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Form 990-PF

Department of the Treasury
Internal Revenue Service

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

Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0052

2019

Open to Public Inspection

For calendar year 2019, or tax year beginning 01-01-2019, and ending 12-31-2019

Name of foundation
THE MERCHANTS BONDING COMPANY FOUNDATION

Number and street (or P.O. box number if mail is not delivered to street address)
6700 WESTOWN PARKWAY

City or town, state or province, country, and ZIP or foreign postal code
WEST DES MOINES, IA 502667754

G Check all that apply:

☐ Initial return

☐ Initial return of a former public charity

☐ Final return

☐ Amended return

☐ Address change

☐ Name change

H Check type of organization:

☒ Section 501(c)(3) exempt private foundation

☐ Section 4947(a)(1) nonexempt charitable trust

☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col. (c), line 16) $\blacktriangleright$ \$ 959,436

J Accounting method:

☒ Cash

☐ Accrual

☐ Other (specify) _____
(Part I, column (d) must be on cash basis.)

A Employer identification number
26-3035459

B Telephone number (see instructions)
(515) 243-8171

C If exemption application is pending, check here ☐

D 1. Foreign organizations, check here..... ☐

2. Foreign organizations meeting the 85% test, check here and attach computation ... ☐

E If private foundation status was terminated under section 507(b)(1)(A), check here ☐

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)
292,879

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 16,39716,397

5a Gross rents

b Net rental income or (loss)

6a Net gain or (loss) from sale of assets not on line 103,506

b Gross sales price for all assets on line 6a 50,218

7 Capital gain net income (from Part IV, line 2) 3,506

8 Net short-term capital gain

9 Income modifications

10a Gross sales less returns and allowances

b Less: Cost of goods sold

c Gross profit or (loss) (attach schedule)

11 Other income (attach schedule) 10,6100

12 Total. Add lines 1 through 11 323,39219,903

Operating and Administrative Expenses

13 Compensation of officers, directors, trustees, etc.00

14 Other employee salaries and wages

15 Pension plans, employee benefits

16a Legal fees (attach schedule) 800

b Accounting fees (attach schedule) 2,2712,271

c Other professional fees (attach schedule)

17 Interest

18 Taxes (attach schedule) (see instructions) 1,785617

19 Depreciation (attach schedule) and depletion

20 Occupancy

21 Travel, conferences, and meetings

22 Printing and publications

23 Other expenses (attach schedule) 9,2750

24 Total operating and administrative expenses.
Add lines 13 through 23 13,4112,888

25 Contributions, gifts, grants paid 248,943

26 Total expenses and disbursements. Add lines 24 and 25 262,3542,888248,943

27 Subtract line 26 from line 12:

a Excess of revenue over expenses and disbursements 61,038

b Net investment income (if negative, enter -0-) 17,015

c Adjusted net income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions.

Cat. No. 11289X

Form 990-PF (2019)

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	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing			
	2 Savings and temporary cash investments	805,730	866,768	959,436
	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			
	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)			
	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)	805,730	866,768	959,436	
Liabilities	17 Accounts payable and accrued expenses			
	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 ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ ☒ and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions	765,730	866,768	
	25 Net assets with donor restrictions	40,000	0	
	Foundations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
	29 Total net assets or fund balances (see instructions)	805,730	866,768	
	30 Total liabilities and net assets/fund balances (see instructions) .	805,730	866,768	

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 29 (must agree with end-of-year figure reported on prior year's return)	1	805,730
2 Enter amount from Part I, line 27a	2	61,038
3 Other increases not included in line 2 (itemize) ▶ _____	3	0
4 Add lines 1, 2, and 3	4	866,768
5 Decreases not included in line 2 (itemize) ▶ _____	5	0
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	866,768

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.)
1 a PUBLICLY TRADED PARTNERSHIP		2018-01-01	2019-12-31
b			
c			
d			
e			

(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 50,218		46,712	3,506
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			3,506
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	2	3,506
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))
2018	333,050	931,721	0.357457
2017	192,284	736,285	0.261154
2016	139,810	599,830	0.233083
2015	146,185	493,436	0.296259
2014	219,555	490,339	0.447762

2 Total of line 1, column (d)	2	1.595715
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	0.319143
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	885,679
5 Multiply line 4 by line 3	5	282,658
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	170
7 Add lines 5 and 6	7	282,828
8 Enter qualifying distributions from Part XII, line 4	8	248,943

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	340
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	0
3	Add lines 1 and 2.	3	340
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	340
6	Credits/Payments:		
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	0
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	0
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	0
8	Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached.	8	0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	340
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 2020 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) ▶ <u>IA</u>		
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 2019 or the taxable year beginning in 2019? 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	No

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>N/A</u>	13	Yes	
14	The books are in care of ▶ <u>LARRY TAYLOR</u> Telephone no. ▶ <u>(515) 243-8171</u>			

Located at ▶ 6700 WESTOWN PKWY WEST DES MOINES IA ZIP+4 ▶ 50266

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 2019, 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 2019?	1c		No
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 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? ☐ 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 2019 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 2019.)	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 2019?	4b		No

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

5a	During the year did the foundation pay or incur any amount to:		Yes	No
(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	6b	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.			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes ☒ No	7b	
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?			
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.				0

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. ►		0

Part IX-A Summary of Direct Charitable Activities

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

	Expenses
1	
2	
3	
4	

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	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ►	0

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	616,411
b	Average of monthly cash balances.	1b	282,755
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	899,166
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	899,166
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	13,487
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	885,679
6	Minimum investment return. Enter 5% of line 5.	6	44,284

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	44,284
2a	Tax on investment income for 2019 from Part VI, line 5.	2a	340
b	Income tax for 2019. (This does not include the tax from Part VI.).	2b	
c	Add lines 2a and 2b.	2c	340
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	43,944
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	43,944
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	43,944

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	248,943
b	Program-related investments—total from Part IX-B.	1b	0
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	248,943
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	248,943

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 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				43,944
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only.			0	
b Total for prior years: 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2019:				
a From 2014.	195,060			
b From 2015.	121,536			
c From 2016.	109,993			
d From 2017.	155,842			
e From 2018.	287,067			
f Total of lines 3a through e.	869,498			
4 Qualifying distributions for 2019 from Part XII, line 4: ► \$ 248,943				
a Applied to 2018, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2019 distributable amount.				43,944
e Remaining amount distributed out of corpus	204,999			
5 Excess distributions carryover applied to 2019. (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	1,074,497			
b Prior years' undistributed income. Subtract line 4b from line 2b.		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b. Taxable amount—see instructions.		0		
e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions.			0	
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020.				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).	195,060			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a.	879,437			
10 Analysis of line 9:				
a Excess from 2015.	121,536			
b Excess from 2016.	109,993			
c Excess from 2017.	155,842			
d Excess from 2018.	287,067			
e Excess from 2019.	204,999			

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 2019, 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) 2019	(b) 2018	(c) 2017	(d) 2016	
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					

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

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

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 email address of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

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

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	248,943
b <i>Approved for future payment</i>				
Total			3b	0

Enter gross amounts unless otherwise indicated.

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					
4 Dividends and interest from securities. . . .			14	16,397	
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			18	3,506	
9 Net income or (loss) from special events:			01	2,206	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue: a _____					
b _____					
c _____					
d _____					
e _____					
12 Subtotal. Add columns (b), (d), and (e). .		0		22,109	0
13 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.)			13		22,109

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

[illegible]

Part XVII

		Yes	No
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1a(1)		No
1a(2)		No

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1b(1)	No
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1b(2)	No
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1b(3)		No
--------------	--	-----------

1b(4)		No
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1b(5)	No
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1b(6)		No
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1c		No
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value
ue

[illegible]

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

May the IRS discuss this return with the preparer shown below

(see instr.) ☒ Yes ☐ No

Print/Type preparer's name STEPHEN L KOEHN	Preparer's Signature	Date	Check if self-employed ☐	PTIN P00089588
Firm's name ▶ MERIWETHER WILSON AND COMPANY PLLC				Firm's EIN ▶ 42-0731256
Firm's address ▶ 4500 WESTOWN PARKWAY SUITE 140 WEST DES MOINES, IA 502666717				Phone no. (515) 223-0002

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
LARRY TAYLOR	PRESIDENT 0.00	0	0	0
4127 PLUMWOOD WEST DES MOINES, IA 50265				
WILLIAM WARNER JR	SECRETARY & TREASURER 0.00	0	0	0
3917 155TH STREET URBANDALE, IA 50323				
MELISSA WARNER	DIRECTOR 0.00	0	0	0
4628 N AVENIDA DEL PUENTE PHOENIX, AZ 85018				
JANET TAYLOR	DIRECTOR 0.00	0	0	0
7117 PELICAN BAY BLVD UNIT 607 NAPLES, FL 34108				
LLOYD TAYLOR	DIRECTOR 0.00	0	0	0
7117 PELICAN BAY BLVD UNIT 607 NAPLES, FL 34108				
BILL TAYLOR	DIRECTOR 0.00	0	0	0
5115 S KENTON WAY ENGLEWOOD, CO 80111				
JEFF TAYLOR	DIRECTOR 0.00	0	0	0
919 RAVENDALE PLACE CARY, NC 27513				

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

Recipient Name and address (home or business)	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
a <i>Paid during the year</i>				
AGC OF IOWA FOUNDATION 701 E COURT AVE SUITE B DES MOINES, IA 50309	NONE	PUBLIC	FOSTER EDUCATION, SUPPORT RESEARCH AND DISSEMINATE INFORMATION TO THE GENERAL PUBLIC ABOUT THE CONSTRUCTION INDUSTRY.	700
AHEINZ57 PET RESCUE109 GUTHRIE DE SOTO, IA 50069	NONE	PUBLIC	SAVING HOMELESS COMPANION ANIMALS, ASSISTING OTHER SHELTERS, RESCUE THROUGH RESCUE TRANSPORTS, IN-HOME TRAINING AND PUBLIC EDUCATION ON ISSUES OF OVERPOPULATION AND RESPONSIBLE PET OWNERSHIP.	20,200
AMERICAN HEART ASSOCIATION 1111 9TH ST SUITE 280 DES MOINES, IA 50314	NONE	PUBLIC	TO BUILD HEALTHIER LIVES, FREE OF CARDIOVASCULAR DISEASES AND STROKE.	5,275
Total ► 3a				248,943

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>				
BIG BROTHERS BIG SISTERS OF CENTRAL IOWA 9051 SWANSON BOULEVARD CLIVE, IA 50325	NONE	PUBLIC	SUPPORT FOR MENTORING PROGRAM	1,000
BLANK CHILDRENS HOSPITAL 1200 PLEASANT DES MOINES, IA 50309	NONE	PUBLIC	SUPPORTS THE HEALTH CARE NEEDS OF CHILDREN	6,650
BLOOD SWEAT & BEERS 3512 INGERSOL AVE DES MOINES, IA 50312	NONE	PUBLIC	SUPPORT FOR LEUKEMIA AND LYMPHOMA SOCIETY FUNDRAISING RACE	750
Total ▶ 3a				248,943

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>				
BRAVO GREATER DES MOINES 700 LOCUST ST STE 100 DES MOINES, IA 50309	NONE	PUBLIC	FUNDING AND SUPPORT TO STRENGTHEN ARTS, CULTURE AND HERITAGE ORGANIZATIONS SERVING GREATER DES MOINES.	3,500
CENTRAL IOWA AGFP CHAPTER 37 LIBERTY BELL BLVD PLEASANT HILL, IA 50327	NONE	PUBLIC	PROMOTES PHILANTHROPY BY EMPOWERING PEOPLE & ORGANIZATIONS TO PRACTICE ETHICAL AND EFFECTIVE PROFESSIONAL FUNDRAISING	650
CENTURION OF SOUTHERN ARIZONA CHARITABLE FOUNDATION PO BOX 64545 TUCSON, AZ 85728	NONE	PUBLIC	TO PROVIDE SERVICES TO UNDERSERVED COMMUNITY MEMBERS PRIMARILY IN THE AREAS OF HEALTHCARE, EDUCATION AND MENTORSHIP.	700
Total ► 3a				248,943

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>				
CHARLOTTE WINGS1392 OTTER DRIVE ROCHESTER HILLS, MI 48309	NONE	PUBLIC	DEDICATED TO SUPPORTING AILING CHILDREN THROUGH DONATIONS OF NEW BOOKS TO THE CHILDREN AND THEIR FAMILIES IN HOSPITAL AND HOSPICE CARE.	600
CHILDREN & FAMILIES OF IOWA 1111 UNIVERSITY AVE DES MOINES, IA 50314	NONE	PUBLIC	PROVIDES RESOURCES NEEDED TO HELP VICTIMS OF DOMESTIC VIOLENCE, PROVIDE SAFETY AND PREVENTION FOR ABUSED OR NEGLECTED CHILDREN.	500
CHILDRENS CANCER CONNECTION 2708 GRAND AVE DES MOINES, IA 50312	NONE	PUBLIC	TO SERVE FAMILIES WITH CHILDHOOD CANCERS WITH QUALITY PROGRAMS FOR EDUCATION, RECREATION AND SUPPORT.	500
Total ▶ 3a				248,943

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>				
CYSTIC FIBROSIS FOUNDATION 4150 WESTOWN PKWY 206 WEST DES MOINES, IA 50266	NONE	PUBLIC	RESEARCH FOR A CURE FOR CYSTIC FIBROSIS AND IMPROVE THE QUALITY OF LIFE FOR THOSE WITH THE DISEASE	740
DES MOINES COMMUNITY FOUNDATION 1915 GRAND AVENUE DES MOINES, IA 50309	NONE	PUBLIC	A DONOR-DRIVEN PUBLIC FOUNDATION WHOSE PURPOSE IS TO IMPROVE THE QUALITY OF LIFE IN GREATER DES MOINES THROUGH PHILANTHROPY. THE FOUNDATION CONNECTS DONORS WITH THEIR PASSIONS, FOSTERS LINKS BETWEEN COMMUNITY ORGANIZATIONS AND CONVENES LOCAL LEADERS TO PROMOTE THE COMMON GOOD.	1,500
DES MOINES COMMUNITY PLAYHOUSE 831 42ND ST DES MOINES, IA 50312	NONE	PUBLIC	TO ENCOURAGE SELF-DEVELOPMENT THROUGH THE DRAMATIC ARTS, EXPLORE THE SKILLS OF THE THEATRE, FOSTER AN APPRECIATION FOR THEATRE AND ACQUAINT STUDENTS WITH TECHNICAL THEATRE KNOWLEDGE.	1,000
Total ► 3a				248,943

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>				
DES MOINES METRO OPERA 106 WEST BOSTON AVE INDIANOLA, IA 50125	NONE	PUBLIC	SUPPORTS THE OPERA IN DES MOINES.	2,500
DES MOINES PERFORMING ARTS 221 WALNUT STREET DES MOINES, IA 50309	NONE	PUBLIC	ENGAGE THE MIDWEST IN WORLD-CLASS ENTERTAINMENT, EDUCATION AND CULTURAL ACTIVITIES	5,000
DES MOINES SYMPHONY 1011 LOCUST 200 DES MOINES, IA 50309	NONE	PUBLIC	SUPPORTS THE SYMPHONY IN DES MOINES.	2,500
Total ▶ 3a				248,943

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>				
DES MOINES WATER WORKS PARKS FOUNDATION PO BOX 12009 DES MOINES, IA 50312	NONE	PUBLIC	IMPROVING QIALITY OF LIFE FOR CENTAL IOWANS BY ENHANCING WATERWORKS PARK	5,000
EASTER SEALS OF IA401 NE 66TH AVE DES MOINES, IA 50313	NONE	PUBLIC	PROVIDES SERVICES TO ENSURE THAT PEOPLE WITH DISABILITES HAVE EQUAL OPPORTUNITIES	1,500
GREATER DES MOINES BOTANICAL CENTER 909 ROBERT D RAY DR DES MOINES, IA 50309	NONE	PUBLIC	PROGRAM SUPPORT	1,000
Total ► 3a				248,943

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>				
HOPE MINISTRIESPO BOX 862 DES MOINES, IA 50304	NONE	PUBLIC	MEETING THE SPIRITUAL, PHYSICAL, AND EMOTIONAL NEEDS OF MEN, WOMEN AND CHILDREN WHO ARE HOMELESS OR IN NEED OF HOPE.	925
IMPACT IOWA160 S 68TH ST WEST DES MOINES, IA 50266	NONE	PUBLIC	PROGRAM SUPPORT	500
IOWA ATHLETICS DEVELOPMENT 5410 CARVER HAWKEYE ARENA IOWA CITY, IA 52242	NONE	PUBLIC	PROVIDES SUPPORT TO THE GENERAL ATHLETIC BUDGET	2,400
Total ► 3a				248,943

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>				
IOWA COLLEGE FOUNDATION 505 5TH AVENUE 1034 DES MOINES, IA 50309	NONE	PUBLIC	PROVIDES STUDENTS WITH THE OPPORTUNITY FOR A HIGH QUALITY EDUCATION BY SECURING FINANCIAL RESOURCES FOR MEMBER PRIVATE COLLEGES AND UNIVERSITIES.	1,000
IOWA STATE UNIVERSITY FOUNDATION 2505 UNIVERSITY BLVD PO BOX 2230 AMES, IA 50010	NONE	PUBLIC	ESSENTIAL IN BUILDING THE FINANCIAL BASE TO SUSTAIN LONG-TERM GROWTH OF ISU.	5,400
LYMPHOMA & LEUKEMIA SOCIETY 2700 WESTOWN PKWY 260 WEST DES MOINES, IA 50266	NONE	PUBLIC	CURE LEUKEMIA, LYMPHOMA, HODGKIN'S DISEASE AND MYELOMA, AND IMPROVE THE QUALITY OF LIFE OF PATIENTS AND THEIR FAMILIES.	2,750
Total ► 3a				248,943

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>				
MAKE A WISH FOUNDATION IA 3024 104TH STREET URBANDALE, IA 50322	NONE	PUBLIC	GRANTING WISHES OF CHILDREN WITH LIFE- THREATENING MEDICAL CONDITIONS TO ENRICH THE HUMAN EXPERIENCE WITH HOPE, STRENGTH AND JOY.	3,413
MEALS FROM THE HEARTLAND 357 LINCOLN STREET WEST DES MOINES, IA 50265	NONE	PUBLIC	EMPOWERING PEOPLE TO SAVE THE STARVING	1,000
MID-IOWA COUNCIL - BOY SCOUTS OF AMERICA 5123 SCOUT TRAIL DES MOINES, IA 50321	NONE	PUBLIC	TO PROVIDE A PROGRAM FOR BOYS AND YOUNG ADULTS TO BUILD CHARACTER, TO TRAIN IN THE RESPONSIBILITIES OF CITIZENSHIP, AND TO DEVELOP MENTAL AND PHYSICAL FITNESS - MAKING A DIFFERENCE IN THE LIVES OF BOYS AGED 7 THROUGH 20.	2,500
Total ► 3a				248,943

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>				
NYSADAPO BOX 7347 ALBANY, NY 12224	NONE	PUBLIC	PROVIDING EDUCATION AND INSURANCE IN THE AUTOMATIVE INDUSTRY	1,500
ORCHARD PLACE FOUNDATION 2116 GRADE AVE DES MOINES, IA 50312	NONE	PUBLIC	DEVELOP STRONG FUTURES FOR CHILDREN AND YOUTH WITH MENTAL HEALTH AND BEHAVIORAL CHALLENGES.	1,000
PRINCIPAL CHARITY CLASSIC 2771 104TH ST SUITE I URBANDALE, IA 50322	NONE	PUBLIC	THE TOURNAMENT RAISES MONEY FOR LOCAL NON-PROFIT ORGANIZATIONS SUPPORTING CHILDREN IN THE ARTS, CULTURE, HEALTH AND HUMAN SERVICES.	6,000
Total ► 3a				248,943

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>				
PUPPY JAKE FOUNDATION 4020 JOHN LYNDE RD DES MOINES, IA 50312	NONE	PUBLIC	HELPING MILITARY VETERANS THROUGH TRAINED SERVICE DOGS	5,000
RONALD MCDONALD HOUSE 1441 PLEASANT STREET DES MOINES, IA 50314	NONE	PUBLIC	SUPPORT FOR FAMILIES OF CHILDREN RECEIVING CRITICAL MEDICAL CARE IN DES MOINES.	1,200
THE SURETY FOUNDATION 1101 CONNECTICUT AVENUE NW 800 WASHINGTON, DC 20036	NONE	PUBLIC	PROVIDES SCHOLARSHIPS FOR INDIVIDUALS INTERESTED IN PURSUING A CAREER IN SURETY.	1,000
Total ► 3a				248,943

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 CENTRAL IOWA 1111 NINTH STREET SUITE 100 DES MOINES, IA 50314	NONE	PUBLIC	IMPROVES LIVES BY MOBILIZING THE CARING POWER OF COMMUNITIES AROUND THE WORLD TO ADVANCE THE COMMON GOOD.	6,500
UNIVERSITY OF TEXAS FOUNDATION PO BOX 13178 AUSTIN, TX 78711	NONE	PUBLIC	OPPORTUNITIES AND SUPPORT FOR STUDENT-ATHLETES AS WELL AS PROGRAMMING AND RESOURCES	4,000
VARIETY THE CHILDRENS CHARITY OF IOWA 505 5TH AVE SUITE 310 DES MOINES, IA 50309	NONE	PUBLIC	HELPING UNDERPRIVILEGED, AT-RISK AND SPECIAL NEEDS CHILDREN IN IOWA.	9,000
Total ► 3a				248,943

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>				
VARIOUS PUBLIC CHARITIESVARIOUS DES MOINES, IA 50310	NONE	PUBLIC	VARIOUS PUBLIC CAUSES	7,535
WAUKEE FOUNDATION 230 W HICKMAN RD WAUKEE, IA 50263	NONE	PUBLIC	TO ENHANCE THE RECREATIONAL, HEALTH, CULTURAL AND ECOMONIC BENEFITS OF THE RACCOON RIVER VALLEY TRAIL SYSTEM.	25,000
YMCA OF GREATER DES MOINES 501 GRAND AVENUE DES MOINES, IA 50309	NONE	PUBLIC	YOUTH DEVELOPMENT	8,000
Total ► 3a				248,943

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 Paid during the year				
YOUTH EMERGENCY SERVICES & SHELTERS OF IOWA 918 SE 11TH ST DES MOINES, IA 50309	NONE	PUBLIC	SUPPORT OF PROGRAMS DESIGNED TO KEEP CHILDREN SAFE AND FAMILIES TOGETHER	1,500
YOUTH HOMES OF MID AMERICA PO BOX 39 JOHNSTON, IA 50131	NONE	PUBLIC	TO PROVIDE TROUBLED YOUTH AND THEIR FAMILIES A PATH TO INDEPENDENCE.	2,750
EVERYSTEP FOUNDATION 3000 EASTON BLVD DES MOINES, IA 50317	NONE	PUBLIC	PROGRAM SUPPORT	31,500
Total ▶ 3a				248,943

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>				
JOPPA118 SE 4TH ST 120 DES MOINES, IA 50309	NONE	PUBLIC	PROGRAM SUPPORT	26,000
DOROTHY'S HOUSEPO BOX 57672 DES MOINES, IA 50317	NONE	PUBLIC	PROGRAM SUPPORT	25,000
CHILD ADVOCACY BOARD FRIENDS OF IOWA CASA 321 E 12TH ST 4TH FL DALLAS, IA 50319	NONE	PUBLIC	PROGRAM SUPPORT	2,000
Total ▶ 3a				248,943

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>				
HOAG CHARITY SPORTS FOUNDATION 2081 BUSINESS CENTER DR STE 195 IRVINE, CA 92612	NONE	PUBLIC	PROGRAM SUPPORT	1,000
VETERANS LEGACY OREGON PO BOX 11226 EUGENE, OR 97440	NONE	PUBLIC	PROGRAM SUPPORT	1,000
HANAELEH HORSE RESCUEPO BOX 291 TRABUCO CANYON, CA 92678	NONE	PUBLIC	PROGRAM SUPPORT	805
Total ▶ 3a				248,943

TY 2019 Accounting Fees Schedule**Name:** THE MERCHANTS BONDING COMPANY FOUNDATION**EIN:** 26-3035459

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING AND TAX PREPARATION	2,271	2,271		0

TY 2019 Legal Fees Schedule**Name:** THE MERCHANTS BONDING COMPANY FOUNDATION**EIN:** 26-3035459

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	80	0		0

TY 2019 Other Expenses Schedule**Name:** THE MERCHANTS BONDING COMPANY FOUNDATION**EIN:** 26-3035459**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
COMMUNITY OUTREACH COUNCIL EXPENSE	621	0		0
OTHER EXPENSES	250	0		0
BILL WARNER SR MEMORIAL CHARITY GOLF CLASSIC EXPENSES	8,404	0		0

TY 2019 Other Income Schedule

Name: THE MERCHANTS BONDING COMPANY FOUNDATION

EIN: 26-3035459

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
GROSS INCOME FROM SPECIAL FUNDRAISING EVENTS	10,610		10,610

TY 2019 Taxes Schedule**Name:** THE MERCHANTS BONDING COMPANY FOUNDATION**EIN:** 26-3035459

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX	1,168	0		0
FEDERAL INCOME TAX	617	617		0

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF. ▶ Go to <u>www.irs.gov/Form990</u> for the latest information.	OMB No. 1545-0047 2019
	Name of the organization THE MERCHANTS BONDING COMPANY FOUNDATION	Employer identification number 26-3035459

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	☐ 501(c)() (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	☐ 527 political organization
Form 990-PF	☒ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
THE MERCHANTS BONDING COMPANY FOUNDATIONEmployer identification number
26-3035459**Part I****Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MERCHANTS BONDING COMPANY 2100 FLEUR DR DES MOINES, IA 50321	\$ 280,000	☒ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)

Name of organization THE MERCHANTS BONDING COMPANY FOUNDATION	Employer identification number 26-3035459
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Part II Noncash Property			
(a) No. from Part I	(b) Description of noncash property given (see instructions). Use duplicate copies of Part II if additional space is needed.	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	

Employer identification number

26-3035459

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____ _____	_____ _____ _____	_____ _____ _____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____ _____ _____	_____ _____ _____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____ _____	_____ _____ _____	_____ _____ _____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____ _____ _____	_____ _____ _____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____ _____	_____ _____ _____	_____ _____ _____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____ _____ _____	_____ _____ _____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____ _____	_____ _____ _____	_____ _____ _____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____ _____ _____	_____ _____ _____	