Add lines 2a-2f 3 Investment income (including dividends, interest and other similar amounts). 35,808 <u>35,808</u> Income from investment of tax-exempt bond proceeds. 5 Royalties (II) Personal (ı) Real 6a Gross rents **b** Less rental expenses c Rental income or (loss) d Net rental income or (loss). (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory **b** Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 **b** Less: direct expenses c Net income or (loss) from fundraising events. 9a Gross income from gaming activities See Part IV, line 19 **b** Less: direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold b c Net income or (loss) from sales of inventory b d All other revenue. e Total. Add lines 11a-11d 12 Total revenue. See instructions. 0. 0 35,808 254,779

Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (B) (D) Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. Total expenses Management and Fundráising Program service expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21 36,000 36,000 Grants and other assistance to domestic individuals See Part IV, line 22 Grants and other assistance to foreign 3 organizations, foreign governments, and for-eign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 0 0 0 0. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 0 0 0 0. Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 10 Payroll taxes Fees for services (non-employees): a Management **b** Legal c Accounting d Lobbying e Professional fundraising services See Part IV, line 17 f Investment management fees 4,415 4,415 g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 1,274 Advertising and promotion 1,274 Office expenses 13 Information technology 370 370 Royalties 15 16 Occupancy 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 Interest 20 Payments to affiliates . 22 Depreciation, depletion, and amortization Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O). 904 904 a HARVEST DAY DINNER EXPENSES b PRINTING AND PUBLICATIONS <u>277</u> 277 c POSTAGE AND SHIPPING 300 300 d VOLUNTEER APPRECIATION 216 216 e All other expenses. 45,756 36,000 7,552 2,204. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

Check here ► ☐ if following SOP 98-2 (ASC 958-720)

Part X

Balance Sheet

Form 990 (2018)

Check if Schedule O contains a response or note to any line in this Part X (B) End of year (A) Beginning of year 7,739 Cash - non-interest-bearing 5,650 1 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 4 Accounts receivable, net Loans and other receivables from current and former officers, directors trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10 a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10 a 10 c b Less accumulated depreciation 10b Investments - publicly traded securities 11 764,040 881,688 12 Investments - other securities See Part IV, line 11. 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 15 15 Other assets See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal line 34) 769,690 16 889,427 16 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 0 26 0. 26 Total liabilities. Add lines 17 through 25 X and complete Organizations that follow SFAS 117 (ASC 958), check here > or Fund Balances lines 27 through 29, and lines 33 and 34. 27 889,427 Unrestricted net assets 769,690 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 769,690 889,427 Total liabilities and net assets/fund balances 769,690 889,427

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Forn	n 990 (2018) OUR LADY OF VICTORY FOUNDATION INC 42	2-13443	92	Pa	ge 12				
Pa	rt-XI Reconciliation of Net Assets								
	Check if Schedule O contains a response or note to any line in this Part XI				$oldsymbol{ol}}}}}}}}}}}}}}}}}$				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2	54,	779.				
2	Total expenses (must equal Part IX, column (A), line 25)	2		45,	756.				
3	3 Revenue less expenses Subtract line 2 from line 1								
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7	69,6	390.				
5	Net unrealized gains (losses) on investments	5	-	89,2	286.				
6	Donated services and use of facilities	6							
7	Investment expenses	7							
8	Prior period adjustments .	8							
9	Other changes in net assets or fund balances (explain in Schedule O).	9			0.				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	 P	89,4					
Par	t XII Financial Statements and Reporting	<u> </u>		007					
	Check if Schedule O contains a response or note to any line in this Part XII								
	Check it Schedule O Contains a response of note to any line in this rait An			Yes	No				
1	Accounting method used to prepare the Form 990. X Cash Accrual Other		_ [,	NO				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O								
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		X				
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie separate basis, consolidated basis, or both Separate basis Both consolidated and separate basis	wed on a							
					٠,,				
t	Were the organization's financial statements audited by an independent accountant?		2 b		X				
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis	arate	7	a					
c	: If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the auc review, or compilation of its financial statements and selection of an independent accountant?	lit,	2c		لــــا				
			20		 -				
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				, 1				
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3 a		X				
t	olf 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required a or audits, explain why in Schedule O and describe any steps taken to undergo such audits	udit	3 b						
BAA			Form	990 ((2018)				

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SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization Employer identification number OUR LADY OF VICTORY FOUNDATION INC 42-1344392 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is: (For lines 1 through 12, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g 12 Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations q Provide the following information about the supported organization(s) (i) Name of supported organization (iii) Type of organization (described on lines 1-10 (iv) is the organization listed in your governing document? (v) Amount of monetary (vi) Amount of other support (see instructions) support (see instructions) above (see instructions)) Yes No (A) (B) (C) (D) (E) Total

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support										
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total				
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	51,353.	50,065.	59,894.	160,023.	218,971.	540,306.				
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf			_			0.				
3	The value of services or facilities furnished by a governmental unit to the organization without charge	ed by a nit to the		0.							
4	Total. Add lines 1 through 3	51,353.	50,065.	59,894.	160,023.	218,971.	540,306.				
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						120,305.				
6	Public support. Subtract line 5 from line 4						420,001.				
Sec	tion B. Total Support										
	ndar year (or fiscal year nning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total				
7	Amounts from line 4	51,353.	50,065.	59,894.	160,023.	218,971.	540,306.				
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.	nds, payments received curities loans, rents, les, and income from									
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.				
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						0.				
11	Total support. Add lines 7 through 10					:	618,729.				
12	Gross receipts from related activ	ities, etc. (see ins	tructions)		•	12	0.				
13	First five years. If the Form 990 is organization, check this box and		's first, second, thi	rd, fourth, or fifth to	ax year as a section	n 501(c)(3)	▶ []				
	tion C. Computation of Pul										
	Public support percentage for 20			e 11, column (f))		14	67.88%				
15	Public support percentage from 2	2017 Schedule A,	Part II, line 14			. 15	77.10 %				
16a	33-1/3% support test—2018. If the and stop here. The organization	ne organization did qualifies as a pub	d not check the bo licly supported or	ox on line 13, and ganization	d line 14 is 33-1/3	% or more, check	this box ► X				
b	b 33-1/3% support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization										
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts'	meets the 'facts-a	nd-circumstances	' test, check this l	box and stop her e	e. Explain in Part '	VI how				
b	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the 'facts-a	nd-circumstances	' test, check this l	box and stop her e	e. Explain in Part '	5 is 10% VI how the ►				
18	Private foundation. If the organiz	zation did not ched	ck a box on line 1	3, 16a, 16b, 17a,	or 17b, check this	s box and see inst	ructions ►				
						1.1.4.65	000 FT 0010				

Support Schedule for Organizations Described in Section 509(a)(2) (Complete only it you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support (f) Total Calendar year (or fiscal year beginning in) (a) 2014 **(b)** 2015 (c) 2016 (d) 2017 (e) 2018 Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants') Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons **b** Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public support. (Subtract line 7c from line 6.) Section B. Total Support (c) 2016 Calendar year (or fiscal year beginning in) (a) 2014 **(b)** 2015 (d) 2017 (e) 2018 (f) Total 9 Amounts from line 6 10a Gross income from interest, dividends. payments received on securities loans, rents, royalties, and income from similar sources **b** Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. c Add lines 10a and 10b Net income from unrelated business 11 activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of čapital assets (Explain in Part VI). Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) 15 16 Public support percentage from 201/7 Schedule A, Part III, line 15 16 Section D. Computation of Investment Income Percentage Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)) 173 18 Investment income percentage from 2017 Schedule A, Part III, line 17 19a 33-1/3% support tests—2018.∮If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33-1/3% support tests -2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33/1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the forganization did not check a box on line 14, 19a, or 19b, check this box and see instructions. 20 Schedule A (Form 990 or 990-EZ) 2018 BAA TEEA0403L 06/07/18

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section	Δ.	ΑII	Sunno	rtina	Organ	nizations
	Λ.	711	Juppo	uuu	Olyai	1120110113

			res	NO
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe			
	the designation. If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).			
_				
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization made the determination			
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use	 3c		
4 a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below	 4a	_	
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.			
	, , , , , , , , , , , , , , , , , , , ,	-40	,	-
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.			
5а	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the			
	organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).			
h	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the			
_	organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If 'Yes,' provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI	9c		
0 a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer 10b below	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)	10b		<u> </u>

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	edule A (Form 990 or 990-EZ) 2018 OUR LADY OF VICTORY FOUNDATION INC	42-1344392	F	age
га	Supporting Organizations (continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
	a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	e 11a		
			-	-
	b A family member of a person described in (a) above?	11b		 -
	c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Pa	ert VI. 11c		
<u>sec</u>	ction B. Type I Supporting Organizations	_	Yes	l Na
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appror elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's If the organization had more than one supported organization, describe how the powers to appoint and/or directors or trustees were allocated among the supported organizations and what conditions or restrictions applied to such powers during the tax year.	be in activities remove	res	No
	Did the organization operate for the benefit of any supported organization other than the supported organization that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how provide benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	ing such		
<u>Sec</u>	ction C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or manager supporting organization was vested in the same persons that controlled or managed the supported organization.	ment of the		
sec	ction D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	, , ,		
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the p	orior tax	•	
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies organization's governing documents in effect on the date of notification, to the extent not previously provide			
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supporte	nd		
2	organization or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI the organization maintained a close and continuous working relationship with the supported organization(s)	how 2		
	voice in the organization's investment policies and in directing the use of the organization's income or asseall times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organization in this regard.	ets at		_ _
<u>sec</u>	ction E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in	structions).		
á	The organization satisfied the Activities Test. Complete line 2 below			
í	b The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
•	c The organization supported a governmental entity Describe in Part VI how you supported a governmen	t entity (see instruc	tions)	
2	Activities Test Answer (a) and (b) below.		Yes	No
â	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organizations are explain to the organizations.	on was	·	
	responsive to those supported organizations, and how the organization determined that these activities consubstantially all of its activities	za 2a		
t	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the rea	ore of		
	the organization's supported organization(s) would have engaged in these activities but for organization's involvement.	the 2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
a	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trus each of the supported organizations? <i>Provide details in Part VI.</i>	tees of 3a		
	casi of the supported organizations of revised determs in rate an			

3b

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If 'Yes,' describe in Part VI the role played by the organization in this regard*

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Type III Non-Functionally Integrated 509(a)(3)	anizat	ions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization	st on No	ov 20, 1970 (explain in t complete Sections A	n Part VI) See through E
Sec	tion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5	<u></u>	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)			
a	Average monthly value of securities	1a		
t	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
_2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	···	
_4	Enter greater of line 2 or line 3.	4	···	
5	Income tax imposed in prior year	5		
6 	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally inte (see instructions)	egrated		
BAA			Schedule A (Fo	orm 990 or 990-EZ) 201

Sche	edule A (Form 990 or 990-EZ) 2018 OUR LADY OF VICTORY		42-13	44392 Page
Pai	t V Type III Non-Functionally Integrated 509(a)(3) S	upporting Organiza	tions (continued)	
Sec	tion D – Distributions			Current Year
_1	Amounts paid to supported organizations to accomplish exempt p	urposes		
2	Amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity	of supported organizations	5,	
3	Administrative expenses paid to accomplish exempt purposes of s	supported organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the organization Part VI) See instructions	tion is responsive (provide	details	
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
 Sec	tion E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
_1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required — explain in Part VI) See instructions.			
3	Excess distributions carryover, if any, to 2018			
a	From 2013			
b	From 2014			
c	From 2015	ъ		
d	From 2016 .			·
е	From 2017			
1	Total of lines 3a through e	<u> </u>		
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
j	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2018 from Section D, line 7: \$			
а	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4			
5 	Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1 For result greater than zero, explain in Part VI See instructions			
7	Excess distributions carryover to 2019. Add lines 3j and 4c			
8	Breakdown of line 7	,		
а	Excess from 2014	,		
b	Excess from 2015	,		

e Excess from 2018 BAA

c Excess from 2016 d Excess from 2017

Schedule A (Form 990 or 990-EZ) 2018

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

SCHEDULE I (Form 990)		Gov	Grants and Oth Governments, ar	ner Assistance od Individuals i	ther Assistance to Organizations, and Individuals in the United States	is, ates		2018 No. 1545-0047
Department of the Treasury Internal Revenue Service			te If the organization Go to www.irs.	the organization answered res on Form 330, Far Attach to Form 990. Go to www.irs.gov/Form990 for the latest information	Complete if the organization answered res on Form 990, Fart IV, line ∠I or ∠∠. ► Attach to Form 990. ► Go to www.irs.gov/Form990 for the latest information	.i. or 22.	1	Open to Public Inspection
Name of the organization	OUR LADY OF VIC	VICTORY FOUNDATION	TION INC				Employer identification number 42-1344392	cation number
Part I General In	General Information on Grants and Assistance	ints and Assista	ınce		į			
1 Does the organizate the selection crite 2 Describe in Part IV	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	substantiate the amo grants or assistanc edures for monitoring	ount of the grants or e?	assistance, the grantees' ids in the United States	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	or assistance, and		Yes X No
Part II Grants an Form 990,	Grants and Other Assistance to Domestic Organizations Form 990, Part IV, line 21, for any recipient that received	ce to Domestic (Organizations at that received in	and Domestic Governments. more than \$5,000. Part II can	. —	Complete if the organization answered 'Yes' or duplicated if additional space is needed.	tion answered 'Y space is neede	res' on d.
1 (a) Name and add	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) OUR LADY OF VICTORY 4105 NORTH DIVISION DAVENPORT, IA 52806	ICTORY	42-0868097 501 (C) (3)	501 (C) (3)	36,000	0			TO SUPPORT CHURCH & RELATED SCHOOL
					,			
(8)					`			
2 Enter total numb 3 Enter total numb	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table) and government or ons listed in the line	rganizations listed	n the line 1 table				
A For Panemork E	BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990	see the Instructions	s for Form 990.		TEEA3901L 07/13/18	811/511/CU	Schedu	Schedule I (Form 990) (2018)

Schedule I (Form 990) (2018) OUR LADY OF VICTORY FOUNDATION INC

Page-2 Part III | Grants and Other Assistance to Domestic Individuals. Complete if the organization answered 'Yes' on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

	κ' 		1	١,	l		1		
	(f) Description of noncash assistance								required in Part I, line 2; Part III, column (b); and any other additional information.
	(e) Method of valuation (book, FMV, appraisal, other)								lumn (b); and any other
	(d) Amount of noncash assistance								line 2; Part III, co
	(c) Amount of cash grant			•					required in Part I,
מככ וז ווככמכמ.	(b) Number of recipients								de the information
can be admicated if admitted space is needed.	(a) Type of grant or assistance								Part IV - Supplemental Information. Provide the information
		1	8	m	4	2	9	7	Part

Schedule I (Form 990) (2018)

SEHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

OUR LADY OF VICTORY FOUNDATION INC

Employer Identification number

42-1344392

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

THE ANNUAL TAX RETURN IS REVIEWED BY THE SECRETARY PRIOR TO FILING.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

THE FOUNDATION HAS A WRITTEN CONFLICT OF INTEREST POLICY WHICH WAS APPROVED BY THE BOARD OF DIRECTORS. IT IS PERIODICALLY MONITORED AND ENFORCED THROUGH THE ANNUAL MEETING OF THE BOARD OF DIRECTORS AND AT COMMITTEE MEETINGS THAT OCCUR FOR INVESTMENT OR OTHER PURPOSES.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

THE POLICIES AND GOVERNING DOCUMENTS OF THE FOUNDATION ARE MADE AVAILABLE UPON REQUEST AND ARE AVAILABLE AT THE BOARD OF DIRECTORS ANNUAL MEETING. EACH MEMBER OF THE BOARD OF DIRECTORS HAS BEEN PROVIDED A COPY OF THE ARTICLES OF INCORPORATION AS AMENDED, BYLAWS, POLICIES, AND MINUTES OF THE ANNUAL BOARD OF DIRECTORS MEETING AND ANY SPECIAL AND REGULAR MEETINGS OF THE BOARD OF DIRECTORS.