

For calendar year 2018, or tax year beginning 07-01-2018, and ending 06-30-2019

Name of foundation TODD AND MARY HEISTAND FAMILY FOUNDATION		A Employer identification number 46-1604788	
Number and street (or P O box number if mail is not delivered to street address) 514 WALKER ST		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code WOODBINE, IA 51579		B Telephone number (see instructions) (712) 647-2041	
G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change		D 1. Foreign organizations, check here 2 Foreign organizations meeting the 85% test, check here and attach computation	
H Check type of organization ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶\$ 1,380,914		J Accounting method ☒ Cash ☐ Accrual ☐ Other (specify) _____ (Part I, column (d) must be on cash basis)	
		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	260,000			
	2 Check ☒ if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	336	336		
	4 Dividends and interest from securities	15,138	15,138		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	-206		-206	
	12 Total. Add lines 1 through 11	275,268	15,474	-206	
	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages	13,200			13,200
	15 Pension plans, employee benefits	1,052			1,052
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	1,250			1,250
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	1,766			1,766
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy	506			506
	21 Travel, conferences, and meetings	245			245
	22 Printing and publications				
	23 Other expenses (attach schedule)	36,954			36,954
	24 Total operating and administrative expenses. Add lines 13 through 23	54,973	0		54,973
	25 Contributions, gifts, grants paid	448,769			448,769
	26 Total expenses and disbursements. Add lines 24 and 25	503,742	0		503,742
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-228,474			
	b Net investment income (if negative, enter -0-)		15,474		
	c Adjusted net income (if negative, enter -0-)				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		
		Beginning of year (a) Book Value	End of year (b) Book Value (c) Fair Market Value	
Assets	1 Cash—non-interest-bearing	284,768	61,321	61,321
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use	64,726	324,220	324,220
	9 Prepaid expenses and deferred charges			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	1,258,857	995,373	995,373
	14 Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	1,608,351	1,380,914	1,380,914	
Liabilities	17 Accounts payable and accrued expenses	20,850	21,899	
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)	706	694	
	23 Total liabilities (add lines 17 through 22)	21,556	22,593	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ☒ and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted	1,586,795	1,358,321	
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ☐ and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg, and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
	30 Total net assets or fund balances (see instructions)	1,586,795	1,358,321	
31 Total liabilities and net assets/fund balances (see instructions) .	1,608,351	1,380,914		

Part III Analysis of Changes in Net Assets or Fund Balances		
1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	1,586,795
2 Enter amount from Part I, line 27a	2	-228,474
3 Other increases not included in line 2 (itemize) ▶ _____	3	
4 Add lines 1, 2, and 3	4	1,358,321
5 Decreases not included in line 2 (itemize) ▶ _____	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	1,358,321

Part IV Capital Gains and Losses for Tax on Investment Income

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

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

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

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

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

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

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

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

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2017	982,599	965,422	1 017792
2016	519,468	1,353,088	0 383913
2015	145,537	951,748	0 152915
2014	158,617	692,952	0 228900
2013	64,549	548,425	0 117699

2 Total of line 1, column (d)	2	1 901219
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years	3	0 380244
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	845,633
5 Multiply line 4 by line 3	5	321,547
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	155
7 Add lines 5 and 6	7	321,702
8 Enter qualifying distributions from Part XII, line 4	8	503,742

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

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

1a	Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☒ and enter 1% of Part I, line 27b	1	155
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	
3	Add lines 1 and 2.	3	155
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	155
6	Credits/Payments		
a	2018 estimated tax payments and 2017 overpayment credited to 2018	6a	128
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	128
8	Enter any penalty for underpayment of estimated tax. Check here ☒ if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	27
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶	10	
11	Enter the amount of line 10 to be Credited to 2019 estimated tax ▶ Refunded ▶	11	

Part VII-A Statements Regarding Activities

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

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions.	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>WWW.HEISTANDFAMILYFOUNDATION.ORG</u>	13	Yes	
14	The books are in care of ► <u>CARRIE MURDOCK</u> Telephone no ► <u>(712) 647-2041</u>			

Located at ► 514 WALKER ST WOODBINE IA ZIP+4 ► 51579

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here	☐		
	and enter the amount of tax-exempt interest received or accrued during the year	► 15		
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ►			

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

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

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

		Yes	No
5a	During the year did the foundation pay or incur any amount to		
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes	☒ No
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	☐ Yes	☒ No
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes	☒ No
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	☐ Yes	☒ No
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes	☒ No
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.	5b	
	Organizations relying on a current notice regarding disaster assistance check here.	☐	
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d)	☐ Yes	☐ No
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes	☒ No
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870	6b	
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes	☒ No
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	7b	
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	☐ Yes	☒ No

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

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000.				☐

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services. ►		

Part IX-A Summary of Direct Charitable Activities

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

	Expenses
1 EDUCATES AND EMPOWERS KIDS AND FAMILIES TO CREATE SAFE, HEALTHY, SUCCESSFUL AND CONNECTED COMMUNITY IN EFFORT TO BREAK THE CYCLE OF POVERTY	36,100
2 TO SERVE HOMELESS AND AT-RISK YOUTH BY PROVIDING CRITICALLY-NEEDED RESOURCES WHICH EMPOWER THEM TO BECOME SELF-SUFFICIENT	35,000
3 EDUCATE AREA YOUTH IN THE TRADE OF HOME BUILDING CONSTRUCTION AS STATED IN THE ORGANIZATION'S MISSION STATEMENT PROVIDE STEM TECHNOLOGY TO CLASSROOMS	34,000
4 PROVIDE HEALTH & FAMILY SUPPORT SERVICES EDUCATE PARENTS ON HOW TO INFLUENCE THEIR CHILDREN THROUGH EDUCATION, EMPOWERMENT & WELLNESS	25,000

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

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

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	488,763
b	Average of monthly cash balances.	1b	45,528
c	Fair market value of all other assets (see instructions).	1c	324,220
d	Total (add lines 1a, b, and c).	1d	858,511
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	858,511
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	12,878
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	845,633
6	Minimum investment return. Enter 5% of line 5.	6	42,282

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

1	Minimum investment return from Part X, line 6.	1	42,282
2a	Tax on investment income for 2018 from Part VI, line 5.	2a	155
b	Income tax for 2018 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	155
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	42,127
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	42,127
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	42,127

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	503,742
b	Program-related investments—total from Part IX-B.	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	503,742
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	155
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	503,587

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				42,127
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only.				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2018				
a From 2013.				
b From 2014.				
c From 2015.				
d From 2016.				452,220
e From 2017.				934,792
f Total of lines 3a through e.	1,387,012			
4 Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ 503,742				
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).				
d Applied to 2018 distributable amount.				42,127
e Remaining amount distributed out of corpus	461,615			
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,848,627			
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—see instructions				
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				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).				
8 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions).				
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	1,848,627			
10 Analysis of line 9				
a Excess from 2014.				
b Excess from 2015.				
c Excess from 2016.				452,220
d Excess from 2017.				934,792
e Excess from 2018.				461,615

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

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. ▶					
b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)					
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .					
c "Support" alternative test—enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . .					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

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

Part XV	
1 Information Regarding Foundation Managers:	
a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))	
b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest	
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:	
Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.	
a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed CARRIE MURDOCK 514 WALKER ST WOODBINE, IA 51579 (712) 647-2041 NONE	
b The form in which applications should be submitted and information and materials they should include WRITTEN LETTER	
c Any submission deadlines NONE	
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors NONE EXCEPT THE REQUESTING ORGANIZATION BE A TAX EXEMPT ENTITY	

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

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

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1	Program service revenue					
a	_____					
b	_____					
c	_____					
d	_____					
e	_____					
f	_____					
g	Fees and contracts from government agencies					
2	Membership dues and assessments.					
3	Interest on savings and temporary cash investments					336
4	Dividends and interest from securities.					15,138
5	Net rental income or (loss) from real estate					
a	Debt-financed property.					
b	Not debt-financed property.					
6	Net rental income or (loss) from personal property					
7	Other investment income.					
8	Gain or (loss) from sales of assets other than inventory					
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue					
a	CONSTRUCTION INCOME _____					18,353
b	K-1 INCOME _____					-18,559
c	_____					
d	_____					
e	_____					
12	Subtotal Add columns (b), (d), and (e).					15,268
13	Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.)					15,268

[illegible]

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

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash.	1a(1)		No
(2) Other assets.	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization.	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization.	1b(2)		No
(3) Rental of facilities, equipment, or other assets.	1b(3)		No
(4) Reimbursement arrangements.	1b(4)		No
(5) Loans or loan guarantees.	1b(5)		No
(6) Performance of services or membership or fundraising solicitations.	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	1c		No

d If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

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

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

b If "Yes," complete the following schedule

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

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

Sign Here ***** Signature of officer or trustee	2019-11-04 Date	***** Title
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May the IRS discuss this return with the preparer shown below
 (see instr)? ☒ Yes ☐ No

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ☐	PTIN
	BRAD R GROSS CPA		2019-11-04		P00191368
	Firm's name GROSS & COMPANY PLLC				Firm's EIN 47-5125931
Firm's address 613 IOWA AVE DUNLAP, IA 515291046					Phone no (712) 643-5158

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
TODD R HEISTAND	PRESIDENT/DI 000 00	0	0	0
514 WALKER AVENUE WOODBINE, IA 51579				
CARRIE J MURDOCK	SECRETARY/DI 000 00	0	0	0
1400 QUAY AVENUE WOODBINE, IA 51579				
BRAD R GROSS	TREASURER/DI 000 00	0	0	0
312 HIGHWAY 37 EARLING, IA 51530				
MARY J HEISTAND	DIRECTOR 000 00	0	0	0
514 WALKER AVENUE WOODBINE, IA 51579				
MINDY K CROOK	DIRECTOR 000 00	0	0	0
702 WALKER AVENUE WOODBINE, IA 51579				
KASSEY A BARTELS	DIRECTOR 000 00	0	0	0
43 9TH STREET WOODBINE, IA 51579				
MATTHEW T HEISTAND	DIRECTOR 000 00	0	0	0
3400 180TH STREET WOODBINE, IA 51579				
MICHAEL D MATEJKA	DIRECTOR 000 00	0	0	0
10250 REGENCY CIRCLE SUITE 525 OMAHA, NE 681149625				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AFRICAN AMERICAN EMPOWERMENT NTWK 1015 N 98TH STREET SUITE 200 OMAHA, NE 68114		PC	OPERATING EXPENSES	5,000
ALL CARE HEALTH CENTER 902 SOUTH 6TH STREET COUNCIL BLUFFS, IA 51051		PC	GRANT	15,000
BIG BROTHERS BIG SISTERS - MIDLANDS 10831 OLD MILL RD SUITE 400 OMAHA, NE 68154		PC	COMMUNITY SERVICES	10,000
Total			▶ 3a	448,769

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BOYS TOWN14100 CRAWFORD ST OMAHA, NE 68105		PC	GRANT	20,000
CAMP CONFIDENCE - BUFORD FOUNDATION 13303 F STREET OMAHA, NE 68137		PC	OPERATING EXPENSES	2,000
CAROLE'S HOUSE OF HOPE 7815 HARNEY STREET OMAHA, NE 68114		PC	OPERATING EXPENSES	5,000
Total ► 3a				448,769

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CASA OF DOUGLAS COUNTY NEBRASKA 2412 ST MARYS AVENUE OMAHA, NE 68105		PC	OPERATING EXPENSES	10,000
CHILD SAVINGS INSTITUTE 4545 DODGE STREET OMAHA, NE 68132		PC	GRANT	15,000
COMPLETELY KIDS 2566 ST MARYS AVENUE OMAHA, NE 68105		PC	GRANT	10,000
Total ► 3a				448,769

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
DUNLAP FOOD PANTRY714 IOWA AVE DUNLAP, IA 51529		PC	OPERATING EXPENSES	500
FAMILY INC 3501 HARRY LANGDON BLVD SUITE 150 COUNCIL BLUFFS, IA 51503		PC	COMMUNITY SERVICES	25,000
FOODBANK FOR THE HEARTLAND 10525 J STREET OMAHA, NE 68127		PC	GRANT	2,000
Total ▶ 3a				448,769

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GABRIEL'S CORNERPO BOX 812 COUNCIL BLUFFS, IA 51502		PC	OPERATING EXPENSES	4,000
GIRLS INC2811 N 45TH STREET OMAHA, NE 68104		PC	GRANT	15,000
GRIEF'S JOURNEY7811 FARNAM DRIVE OMAHA, NE 68114		PC	GRANT	5,000
Total ▶ 3a				448,769

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HARRISON COUNTY PUBLIC HEALTH 116 N 2ND AVENUE LOGAN, IA 51546		PC	LEARNING FOR LIFE PROGRAM	2,000
HEARTLAND FAMILY SERVICES 2101 S 42ND STREET OMAHA, NE 68105		PC	NORTH OMAHA INTERGENERATIONAL FUND	36,100
INCLUSIVE COMMUNITIES 6001 DODGE STREET OMAHA, NE 68182		PC	OPERATING EXPENSES	2,500
Total ► 3a				448,769

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JOSLYN ART MUSEUM 2200 DODGE STREET OMAHA, NE 68102		PC	OPERATING EXPENSES	1,000
KIDS CAN COMMUNITY CENTER 4860 Q STREET OMAHA, NE 68117		PC	GRANT	15,000
LUTHERAN FAMILY SERVICES 120 S 24TH ST STE 100 OMAHA, NE 68102		PC	GRANT	10,000
Total ► 3a				448,769

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MERCY MEDICAL MIDWEST 7241 EDNA CT LAVISTA, NE 68128		PC	GRANT	5,000
MICAH HOUSE1415 AVENUE J COUNCIL BLUFFS, IA 51501		PC	OPERATING EXPENSES	35,000
NORTHSTAR FOUNDATION 4242 NORTH 49TH AVENUE OMAHA, NE 68104		PC	GRANT	10,000
Total ▶ 3a				448,769

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
OMAHA BY DESIGN 6001 DODGE STREET OMAHA, NE 68182		PC	COMMUNITY BETTERMENT	25,000
OMAHA CHILDREN'S MUSEUM 500 S 20TH STREET OMAHA, NE 68102		PC	OPERATIONAL NEEDS OF MUSEUM	5,000
OMAHA HOME FOR BOYS 4343 N 52ND STREET OMAHA, NE 68104		PC	GRANT	7,500
Total ▶ 3a				448,769

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ONE WORLD COMMUNITY HEALTH CENTERS 4920 S 30TH STREET OMAHA, NE 68107		PC	DINNER	10,000
OPEN DOOR MISSION LYDIA CENTER 2809 N 20TH STREET OMAHA, NE 68110		PC	OPERATING EXPENSES	500
PACE POTTAWATTAMIE CO ARTS & CULTUR 1228 SOUT MAIN STREET SUITE 115 COUNCIL BLUFFS, IA 51503		PC	OPERATING EXPENSES	2,500
Total ▶ 3a				448,769

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
RAISE ME TO READ 3501 HARRY LANGDON BLFD SUITE 150 COUNCIL BLUFFS, IA 51503		PC	OPERATING EXPENSES	5,000
REJUVENATING WOMENPO BOX 207 BOYS TOWN, NE 68010		PC	OPERATING EXPENSES	2,500
TEAMMATES OF BOYER VALLEY 1102 IOWA AVE DUNLAP, IA 51529		PC	COMMUNITY SERVICES	500
Total ▶ 3a				448,769

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TEAMMATES OF LOGAN1200 N 2ND AVE LOGAN, IA 51546		PC	COMMUNITY SERVICES	500
TEAMMATES OF MISSOURI VALLEY 605 LINCOLN AVE MISSOURI VALLEY, IA 51555		PC	COMMUNITY SERVICES	500
TEAMMATES OF WEST HARRISON 410 PINE STREET MONDAMIN, IA 51557		PC	COMMUNITY SERVICES	500
Total ▶ 3a				448,769

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TEAMMATES OF WOODBINE 501 WEARE STREET WOODBINE, IA 51579		PC	COMMUNITY SERVICES	1,000
THE EXPERIENCE MINISTRIES INC 11245 TAMORRON COURT PARKER, CO 80138		PC	GRANT	25,000
THE FINANCIAL HOPE COLLABORATIVE 2500 CALIFORNIA PLAZA OMAHA, NE 68178		PC	OPERATING EXPENSES	12,000
Total ► 3a				448,769

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE OUTREACH PROGRAM 301 CENTER STREET UNION, IA 50258		PC	GRANT	5,000
TIMBER CREEK THERAPIES 2400 POPLAR AVE GUTHRIE CENTER, IA 50115		PC	OPERATING EXPENSES	1,000
TOGETHER INC OF METRO OMAHA 812 SOUTH 24TH STREET OMAHA, NE 68108		PC	OPERATING EXPENSES	1,000
Total ▶ 3a				448,769

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
UNITED WAY OF THE MIDLANDS 2201 FARNAM STREET OMAHA, NE 68102		PC	GRANT	15,000
WINGS OF REFUGEPO BOX 562 IOWA FALLS, IA 50126		PC	OPERATIONAL COSTS	6,069
WOODBINE BETTERMENT DEVELOPMENT 313 WALKER STREET WOODBINE, IA 51579		PC	COMMUNITY DEVELOPMENT	10,000
Total ▶ 3a				448,769

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WOODBINE COMMUNITY FOOD BANK PO BOX 255 WOODBINE, IA 51579		PC	OPERATING EXPENSES	1,000
WOODBINE COMMUNITY FOUNDATION PO BOX 139 WOODBINE, IA 51579		PC	COMMUNITY SERVICES	4,500
WOODBINE COMMUNITY SCHOOL 501 WEARE STREET WOODBINE, IA 51579		PC	GRANT, STEM	34,000
Total ▶ 3a				448,769

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WOODBINE MAINSTREET 313 WALKER STREET WOODBINE, IA 51579		PC	OPERATING EXPENSES	2,100
WOODBINE OPTIMIST CLUB 514 WALKER STREET WOODBINE, IA 51579		PC	DIAPER DRIVE HARRISON COUNTY	1,500
YOU TURN2505 N 24TH STREET SUITE 211 OMAHA, NE 68110		PC	OPERATING EXPENSES	5,000
Total ▶ 3a				448,769

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
YOUTH EMERGENCY SERVICES ATTN MARY FRASER MEINTS 2679 FARNAM STREET 205 OMAHA, NE 68131		PC	GRANT	4,500
Total ► 3a				448,769

TY 2018 Accounting Fees Schedule

Name: TODD AND MARY HEISTAND FAMILY
FOUNDATION

EIN: 46-1604788

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INDIRECT ACCOUNTING FEES	1,250			1,250

TY 2018 Investments - Other Schedule

Name: TODD AND MARY HEISTAND FAMILY
FOUNDATION

EIN: 46-1604788

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
BAIRD	AT COST	201,946	201,946
FUTURE FORWARD, LLC	AT COST	793,427	793,427

TY 2018 Other Expenses Schedule

Name: TODD AND MARY HEISTAND FAMILY
FOUNDATION

EIN: 46-1604788

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
BANK SERVICE CHARGE	6			6
COST OF GOODS	17,557			17,557
INSURANCE	4,916			4,916
DUES, FEES & SUBSCRIPTIONS	6,049			6,049
PAYROLL PROCESSING FEES	20			20
PROFESSIONAL FEES	4,000			4,000
REPAIRS & MAINTENANCE	1,400			1,400
SUPPLIES	3,006			3,006

TY 2018 Other Income Schedule

Name: TODD AND MARY HEISTAND FAMILY
FOUNDATION

EIN: 46-1604788

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
CONSTRUCTION INCOME	18,353		18,353
K-1 INCOME	-18,559		-18,559

TY 2018 Other Liabilities Schedule

Name: TODD AND MARY HEISTAND FAMILY
FOUNDATION

EIN: 46-1604788

Description	Beginning of Year - Book Value	End of Year - Book Value
STATE WITHHOLDING	99	87
PAYROLL LIABILITIES	571	571
STATE UNEMPLOYMENT	36	36

**TY 2018 Substantial Contributors
Schedule**

Name: TODD AND MARY HEISTAND FAMILY
FOUNDATION

EIN: 46-1604788

Name	Address
TODD HEISTAND	610 WALKER STREET WOODBINE, IA 51579
MARY HEISTAND	610 WALKER STREET WOODBINE, IA 51579

TY 2018 Taxes Schedule

Name: TODD AND MARY HEISTAND FAMILY
FOUNDATION

EIN: 46-1604788

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
REAL ESTATE TAXES	1,766			1,766