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2018

OMB No 1545-0052

Return of Private Foundation

Form 990-PF

Department of the Treasury

Internal Revenue Service

or Section 4947(a)(1) Trust Treated as Private Foundation

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

Open to Public Inspection

| For | caler | ndar year 2018, or tax year beginning 01-01-20 | 018 , ar | nd ending 12-31- | 2018 | | | | |
|--------------------|------------|--|------------------------------------|---------------------------|--|--|--|--|--|
| | | indation TAG FAMILY FOUNDATION | | A Employer id | entification numbe | r | | | |
| | | | 42-1444870 | 42-1444870 | | | | | |
| | | d street (or P O box number if mail is not delivered to street address; CRAMENTO STREET NO 369 |) Room/suite | B Telephone nu | mber (see instruction | ns) | | | |
| | | | | (415) 673-3733 | 3 | | | | |
| | | n, state or province, country, and ZIP or foreign postal code ISCO, CA 94118 | | C If exemption | application is pendin | g, check here | | | |
| G CI | neck al | ll that apply 🔲 Initial return 🔲 Initial return of a | former public charity | D 1. Foreign or | ganızatıons, check he | ere 📗 | | | |
| | | ☐ Final return ☐ Amended return | | | ganizations meeting k here and attach co | | | | |
| | | Address change Name change | | · | undation status was t | · - | | | |
| _ | , | $ \nabla$ pe of organization $ \nabla$ Section 501(c)(3) exempt private | | | n 507(b)(1)(A), chec | | | | |
| | | | le private foundation | | | | | | |
| of | year (f | xet value of all assets at end from Part II, col (c), ▶\$ 57,129,157 Date (specify) (Part I, column (d) must | Cash Accru | | ation is in a 60-montl n 507(b)(1)(B), chec | | | | |
| Pa | rt I | Analysis of Revenue and Expenses (The total | (a) Bayranya and | | | (d) Disbursements | | | |
| | | 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 | for charitable purposes (cash basis only) | | | |
| | 1 | Contributions, gifts, grants, etc , received (attach | | | | , | | | |
| | | schedule) | | | | | | | |
| | 2 | Check ► ✓ If the foundation is not required to attach Sch B | | | | | | | |
| | 3 | Interest on savings and temporary cash investments | | | | | | | |
| | 4 | Dividends and interest from securities | 1,050,182 | 1,050,182 | | | | | |
| Reversie | 5a | Gross rents | | | | | | | |
| | b | Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 | 3,805,193 | | | | | | |
| | 6a | • , , | 3,603,133 | | | | | | |
| eve | b | Gross sales price for all assets on line 6a 4,576,918 | 3 | | | | | | |
| ď | 7 | Capital gain net income (from Part IV, line 2) | | 3,805,193 | | | | | |
| | 8 | Net short-term capital gain | | | | | | | |
| | 9 10a | Gross sales less returns and allowances | | | | | | | |
| | ь | Less Cost of goods sold | <u></u> | | | | | | |
| | c | Gross profit or (loss) (attach schedule) | | | | | | | |
| | 11 | Other income (attach schedule) | 51,561 | 0 | | | | | |
| | 12 | Total. Add lines 1 through 11 | 4,906,936 | 4,855,375 | | | | | |
| | 13 | Compensation of officers, directors, trustees, etc | 0 | 0 | | 0 | | | |
| | 14 | Other employee salaries and wages | | | | | | | |
| ses | 15 | Pension plans, employee benefits | 201 2.069 | 2 226 | | 742 | | | |
| ē | 16a | Legal fees (attach schedule) | 2,968 | · | | 5,800 | | | |
| Expenses | b c | Other professional fees (attach schedule) | 23,200 151,643 | - | | 3,800 | | | |
| IVe | 17 | Interest | 131,043 | 131,043 | | | | | |
| and Administrative | 18 | Taxes (attach schedule) (see instructions) | 4,032 | 4,032 | | 0 | | | |
| SILI | 19 | Depreciation (attach schedule) and depletion | _ | | | | | | |
| E | 20 | Occupancy | 44,459 | 0 | | 44,459 | | | |
| ΨÞ | 21 | Travel, conferences, and meetings | | | | | | | |
| E | 22 | Printing and publications | | | | | | | |
| <u>jing</u> | 23 | Other expenses (attach schedule) | 14,551 | 12,475 | | 2,076 | | | |
| Operating | 24 | Total operating and administrative expenses. | 340.053 | 107 776 | | F2 077 | | | |
| ď | 25 | Add lines 13 through 23 | 7,326,343 | | | 53,077 7,326,343 | | | |
| | 26 | Total expenses and disbursements. Add lines 24 and | 7,520,543 | | | . ,525,545 | | | |
| | ייי | 25 Subtract line 26 from line 12 | 7,567,196 | 187,776 | | 7,379,420 | | | |
| | 27 a | Subtract line 26 from line 12 Excess of revenue over expenses and | | | | | | | |
| | _ | disbursements | -2,660,260 | | | | | | |
| | b | Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-) | | 4,667,599 | | | | | |
| For | c Paper | work Reduction Act Notice, see instructions. | | Cat No 11289> | <u> </u> | m 990-PF (2018) | | | |

| | | 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) | | | |
| | 7 | Other notes and loans receivable (attach schedule) ▶ | | | |
| | | Less allowance for doubtful accounts ▶ | | | |
| S. | 8 | Inventories for sale or use | | | |
| sets | 9 | Prepaid expenses and deferred charges | | | |
| S I | 10a | Investments—U S and state government obligations (attach schedule) | | | |
| | b | Investments—corporate stock (attach schedule) | 64,451,962 | 9 51,677,866 | 51,677,86 |
| | С | Investments—corporate bonds (attach schedule) | | | |
| | 11 | Investments—land, buildings, and equipment basis ▶ | | | |
| | | Less accumulated depreciation (attach schedule) ▶ | | | |

12 13 14 15 16 17 18 Liabilities 19 20 Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here ▶

Capital stock, trust principal, or current funds

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances (see instructions) . . .

21

22

23

24

25

26

27

28

29

30

31

Part III

2

3

4

or Fund Balances

Net Assets

Other liabilities (describe -_

Unrestricted

Temporarily restricted

Permanently restricted

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Add lines 1, 2, and 3

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

| .1 | Investments—land, buildings, and equipment basis ▶ | | | | | | |
|----|--|------------|------------|------|------------|------------|------------|
| | Less accumulated depreciation (attach schedule) ▶ | | | | | | |
| .2 | Investments—mortgage loans | | | | | | |
| .3 | Investments—other (attach schedule) | | | | | | |
| 4 | Land, buildings, and equipment basis ▶ | | | | | | |
| | Less accumulated depreciation (attach schedule) ▶ | | | | | | |
| .5 | Other assets (describe) | ر چ | 111,353 | اروپ | 111,353 | % J | 102,400 |
| .6 | Total assets (to be completed by all filers—see the | | | | | | |
| | ınstructions Also, see page 1, item I) | | 67,145,149 | | 57,138,109 | | 57,129,157 |
| 7 | Accounts payable and accrued expenses | | | | | | |
| 8 | Grants payable | | | | | | |
| 9 | Deferred revenue | | | | | | |
| 0 | Loans from officers, directors, trustees, and other disqualified persons | | | | | | |

67,145,149

67,145,149

67,145,149

57,138,109

57,138,109

57,138,109

67,145,149 -2,660,260

64,484,889

7,346,780

57,138,109 Form **990-PF** (2018)

1

2

3

4

5

(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)

Date sold

(c)

Date acquired

(b)

How acquired

P—Purchase

Page **3**

| 2-story brick wareh | ouse, or common stock, 200 shs | P—Purchase D—Donation | (mo , day, yr) | (mo , day, yr) | | |
|--|---|---|------------------------------------|--|----------------------------|--|
| 1 a CAPITAL GAIN DISTRIBUTIO | NS - BBH | P | | | | |
| b PUBLICLY TRADED SECURITI | IES - BBH LT | Р | | | | |
| С | | | | | | |
| d | | | | | | |
| e | | | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | Cost or | (g) other basis ense of sale | Gain d | h) or (loss) or) minus (g) | |
| a 3,376,94 | 14 | | | | 3,376,944 | |
| b 1,199,97 | 74 | | 771,72 | 5 | 428,249 | |
| С | | | | | | |
| d | | | | | | |
| е | | | | | | |
| Complete only for assets sho (i) F M V as of 12/31/69 | Excess | on 12/31/69 (k) of col (ı) (յ), ıf any | Gains (Col (col (k), but not | (I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h)) | | |
| a | | | , | | 3,376,944 | |
| b | | | | | 428,249 | |
| c | | | | | | |
| d | | | | | | |
| e | | | | | | |
| · - | or (loss) as defined in sections 1 | ons) If (loss), enter -0 | · , | 3 | 3,805,193 | |
| Part V Qualification Und | er Section 4940(e) for Re | duced Tax on Net | Investment I | ncome | | |
| (For optional use by domestic priva | te foundations subject to the sec | tion 4940(a) tax on ne | et investment inco | me) | | |
| If section 4940(d)(2) applies, leave | | | | | | |
| Was the foundation liable for the se If "Yes," the foundation does not qu | | | | d? 🗌 Y | es 🔽 No | |
| 1 Enter the appropriate amour | nt in each column for each year, | see instructions before | makıng any entri | es | _ | |
| (a) Base period years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitab | le-use assets | (d) Distribution rat (col (b) divided by d | | |
| 2017 | 6,310,884 | | 64,344,297 | | 0 098080 | |
| 2016 | 5,722,964 | | 60,945,300 | | 0 093903 | |
| 2015 | 3,001,807 | | 67,850,176 | | 0 044242 | |
| 2014 | 7,412,665 | | 68,770,375 | | 0 107789 | |
| 2013 | 3,127,220 | | 63,736,762 | 1 | 0 049065 | |
| | | | | | 0 393079 | |
| number of years the foundat | the 5-year base period—divide to non has been in existence if less to aritable-use assets for 2018 from | than 5 years | 3 | | 0 078616 64,003,738 | |
| | | • | | | 5,031,718 | |
| | ncome (1% of Part I, line 27b) | | | | 46,676 | |
| | | | | | 5,078,394 | |
| | from Part XII, line 4 , | | | | 7,379,420 | |
| If line 8 is equal to or greater instructions | r than line 7, check the box in Pa | art VI, line 1b, and com | plete that part us | ing a 1% tax rate Se | | |
| | | | | F | orm 990-PF (2018) | |

Page **6**

| Pai | t VII-B | Statements Regard | ding | Activities for Which | Form 4720 May Be | Required (co | ntınue | ed) | | | | |
|-------|----------------------------|---|---------------------------------------|----------------------------------|----------------------------|--|-----------------------|----------|-------|------------------|---------|-------|
| 5a | During the | year did the foundation | | | | | | | | | Yes | No |
| | (1) Carry | on propaganda, or otherv | vise a | ttempt to influence legisl | ation (section 4945(e))? | |] v aa | J | Na | | | |
| | (2) Influe | nce the outcome of any s | public election (see sect | ` Yes ▼ No | | | | | | | | |
| | on, dı | rectly or indirectly, any vo | | | Yes | | No | | | | | |
| | (3) Provid | le a grant to an individual | for to | avel, study, or other sım | ılar purposes? | F | Yes | j | No | | | |
| | (4) Provid | le a grant to an organizati | on ot | her than a charitable, etc | , organization described | 1 | 1 162 | 4 | NO | | | |
| | ın sec | tion 4945(d)(4)(A)? See ii | nstrud | tions | | | Yes | | No | | | |
| | (5) Provid | le for any purpose other t | han r | eligious, charitable, scien | tıfıc, lıterary, or | _ | 1 163 | ت | NO | | | |
| | educa | tional purposes, or for the | prev | ention of cruelty to childr | en or animals? | | Yes | V | No | | | |
| b | If any ans | wer is "Yes" to 5a(1)-(5), | dıd a | ny of the transactions fa | ıl to qualıfy under the ex | ceptions describ | ed in | ت. | 110 | | | |
| | Regulation | ns section 53 4945 or in a | curre | ent notice regarding disas | ter assistance? See instr | uctions | | | | 5b | | |
| | Organizat | ions relying on a current r | otice | regarding disaster assist | ance check here | | . ▶ | | 1 | | | |
| С | If the ans | wer is "Yes" to question 5 | a(4), | does the foundation clain | n exemption from the | | | | | | | |
| | tax becau | se it maintained expenditi | ıre re | sponsibility for the grant? | · | · · | Yes | П | No | | | |
| | If "Yes," a | ttach the statement requi | red b | y Regulations section 53 | 4945-5(d) | _ | . 103 | _ | 140 | | | |
| 6a | Did the fo | undation, during the year, | , rece | ive any funds, directly or | indirectly, to pay premit | ıms on | | | | | | |
| | a persona | l benefit contract? | | | | | Yes | J | No | | | |
| b | Did the fo | undation, during the year, | , pay | premiums, directly or ind | lirectly, on a personal be | nefit contract? . | | | NO | 6b | | No |
| | If "Yes" to | 6b, file Form 8870 | | | | | | | | | | |
| 7a | At any tim | ne during the tax year, wa | s the | foundation a party to a p | rohibited tax shelter trai | nsaction? | Vec | ✓ | No | | | |
| b | If yes, did | the foundation receive ar | ny pro | ceeds or have any net in | come attributable to the | transaction?. | | با. | NO | 7b | | |
| 8 | Is the fou | ndation subject to the sec | tion 4 | 960 tax on payment(s) o | f more than \$1,000,000 | ın remuneration | or | | | | | |
| | excess pa | rachute payment during tl | he ye | ar [?] | | · · г | Yes | ✓ | No | | | |
| | | Information About (| Offic | ers, Directors, Trust | ees, Foundation Ma | nagers, High | | | | vees, | , | |
| Pal | t VIII | and Contractors | | , | • | | • | | • | • | | |
| 1 | List all of | ficers, directors, truste | es, fo | oundation managers an | d their compensation | See instructio | ns | | | | | |
| | | | (| b) Title, and average | (c) Compensation (If | (d) Contribi | | | (e) | Exper | se acc | ount. |
| | (a) Na | ame and address | hours per week devoted to position | | not paid, enter -0-) | employee benefit plans and deferred compensation | | | | other allowances | | |
| KENN | ETH P MAYTA | G | PRESIDENT | | 0 | | dererred compensation | | | | | |
| | | D STREET 369 | 1 00 | | Ĭ | | | | 1 | | | |
| | RANCISCO, (| | | | | | | | | | | |
| FREDE | RICK L MAY | TAG III | VICE-PRESIDENT | | 0 | 0 | | | | | C | |
| | | O STREET 369 | 1 00 | | | | | | | | | |
| | RANCISCO, (EN VAN LIEF | | SECRETARY | | 0 | | | | +- | | | |
| | | D STREET 369 | 1 00 | | 0 | | | | 1 | · · | | |
| | RANCISCO, (| | | | | | | | | | | |
| 2 | Compens | ation of five highest-pa | id en | nployees (other than th | nose included on line | l—see instructi | ons). : | [f no | ne, e | nter " | NONE. | ." |
| 7-3-1 | N | | | (b) Title, and average | | (d) Contrib | | | (-) | | | |
| (a) | | address of each employee ore than \$50,000 | paid | hours per week | (c) Compensation | employee plans and o | | | | | se acco | |
| | | 57 C 111411 \$50,000 | | devoted to position | | compens | | - | 0. | | o mane | |
| NONE | | | | | | | | | | | | |
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| | | | | | | | | \dashv | | | | |
| | | | | | | | | | | | | |
| Tota | I number o | f other employees paid ov | er ¢5 | 0.000 | | | | | | | | |
| 1014 | . Hamber 0 | other employees paid ov | C1 43 | 0,0001 1 1 1 1 | | | | | For | m 00 | 0-PF (| |
| | | | | | | | | | 1.01 | | J-FF (| 2010 |

| Form 990-PF (2018) Information About Officers, Directors, Trus | stees Foundation Managers Highly Paid 6 | Page 7 |
|--|--|---------------------------|
| and Contractors (continued) | sees, roundation Hanagers, mgmy raid i | ріоўсез, |
| 3 Five highest-paid independent contractors for professiona | ıl services (see instructions). If none, enter "NO | NE". |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| BROWN BROTHERS HARRIMAN | INVESTMENT FEES | 151,643 |
| 140 BROADWAY NEW YORK, NY 10005 | | |
| TEN TOTAL TOTAL | | |
| | | |
| | _ | |
| | _ | |
| | | |
| Total number of others receiving over \$50,000 for professional service | es | 0 |
| Part IX-A Summary of Direct Charitable Activities | | |
| List the foundation's four largest direct charitable activities during the tax year. In organizations and other beneficiaries served, conferences convened, research pap | | Expenses |
| 1 | ors produced, etc | _ |
| | | |
| | | |
| 2 | | |
| | | |
| 3 | | |
| | | |
| | | |
| 4 | | |
| | | |
| Part IX-B Summary of Program-Related Investments | · | |
| Describe the two largest program-related investments made by the foundation | during the tax year on lines 1 and 2 | Amount |
| 1 | | + |
| | | 1 |
| 2 | | |
| | | _ |
| All other program-related investments See instructions | | |
| 3 | | 1 |
| | | - |
| Total. Add lines 1 through 3 | | 0 |
| | | Form 990-PF (2018) |

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

2

3

4

5

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

1b

2

3a 3h

4

5

7,379,420

7.332.744

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46.676

Page 9

3,153,511

3,153,511

Form **990-PF** (2018)

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| 101111 990-F1 (2 | 010) |
|------------------|------|
| Part XIII | Un |
| | |

| 90-PF | (2018) |
|-------|--------|
| EXTIT | Un |

b Total for prior years

a From 2013.

b From 2014. c From 2015. . . d From 2016.

e From 2017.

1 Distributable amount for 2018 from Part XI, line 7

2 Undistributed income, if any, as of the end of 2018 a Enter amount for 2017 only.

Excess distributions carryover, if any, to 2018

f Total of lines 3a through e.

d Applied to 2018 distributable amount. e Remaining amount distributed out of corpus

same amount must be shown in column (a))

5 Excess distributions carryover applied to 2018

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

(If an amount appears in column (d), the

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2019.

10 Analysis of line 9

a Excess from 2014. . . **b** Excess from 2015. . c Excess from 2016. . . .

d Excess from 2017. . .

e Excess from 2018. . .

Subtract lines 7 and 8 from line 6a

indicated below:

4 Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ 7,379,420 a Applied to 2017, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election required—see instructions).

4,106,412

2.757.467 3,162,143

4.106.412

2,757,467 3,162,143

4.225.909

(a)

Corpus

10.026.022

4,225,909

14,251,931

14,251,931

(b)

Years prior to 2017

(c)

2017

| Form 990-PF (2018) | | | | | | | | |
|--------------------|---|--|--|--|--|--|--|--|
| Part XIII | Undistributed Income (see instructions) | | | | | | | |



| Part XV | I-A Analysis of Income-Producing | Activities | | | | rage 12 |
|--------------------------------------|---|----------------------|----------------|-----------------------|---------------|---------------------------------------|
| Enter gross | s amounts unless otherwise indicated | | usiness income | Excluded by section | | (e) Related or exempt function income |
| | n service revenue | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | (See instructions) |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | and contracts from government agencies | | | | | |
| 2 Membe | ership dues and assessments | | | | | |
| investr 4 Divider | nents | | | 14 | 1,050,182 | |
| 5 Net rer | ntal income or (loss) from real estate | | | | _,, | |
| | -financed property lebt-financed property | | | | | |
| | ntal income or (loss) from personal property nvestment income. | | | | | |
| | r (loss) from sales of assets other than | | | 18 | 3,805,193 | |
| | come or (loss) from special events | | | 15 | 3,003,133 | |
| 10 Gross 11 Other | profit or (loss) from sales of inventory revenue | | | | | |
| a <u>IRS RI</u> | EFUND | | | 01 | 51,561 | |
| | | | | | | |
| | | | | | | |
| 12 Subtot | al Add columns (b), (d), and (e) | | C | | 4,906,936 | (|
| | Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu | | | 1 | 3 | 4,906,936 |
| | I-B Relationship of Activities to the | | hment of Exem | pt Purposes | | |
| Line No. ▼ | Explain below how each activity for which the accomplishment of the foundation's exinstructions) | | | | | |
| 1 | NA NA | | | | | |
| | | | | | | |
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| | | | | | Fo | rm 990-PF (2018 |

| . (== | - 0, | |
|-------|--|---|
| | Information Regarding Transfers To and Transactions and Relationships With Noncharitable | - |
| | Exempt Organizations | |

| ган. | VATI | Exempt Organia | zations | | | | | | | |
|-----------------|------------|--|--------------------|-----------------|---------------------|--------------------|--|--|------------------|-----|
| | | anization directly or in han section 501(c)(3) | | | | | on described in section s? | 501 | Yes | No |
| a Tran | sfers fr | om the reporting foun | dation to a non | charitable ex | empt organization | of | | | | |
| (1) | Cash. | | | | | | | 1a(1) | | No |
| (2) | Other | assets | | | | | | . 1a(2) | | No |
| b Othe | er trans | actions | | | | | | | | |
| (1) | Sales | of assets to a nonchari | table exempt o | rganization. | | | | . 1ь(1) | | No |
| (2) | Purcha | ases of assets from a n | oncharitable ex | kempt organiz | zation | | | . 1b(2) | | No |
| (3) | Rental | of facilities, equipmen | nt, or other asse | ets | | | | . 1b(3) | | No |
| (4) | Reımb | ursement arrangemen | ts | | | | | 1b(4) | | No |
| | | or loan guarantees. | | | | | | 1b(5) | | No |
| (6) | Perforn | nance of services or m | embership or fu | undraising sol | icitations | | | 1b(6) | | No |
| c Shar | ing of t | facilities, equipment, n | nailing lists, oth | ner assets, or | paid employees. | | | 1c | | No |
| of th | ie good | ls, other assets, or ser | vices given by t | the reporting | foundation If the | foundation receive | ways show the fair ma ed less than fair marke ts, or services received | t value | | |
| (a) Line | No | (b) Amount involved | (c) Name of no | ncharitable exe | mpt organization | (d) Description of | transfers, transactions, ar | nd sharing arra | ngemen | ts |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
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| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 2a Is th | e found | dation directly or indire | ectly affiliated v | vith, or relate | d to, one or more | tax-exempt organ | ızatıons | | | |
| | | n section 501(c) (other | | | | | _ | ✓ No | | |
| | | mplete the following so | | | | | | | | |
| | , | (a) Name of organization | | (1 | Type of organizatio | n | (c) Description of | relationship | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | of my | | , it is true, corr | | | | ng schedules and state than taxpayer) is base | | | |
| Sign Here | * | **** | | | 2019-11-04 | ***** | | May the IRS di return with the prepa | | |
| | s | ignature of officer or t | rustee | | Date | Title | | below (see instr)? | ✓ Yes I | □No |
| | | Print/Type preparer's | name P | reparer's Sıgr | nature | Date | Check if self- | | :004 | |
| Paid | | TRACY S PAGLIA | | | | 2019-11-04 | employed ▶ ☐ | P00366 | ,00 1 | |
| Prepa Jse (| | Firm's name ► MOS | S ADAMS LLP | | | • | Fir | m's EIN ▶91 | -01893 | 318 |
| \ | · y | Firm's address ▶ 31 | 21 W MARCH L | N STE 200 | | | | | | |
| | | | | | | | Ph | Phone no (209) 955-6100 | | |
| | | i | | | | | l I | | | |

Recipient If recipient is an individual, show any relationship to status of status of

recipient

7,326,343

any foundation manager

or substantial contributor

Name and address (home or business)

WASHINGTON, DC 20036

| | or substantial contributor | | | |
|--|----------------------------|----|-----------------|--------|
| a Paid during the year | | | | |
| AMANDA THE PANDA1821 GRAND AVE WEST DES MOINES, IA 50265 | | PC | GENERAL SUPPORT | 20,000 |
| AMERICAN CANCER SOCIETY 1717 INGERSOL AVE 111 DES MOINES, IA 50309 | | PC | RELAY FOR LIFE | 5,000 |
| AMERICAN COUNCIL OF TRUSTEES AND ALUMNI 1730 M ST NW STE 600 | | PC | GENERAL SUPPORT | 50,000 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

any foundation manager

| Name and address (nome or business) | or substantial contributor | · | | |
|--|----------------------------|----|-----------------|-------|
| a Paid during the year | | | | |
| AMERICAN HEART ASSOCIATION 5000 WESTOWN PARKWAY | | PC | GENERAL SUPPORT | 5,000 |

recipient

| WEST DES MOINES, IA 50266 | | | |
|---|----|-----------------|--------|
| AMERICAN RED CROSS - IOWA REGION 2116 GRAND AVENUE DES MOINES, IA 50312 | PC | GENERAL SUPPORT | 50,000 |

| 2116 GRAND AVENUE DES MOINES, IA 50312 | | <u> </u> | |
|---|----|-----------------|--------|
| ARIZONA LAND & WATER TRUST 3127 CHERRY AVE TUCSON, AZ 85719 | PC | GENERAL SUPPORT | 15,000 |

| DES MOINES, IA 50312 | | | |
|---|------|-----------------|-----------|
| ARIZONA LAND & WATER TRUST 3127 CHERRY AVE TUCSON, AZ 85719 | PC | GENERAL SUPPORT | 15,000 |
| Total | | ▶ 3a | 7,326,343 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year | | | |
|---|----|-----------------|--------|
| BALLET DES MOINES 121 S 11TH STREET 100 WEST DES MOINES, IA 50265 | PC | GENERAL SUPPORT | 35,000 |

| BERNIE LORENZ RECOVERY INC 3451 EASTON BLVD DES MOINES, IA 50317 | PC | GENERAL SUPPORT | 10,000 |
|--|----|-----------------|--------|
| BIG BROTHERS BIG SISTERS OF | PC | GENERAL SUPPORT | 50,000 |

| DES MOINES, IA 50317 | | | |
|---|----|-----------------|--------|
| BIG BROTHERS BIG SISTERS OF CENTRAL IOWA 9051 SWANSON BLVD CLIVE, IA 50325 | PC | GENERAL SUPPORT | 50,000 |

| BIG BROTHERS BIG SISTERS OF CENTRAL IOWA 9051 SWANSON BLVD | PC | GENERAL SUPPORT | 50,000 |
|--|----|-----------------|--------|
| CLIVE, IA 50325 | | | |
| | | | |

Total .

Recipient If recipient is an individual, show any relationship to status of recontribution Spaid During the Year or Approved for Future Payment

Recipient If recipient is an individual, show any relationship to status of recontribution Amount

recipient

7,326,343

any foundation manager

Name and address (home or husiness)

| Name and address (nome or business) | or substantial contributor | · | | |
|--|----------------------------|----|--------------------|--------|
| a Paid during the year | | | | |
| BOY SCOUTS OF AMERICA 6123 SCOUT TRAIL DES MOINES, IA 50321 | | PC | GENERAL SUPPORT | 25,000 |
| BRAVO GREATER DES MOINES INC 1011 LOCUST STREET STE 309 DES MOINES, IA 50309 | | PC | 2018 GALA DONATION | 10,000 |
| CAMP FIRE HEART OF IOWA 5615 HICKMAN ROAD DES MOINES, IA 50310 | | PC | GENERAL SUPPORT | 30,000 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year | | | |
|--|----|-----------------|--------|
| CENTER FOR EQUAL OPPORTUNITY 7700 LEESBURG PIKE 231 FALLS CHURCH, VA 22043 | PC | GENERAL SUPPORT | 40,000 |
| | | | |

| | , , , , , , , , , , , , , , , , , , , | | | |
|----|---|----|-----------------|---------|
| 16 | NTER FOR IMMIGRATION STUDIES 29 K STREET NW SUITE 600 ASHINGTON, DC 20006 | PC | GENERAL SUPPORT | 100,000 |
| _ | | | | |

| WASHINGTON, DC 20006 | | | |
|---|----|-----------------|--------|
| CENTRAL COLLEGE812 UNIVERSITY PELLA, IA 50219 | PC | GENERAL SUPPORT | 50,000 |

| CENTRAL COLLEGE812 UNIVERSITY PELLA, IA 50219 | PC | GENERAL SUPPORT | 50,00 |
|--|----|-----------------|-------|

Total .

Recipient If recipient is an individual, show any relationship to Status of Status of Recipient If recipient is an individual, show any relationship to Status of Stat

any foundation manager

Name and address (home or business)

Total .

| (| or substantial contributor | | | |
|--|----------------------------|----|-----------------|--------|
| a Paid during the year | | | | |
| CHILDREN & FAMILIES OF IOWA 1111 UNIVERSITY DES MOINES, IA 50314 | | PC | GENERAL SUPPORT | 30,000 |

recipient

| DES MOINES, IA 30314 | | | |
|--|-----|-----------------|--------|
| CHILDSERVE 5406 MERLE HAY RD PO BOX 707 JOHNSTON, IA 50131 | PC | GENERAL SUPPORT | 5,000 |
| CIVIC MUCIC ACCOCIATION | DC. | CENERAL CURRORT | 35.000 |

| JOHNSTON, IA 50131 | | | |
|--|----|-----------------|--------|
| CIVIC MUSIC ASSOCIATION 900 KEOSAUQUA WAY SUITE 109 DES MOINES, IA 50309 | PC | GENERAL SUPPORT | 25,000 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year | | | |
|---|----|-----------------|--------|
| CLEARVIEW RECOVERY 501 NORTH SHERMAN | PC | GENERAL SUPPORT | 20,000 |

| PRAIRIE CITY, IA 50228 | | | |
|--------------------------------------|------|-----------------|--------|
| DES MOINES AREA COMMUNITY COLLEGE | SO I | GENERAL SUPPORT | 50,000 |
| 2006 S ANKENY BLVD | | | |

| PC | GENERAL SUPPORT | 30,000 |
|----|-----------------|--------------------|
| | PC | PC GENERAL SUPPORT |

| ANKENT, IA 50023 | | | |
|---|----|-----------------|--------|
| DES MOINES ART CENTER 4700 GRAND AVE DES MOINES, IA 50312 | PC | GENERAL SUPPORT | 30,000 |

| 4700 GRAND AVE DES MOINES, IA 50312 | SENERAL SOTTORY | 30,00 |
|--|-----------------|-----------|
| Total | ▶ 3a | 7,326,343 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year | | | |
|---|----|-----------------|--------|
| DES MOINES METRO OPERA INC 106 WEST BOSTON AVENUE INDIANOLA, IA 50125 | PC | GENERAL SUPPORT | 40,000 |

25,000

7,326,343

| DES MOINES PASTORIAL COUNSELING | PC | GENERAL SUPPORT | 2 |
|---------------------------------|----|-----------------|---|
| CENTER | | | |
| 8553 URBANDALE AVE | | | |
| URBANDALE, IA 50322 | | | |
| | | | |

| 8553 URBANDALE AVE URBANDALE, IA 50322 | | | |
|---|----|-----------------|--------|
| DES MOINES PERFORMING ARTS 221 WALNUT STREET | PC | GENERAL SUPPORT | 17,500 |

| ORBANDALE, IA 50322 | | | |
|---|----|-----------------|--------|
| DES MOINES PERFORMING ARTS 221 WALNUT STREET DES MOINES, IA 50309 | PC | GENERAL SUPPORT | 17,500 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

any foundation manager

or substantial contributor

Name and address (home or business)

Total .

| a Paid during the year | | | |
|---|----|-----------------|--------|
| DES MOINES SYMPHONY ASSOCIATION 1011 LOCUST STREET 200 DES MOINES, IA 50309 | PC | GENERAL SUPPORT | 50,000 |
| DESERT BOTANICAL GARDENS 1201 N GALVIN PARKWAY PHOENIZ AZ 85008 | PC | GENERAL SUPPORT | 20,000 |

recipient

| 525 11011125,111 50505 | | | |
|--|----|-----------------|-----|
| DESERT BOTANICAL GARDENS 1201 N GALVIN PARKWAY PHOENIZ, AZ 85008 | PC | GENERAL SUPPORT | 20, |
| DUCKS UNLIMITED | PC | GENERAL SUPPORT | 10, |

| PHOENIZ, AZ 85008 | | | |
|---|----|-----------------|--------|
| DUCKS UNLIMITED ONE WATERFOWL WAY MEMPHIS, TN 38120 | PC | GENERAL SUPPORT | 10,000 |

Recipient If recipient is an individual, show any relationship to status of status of

| Name and address (home or business) | any foundation manager or substantial contributor | recipient | | |
|--|--|-----------|---------------------------|--------|
| a Paid during the year | | | | |
| ETHICS AND PUBLIC POLICY CENTER INC 1730 M STREET NW 910 WASHINGTON, DC 20036 | | PC | GENERAL SUPPORT | 35,000 |
| FIRE170 S INDEPENDENCE MALL W 510 PHILADELPHIA, PA 19106 | | PC | GENERAL SUPPORT | 25,000 |
| FIRST LUTHERAN CHURCH 1525 THREE CROSS ROAD MILFORD, IA 51351 | | PC | ORGAN RESTORATION PROJECT | 36,900 |

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year | | | |
|--|----|-----------------|--|
| FOOD BANK OF IOWAPO BOX 1517 DES MOINES, IA 50305 | PC | GENERAL SUPPORT | |

| · · | | |
|---|----|-----------------|
| TO CHOOSE NETWORK FILMORE AVENUE PA 16506 | PC | GENERAL SUPPORT |
| | | |

FREE T

| 2002 FILMORE AVENUE ERIE, PA 16506 | | | |
|---|----|--------------------------------|-------|
| FREE TO CHOOSE NETWORK 2002 FILMORE AVENUE | PC | CAPITAL EQUIPMENT PURCHASES | 21,43 |

25,000

150,000

| <u>'</u> | | | |
|---|----|--------------------------------|--------|
| FREE TO CHOOSE NETWORK 2002 FILMORE AVENUE ERIE, PA 16506 | PC | CAPITAL EQUIPMENT PURCHASES | 21,439 |

| 2002 FILMORE AVENUE PURCHASES PURCHASES | | | PC | CAPITAL EQUIPMENT PURCHASES | 21 |
|---|--|--|----|--------------------------------|----|
|---|--|--|----|--------------------------------|----|

| 2002 FILMORE AVENUE ERIE, PA 16506 | PURCHASES | |
|---------------------------------------|-----------|-----------|
| Total | ▶ 3a | 7,326,343 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year | | | |
|--|----|------------------------------------|--------|
| GILDER LEHRMAN INSTITUTE 49 W 45TH STREET 2ND FLOOR NEW YORK, NY 10036 | PC | 6 IOWA EDUCATORS TO GLI SEMINAR | 23,000 |
| | | | |

| • | | | |
|---|----|-----------------|--------|
| GREATER DES MOINES BOTANICAL GARDEN 909 ROBERT D RAY DR DES MOINES, IA 50309 | PC | GENERAL SUPPORT | 40,000 |
| GROUT MUSEUM DISTRICT | PC | GENERAL SUPPORT | 40,000 |

| 909 ROBERT D RAY DR DES MOINES, IA 50309 | | | |
|---|----|-----------------|--------|
| GROUT MUSEUM DISTRICT 503 SOUTH STREET WATERLOO, IA 50701 | PC | GENERAL SUPPORT | 40,000 |

| Total | | ▶ 3a | 7,326,343 |
|---|------|-----------------|-----------|
| GROUT MUSEUM DISTRICT 503 SOUTH STREET WATERLOO, IA 50701 | PC | GENERAL SUPPORT | 40,000 |
| DES MOINES, IA 50309 | | | |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| T | | DENEWAY AND LOCKED | 242.000 |
|--|----|--------------------|---------|
| HEARING HEALTH FOUNDATION 363 SEVENTH AVENUE 10TH FLOOR NEW YORK, NY 100013904 | PC | GENERAL SUPPORT | 35,000 |

| THE HOOVER INSTITUTION | PC | RENEWING INDIGENOUS | 210,000 |
|------------------------|----|---------------------|---------|
| 434 GALVEZ MALL | | ECONOMIES | |
| STANFORD, CA 94305 | | | |

| STANFORD, CA 94305 | | ECONOMIES | |
|----------------------------------|----|-----------------|--------|
| HUDSON INSTITUTE1015 15TH STREET | PC | GENERAL SUPPORT | 25,000 |

| STANFORD, CA 94305 | | | |
|--|----|-----------------|--------|
| HUDSON INSTITUTE1015 15TH STREET WASHINGTON, DC 20005 | PC | GENERAL SUPPORT | 25,000 |

| HUDSON INSTITUTE1015 15TH STREET | PC | GENERAL SUPPORT | 25,00 |
|----------------------------------|----|-----------------|-------|
| WASHINGTON, DC 20005 | | | |

| HODSON INSTITUTE TOTS TOTH STREET | l | | GENERAL SOLLOKI | 25,0 |
|-----------------------------------|---|--|-----------------|------|
| WASHINGTON, DC 20005 | | | | |
| | | | | |

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

| PC | GENERAL SUPPORT | 25,000 |
|----|-----------------|--------------------|
| | PC | PC GENERAL SUPPORT |

| ARLINGTON, VA 22203 | | | |
|--|----|-----------------|--------|
| INTERNATIONAL DARK SKY ASSOCIATION 3223 NORTH FIRST AVE TUSON, AZ 85719 | PC | GENERAL SUPPORT | 20,000 |

| 3223 NORTH FIRST AVE TUSON, AZ 85719 | | | |
|---|----|-----------------|--------|
| IOWA 4H FOUNDATION 1259 STANGE ROAD | PC | GENERAL SUPPORT | 10,000 |
| AMES 14 50011 | | | |

| TUSUN, AZ 85/19 | | | |
|--|----|-----------------|--------|
| IOWA 4H FOUNDATION 1259 STANGE ROAD AMES, IA 50011 | PC | GENERAL SUPPORT | 10,000 |
| | | | |

| Total | | ▶ 3a | 7.326.343 |
|------------------------------------|------|-----------------|-----------|
| 1259 STANGE ROAD AMES, IA 50011 | | | |
| IOWA 4H FOUNDATION | PC | GENERAL SUPPORT | 10,000 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

or substantial contributor

Total .

| a Paid during the year | | | |
|---------------------------------|----|-----------------|--------|
| IOWA ARBORETUM1875 PEACH STREET | PC | GENERAL SUPPORT | 15,000 |

| MADRID, IA 50136 | | | |
|--|----|-----------------|--|
| IOWA BARN FOUNDATIONPO BOX 436 NEVADA, IA 50201 | PC | GENERAL SUPPORT | |
| | | | |

| IOWA BARN FOUNDATIONPO BOX 436 NEVADA, IA 50201 | PC | GENERAL SUPPORT | 50,000 |
|--|----|-----------------|--------|
| IOWA HISTORICAL FOUNDATION 600 E LOCUST STREET | PC | GENERAL SUPPORT | 25,000 |

| IOWA HISTORICAL FOUNDATION | PC | GENERAL SUPPORT | 25,000 |
|----------------------------|----|-----------------|--------|
| 600 E LOCUST STREET | | | |
| DES MOINES, IA 50319 | | | |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year | | | |
|---|----|-----------------|--------|
| IOWA LEGAL AID1111 9TH ST STE 230 DES MOINES, IA 50314 | PC | GENERAL SUPPORT | 25,000 |
| IOWA LUTHERAN HOSPITAL | PC | GENERAL SUPPORT | 1,000 |

| 1415 WOODLAND AVE E-200 DES MOINES, IA 50309 | rc | GENERAL SUPPORT | 1,000 |
|---|----|--------------------------------|--------|
| IOWA METHODIST MEDICAL CENTER 1415 WOODLAND AVENUE SUITE E-200 | PC | ICU UNIT SOCIAL WORKER FUND | 50,000 |

| DES MOINES, IA 50309 | | | |
|---|----|--------------------------------|--------|
| IOWA METHODIST MEDICAL CENTER 1415 WOODLAND AVENUE SUITE E-200 DES MOINES, IA 50309 | PC | ICU UNIT SOCIAL WORKER FUND | 50,000 |

| IOWA METHODIST MEDICAL CENTER 1415 WOODLAND AVENUE SUITE E-200 DES MOINES, IA 50309 | PC | ICU UNIT SOCIAL WORKER FUND | 50,000 |
|---|------|--------------------------------|-----------|
| Total | | ▶ 3a | 7,326,343 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year | | | |
|--|----|--------------------------------|-------|
| IOWA METHODIST MEDICAL CENTER 1415 WOODLAND AVENUE SUITE E-200 DES MOINES IA 50309 | PC | ICU UNIT SOCIAL WORKER FUND | 5,000 |

| DES MOINES, IA 50309 | | | |
|--|----|-----------------|--------|
| IOWA YOUTH CHORUS 6301 UNIVERSITY AVENUE SUITE 208 WINDSOR HEIGHTS, IA 50324 | PC | GENERAL SUPPORT | 30,000 |
| | | | |

| 6301 UNIVERSITY AVENUE SUITE 208 WINDSOR HEIGHTS, IA 50324 | | | |
|---|----|-----------------|-----|
| JASPER COUNTY CONCERT ASSOCIATION PO BOX 1252 | PC | GENERAL SUPPORT | 500 |

| JASPER COUNTY CONCERT ASSOCIATION | | PC | GENERAL SUPPORT | 500 |
|-----------------------------------|---|----|-----------------|-----|
| PO BOX 1252 NEWTON, IA 50208 | | | | |
| | I | I | l . | 1 |

7,326,343

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

| | or substantial contributor | | | |
|------------------------|----------------------------|----|-----------------|--------|
| a Paid during the year | | | | |
| JUST FACTS INC | | PC | GENERAL SUPPORT | 20,000 |

| FLORHAM PARK, NJ 07932 | | | |
|--|----|-----------------|--------|
| LIVING HISTORY FARMS 2600 111TH STREET URBANDALE, IA 50322 | PC | GENERAL SUPPORT | 25,000 |

| 2600 111TH STREET URBANDALE, IA 50322 | | | , |
|---|----|-----------------|--------|
| MANHATTAN INSTITUTE FOR POLICY RESEARCH 52 VANDERBILT AVE 3RD FLOOR | PC | GENERAL SUPPORT | 75,000 |

| MANHATTAN INSTITUTE FOR POLICY RESEARCH | PC | GENERAL SUPPORT | 75,000 |
|--|----|-----------------|--------|
| 52 VANDERBILT AVE 3RD FLOOR | | | |
| NEW YORK, NY 10017 | | | |

7,326,343

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year | | | |
|--|----|-----------------|--------|
| MIRACLE FLIGHTS FOR KIDS 6396 MCLEOD DR | PC | GENERAL SUPPORT | 10,000 |
| LAS VEGAS, NV 89120 | | | |

| LAS VEGAS, NV 89120 | | | |
|--|----|-----------------|--------|
| MOSAIC11141 AURORA AVE BLDG 3 URBANDALE, IA 50322 | PC | GENERAL SUPPORT | 20,000 |
| NATIONAL ASSOCIATION OF SCHOLARS | PC | GENERAL SUPPORT | 60,000 |

| ONDANDALL, IA 30322 | | | |
|---|----|-----------------|--------|
| NATIONAL ASSOCIATION OF SCHOLARS 8 W 38TH ST SUITE 503 NEW YORK, NY 10018 | PC | GENERAL SUPPORT | 60,000 |
| | | | |

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| NEWTON COMMUNITY THEATER 1701 S 8TH AVE E NEWTON, IA 50208 | PC | GENERAL SUPPORT | 1,000 |
|--|------|-----------------|--------|
| NEWTON COMMUNITY CENTER | SO I | GENERAL SUPPORT | 30,000 |

| NEWTON COMMUNITY CENTER PO BOX 1166 NEWTON, IA 50208 | SO I | GENERAL SUPPORT | 30,000 |
|--|------|-----------------|--------|
| ORCHARD PLACE2116 GRAND AVENUE | PC | GENERAL SUPPORT | 60,000 |

| NEWTON, IA 50208 | | | |
|--|----|-----------------|--------|
| ORCHARD PLACE2116 GRAND AVENUE DES MOINES, IA 50312 | PC | GENERAL SUPPORT | 60,000 |

7,326,343

| ORCHARD PLACE2116 GRAND AVENUE DES MOINES, IA 50312 | PC | GENERAL SUPPORT | 60,00 |
|--|----|-----------------|-------|
| | | | |

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

PROGRESS INDUSTRIES

Total .

202 N 3RD AVE W NEWTON, IA 50208 PROPERTY AND ENVIRONMENTAL PC GENERAL SUPPORT 50,000 DESEADOH CENTED

PC

GENERAL SUPPORT

5,000

| 2048 ANALYSIS DRIVE SUITE A BOZEMAN, MT 59718 | | | |
|---|----|-----------------|--------|
| PROVIDENCE ST MEL SCHOOL 119 S CENTRAL PARK BLVD | PC | GENERAL SUPPORT | 45,000 |

| BOZEMAN, MI 33710 | | | |
|--|----|-----------------|--------|
| PROVIDENCE ST MEL SCHOOL 119 S CENTRAL PARK BLVD CHICAGO, IL 60624 | PC | GENERAL SUPPORT | 45,000 |
| | | | |

| a Paid during the year | | | |
|--|----|---------------------------|-----------|
| SAVE THE REDWOOD LEAGUE 111 SUTTER STREET 11TH FLOOR SAN FRANCISCO, CA 94104 | PC | RED HILL LAND ACQUISITION | 3,342,691 |
| | | | |

| SCIENCE CENTER OF IOWA 401 W MARTIN LUTHER KING JR PARKWAY DES MOINES, IA 50208 | PC | GENERAL SUPPORT | 30,000 |
|--|----|-----------------|--------|
| SKIFF HOSPICE OF JASPER COUNTY | PC | GENERAL SUPPORT | 30,000 |

| DES MOINES, IA 50208 | | | <u>I</u> |
|---|----|-----------------|-----------|
| SKIFF HOSPICE OF JASPER COUNTY 204 N 4TH AVE E NEWTON, IA 50208 | PC | GENERAL SUPPORT | 30,000 |
| Total | | > 3a | 7 326 343 |

Recipient

If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Foundation purpose of grant or contribution recipient

Status of recipient recipient

a Paid during the year

505 5TH AVE 930 DES MOINES, IA 50309

THE NATURE CONSERVANCY IN IOWA

| SKIFF MEDICAL CENTER FOUNDATION 204 N 4TH AVE E NEWTON, IA 50208 | PC | GE CENTRICITY SYSTEM FOR OBSTETRICS DEPT | 35,000 |
|--|----|--|---------|
| STONE AGE INSTITUTEPO BOX 5097 BLOOMINGTON, IN 474075097 | PC | GENERAL SUPPORT | 100,000 |

PC

LAND ACQUISITION

▶ 3a

30,098

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager

or substantial contributor

Name and address (home or business)

Total .

| a Paid during the year | | | |
|---|----|--------------------------|-----------|
| THE NATURE CONSERVANCY IN IOWA 505 5TH AVE 930 DES MOINES, IA 50309 | PC | GENERAL SUPPORT | 100,000 |
| THE NATURE CONSERVANCY IN IOWA | PC | HOLIDAY LAND ACQUISITION | 1,301,718 |

recipient

7,326,343

| THE NATURE CONSERVANCY IN IOWA 505 5TH AVE 930 DES MOINES, IA 50309 | PC | HOLIDAY LAND ACQUISITION | 1,301,718 |
|---|----|---------------------------|-----------|
| THE NATURE CONSERVANCY IN IOWA 505 5TH AVE 930 | PC | DIRECTORS INNOVATION FUND | 30,897 |

| 505 5TH AVE 930 DES MOINES, IA 50309 | | | |
|---|----|---------------------------|------|
| THE NATURE CONSERVANCY IN IOWA 505 5TH AVE 930 DES MOINES. IA 50309 | PC | DIRECTORS INNOVATION FUND | 30,8 |

| /E3 MOINES, IA 30309 | | | |
|---|----|---------------------------|-------|
| HE NATURE CONSERVANCY IN IOWA 05 5TH AVE 930 IES MOINES. IA 50309 | PC | DIRECTORS INNOVATION FUND | 30,89 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of

| Name and address (home or business) | or substantial contributor | recipient | | |
|-------------------------------------|----------------------------|-----------|-----------------|--------|
| a Paid during the year | | | | |
| THE NEW CRITERION | | PC | GENERAL SUPPORT | 85,000 |

| 1200 PLEASANT STREET DES MOINES, IA 50309 | | GENERAL SOIT ORT | |
|--|----|--|--|
| UCP WHEELS FOR HUMANITY 9509 VASSAR AVE STE A | PC | TO PAY MISSED 2016 AGREEMENT - MADE JUNE 2015 | |

| DES | | | |
|--|----|--|--------|
| UCP WHEELS FOR HUMANITY 9509 VASSAR AVE STE A CHATSWORTH, CA 91311 | PC | TO PAY MISSED 2016 AGREEMENT - MADE JUNE 2015 | 25,000 |
| UNITED WAY - JASPER COUNTY | PC | GENERAL SUPPORT | 20,000 |

| CHATSWORTH, CA 91311 | | | |
|--|----|-----------------|--------|
| UNITED WAY - JASPER COUNTY 312 1ST AVE WEST NEWTON, IA 50208 | PC | GENERAL SUPPORT | 20,000 |

| UNITED WAY - JASPER COUNTY 312 1ST AVE WEST NEWTON, IA 50208 | PC | GENERAL SUPPORT | 20,000 |
|--|------|-----------------|-----------|
| Total | | ▶ 3a | 7,326,343 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

| a Paid during the year | | | |
|--|----|-----------------|--------|
| VISITING NURSE & HOSPICE CARE 509 E MONTECITO ST STE 200 SANTA BARBARA, CA 93103 | PC | GENERAL SUPPORT | 20,000 |

| SANTA BARBARA, CA 93103 | | | |
|---|----|----------------------------------|--------|
| VOX PRESS INCPO BOX 2954 OXFORD, MS 38655 | PC | 12 WEEK PRE-COLLEGE WORKSHOPS | 4,600 |
| WESLEY RETIREMENT SERVICES 5508 NW 88TH ST | PC | GENERAL SUPPORT | 30,000 |

| WESLEY RETIREMENT SERVICES 5508 NW 88TH ST JOHNSTON, IA 50131 PC GENERAL SUPPORT | 30,000 |
|---|--------|

Total .

7,326,343

| efile GRAPHIC print - DO NOT F | ROCESS | As Filed Dat | a - | D | LN: 93491317030589 | |
|----------------------------------|-------------------------------------|--------------|--------------------------|------------------------|---|--|
| TY 2018 Accounting Fees Schedule | | | | | | |
| | | | | | | |
| | Name: FRED MAYTAG FAMILY FOUNDATION | | | | | |
| EIN: 42-1444870 | | | | | | |
| Category | Ame | ount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | |

23,200

ACCOUNTING FEES

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | | | | |
|--|-----------------|--|--|--|--|
| T/ 2010 To a standard Comment | - 61 1 6 - 1 | | | | |
| TY 2018 Investments Corporate Stock Schedule | | | | | |

Name: FRED MAYTAG FAMILY FOUNDATION

DLN: 93491317030589

anie. Thebring

EIN: 42-1444870

| Investments Corporation Stock Schedule | | |
|--|---------------------------|----------------------------------|
| Name of Stock | End of Year Book Value | End of Year Fair Market Value |
| BERKSHIRE HATHAWAY INC-CL B 17,899.00 SHARES | 1,939,155 | 3,654,618 |
| BBH CORE SELECT CL N 280,817.01 SHARES | 6,271,170 | 3,608,499 |
| SEQUOIA FUND 23,984.54 SHARES | 8,884,376 | 3,170,757 |
| VANGUARD TOTL STK MKT IND-SG 578,155.42 SHARES | 23,183,762 | 35,897,670 |
| LONG LEAF PARTNERS 241,915.05 SHARES | 6,660,981 | 5,346,323 |
| UNREALIZED GAINS | 4,738,422 | 0 |

| efile GRAPHIC print - DO NOT PROCES | SS As Filed Data | - | DLI | N: 93491317030589 | | |
|---|------------------------|-----------------|-------|-------------------|--|--|
| TY 2018 Legal Fees Schedule | | | | | | |
| | | | | | | |
| Nan | ne: FRED MAYTA | AG FAMILY FOUND | ATION | | | |
| E | EIN: 42-1444870 | | | | | |
| Category Amount Net Investment Adjusted Net Disbursements Income Income for Charitable Purposes | | | | | | |
| LEGAL FEES | 2,968 | 2,226 | | 742 | | |

As Filed Data -

Other Assets Schedule

PART OF LOT 5, MADSEN S/D

Description

EIN: 42-1444870

111,353

Beginning of Year -

Book Value

DLN: 93491317030589

End of Year - Book

End of Year - Fair

Market Value

102,400

Value

| D | Amount | | | | | |
|--------------------------------------|-----------------|--|---------------------|--|--|--|
| EIN: | 42-1444870 | | | | | |
| Name: FRED MAYTAG FAMILY FOUNDATION | | | | | | |
| TY 2018 Other Decreases Schedule | | | | | | |
| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | | DLN: 93491317030589 | | | |

7,346,780

UNREALIZED LOSS ON INVESTMENTS

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | | DLN: | 93491317030589 | | |
|--------------------------------------|--------------------------------------|--------------------------|------------------------|---|--|--|
| TY 2018 Other Expenses Schedule | | | | | | |
| | | | | | | |
| Name: FRED MAYTAG FAMILY FOUNDATION | | | | | | |
| EIN: 42-1444870 | | | | | | |
| Other Expenses Schedule | | | | | | |
| Description | Revenue and Expenses per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | | |

10,396

525

218

116

261

3,035

NEWTON PROPERTY EXPENSES

POSTAGE AND SHIPPING

OFFICE SUPPLIES

INSURANCE

BANK FEES

TRAVEL

10,396

263

109

58

131

1,518

262

109

58

130

EIN: 42-1444870

Name: FRED MAYTAG FAMILY FOUNDATION

IRS REFUND

| Other Income Schedule | | |
|-----------------------|-------------|----------------|
| Description | Revenue And | Net Investment |

DLN: 93491317030589

Expenses Per Books

51,561

Income

Adjusted Net Income

| EIN: 42-1444870 | | | | | | | |
|--|---------------|---|-----|-------------------|--|--|--|
| Name: FRED MAYTAG FAMILY FOUNDATION | | | | | | | |
| TY 2018 Other Professional Fees Schedule | | | | | | | |
| efile GRAPHIC print - DO NOT PROCESS | As Filed Data | - | DLI | N: 93491317030589 | | | |

| 12 1111070 | | | | | |
|------------|--------|--------------------------|------------------------|---|--|
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | |

151,643

INVESTMENT FEES

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data | - | DLI | N: 93491317030589 | | |
|--------------------------------------|---------------------|--------------------------|------------------------|---|--|--|
| TY 2018 Taxes Schedule | | | | | | |
| | | | | | | |
| Name | : FRED MAYTA | AG FAMILY FOUND | ATION | | | |
| EIN | : 42-1444870 | | | | | |
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | | |
| INVESTMENT PROPERTY TAXES | 4,032 | 4,032 | | 0 | | |