SCANNED FEB 2 2 2022

EXTENDED TO DECEMBER 15, 2020 Return of Private Foundation σ 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.

1912

		t of the Treasury venue Service		er social security numbers on w.irs.gov/Form990PF for instr				Open to Public Inspection				
		dar year 2019 ortax ye	ear beginning		, and e	nding						
		foun dation					A Employer iden tification number					
М	CC	ARTHY/BUSH	FOUNDATION				42-1322400					
Number and street (or PO box number if mail is not delivered to street address)						Room/suite	B Teleph one number					
		1 VICTORIA				l	(563)359-0					
		own, state or province, of ENPORT, IA	country, and ZIP or foreig 5 28 0 7	n postal code			C If exemption application is p	ending, check here				
G	heck	all that apply:	Initial return	Initial return of a fo	ormer public (charity	D 1. Foreign organizations	, check here				
			Final return	Amended return			Foreign organizations me check here and attach co	eting the 85% test,				
		has of organization:	Address change	Name change) exempt private foundation		. 1	1					
п		type of organization: ction 4947(a)(1) nonex		Other taxable private foundation	ation	<u>04</u>	E If private foundation sta under section 507(b)(1)	_				
I Fa	r ma	rket value of all assets a	atend of year J Accou	unting method: X Cash	Acci	ual	F If the foundation is in a	60-month termination				
(fr	om P	art II, col. (c), line 16)		Other (specify)	<u>.</u>		under section 507(b)(1)	(B), check here				
	\$	1		olumn (d), must be on cash bas	s.)			1 (0				
Pa	rt i	The total of amounts in connecessarily equal the amo	and Expenses olumns (b), (c), and (d) may not ounts in column (a))	expenses per books		ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)				
	1	Contributions, gifts, gra	ants, etc., received	60,000.								
	2	Check fithe found interest on savings and ten	fation is not required to attach Sch. B			·						
	3	cash investmentš					RECEIV					
	4	Dividends and interest	from securities		ļ		1,1202,14					
		Oross rents Net rental income or (loss)					5 DEC 2 9 2	120 3				
	_	Net gain or (loss) from sale	of assets not on line 10		<u> </u>		(n)					
ē		Gross sales price for all	G assets for all life to		<u> </u>		OOF	American American				
Revenue	7	Capital gain net income (fro	om Part IV, line 2)			0.	UGUEN.	UI				
ď	8	Net short-term capital	gan 📐				0.					
	9	Income modifications Gross sales less returns	11									
	10a	and allowances	_									
		Less Cost of goods sold										
		Gross profit or (loss) Other income		138.		0.	138.	STATEMENT 1				
	12	Total. Add lines 1 thro	nuah 11	60,138.		0.	138.					
	13	Compensation of officers,		0.		0.	0.	0.				
	14	Other employee salarie	es and wages									
	15	Pension plans, employ										
9	16a	Legal fees	STMT 2	42.		0.	0.	0.				
Š	b	Accounting fees										
Ä	_ C	Other professional fees	S	··			- :	_				
į. Ve	17 18	Interest Taxes										
stra	19	Depreciation and deple	etion		<u> </u>			1				
. <u>.</u>	20	Occupancy	,									
A	21	Travel, conferences, ar	nd meetings									
þ	22	Printing and publication										
و	23	Other expenses	STMT 3	31.	ļ	0.	0.	0.				
Operating and Administrative Expenses	24	• •		73		^	_					
Page		expenses Add lines 1		73. 55,324.	-	0.	0.	55,324.				
_	20	Contributions, gifts, gr		55,324.			 	33,324.				
	20	Total expenses and di Add lines 24 and 25	is our seme mes.	55,397.		0.	0.	55,324.				
	27	Subtract line 26 from l	ine 12:					1				
		Excess of revenue over exp		4,741.	<u> </u>		_					
		Net investment incom				0.	138.	<u> </u>				
	<u> </u>	Adjusted net income	(f negative, enter -0-)		L		158.					

923501 12-17-19 LHA For Paperwork Reduction Act Notice, see instructions.

919-21

Form **930-PF** (2019)

orm 990-PF (2019) MCCARTHY/BUSH FOUNDAT	PION Beginning of year		1322400 Page 2
Part II Balance Sheets Atlached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	year (c) Far Market Value
	2,688.	5,918.	5,918.
Cash - non-interest-bearing Savings and temporary cash investments	2,000.	3,510.	3,510.
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			
7 Other notes and loans rec evable			
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			
b Investments - corp orate stock			
c Investments - corp orate bonds			
11 Investments - land, buildings, and equipment basis			
Less accumulated deprecation			
12 Investments - mortgage loans			
13 Investments - other			
14 Land, buildings, and equipment basis 📐			
Less accumulated deprecation			
15 Other assets (describe ▶)		
16 Total assets (to be completed by all filers - see the			
instruction's. Also, see page 1, item I)	2,688.	5,918. 2,489.	5,918.
17 Accounts payable and accrued expenses	4,000.	2,489.	
18 Grants payable			<u>-</u> .
19 Deferred revenue			
20 Loans from officers, directors, trustees, and other disqualified persons			
21 Mortgages and other notes payable			
22 Other liabilities (describe ►)		
	4 000	2 400	
23 Total liabilities (add lines 17 through 22)	4,000.	2,489.	12.11
Foundations that follow FASB ASC 958, check he re	<u>s. </u>		
and complete lines 24, 25, 29, and 30.	1 212	2 420	
And complete lines 24, 23, 23, and 30. 24 Net assets without donor restrictions 25 Net assets with donor restrictions Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30. 26 Capital stock, trust principal, or current funds	-1,312.	3,429.	<u> </u>
25 Net assets with donor restrictions	¬ -		
Foundations that do not follow FASB ASC 958, check here	_		
and complete lines 26 through 30.			
			
2 27 Paid-in or capital surplus, or land, bldg., and equipment fund 28 Retained earnings, accumulated income, endowment, or other fund			
28 Retained earnings, accumulated income, endowment, or other fund 29 Total net assets or fund balances	-1,312.	3,429.	
27 IOIAI HEL ASSEIS OFFUITU DATAITES	1,214	3,743.	
30 Total liabilities and net assets/fund balances	2,688.	5,918.	
Part III Analysis of Changes in Net Assets or Fun	d Balances		
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	-1,312.
Enter amount from Part I, In e 27a		2	4,741.
Other increases not included in line 2 (itemize)		3	0.

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	-1,312.
2	Enter amount from Part I, In e 27a	2	4,741.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	3,429.
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	3,429.
			Form 990-PF (2019)
~	ness 40 47 40		1

F	Part IV Capital Gains a	and Lo	sses for Tax on Inv	estment	Income							
(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)					(b) _P	How acquired - Purchase - Donation	(c) Date (mo., d	acquired lay, yr.)	(d) Date sold (mo., day, yr.)			
1a	1											
b NONE						ļ						
_(-				ļ		
_(·· · ·		\vdash						
		<i>(</i>) (Pancaustian allowed	(n) Cos	t or other been	_		(h) (Dun or /1000	<u> </u>		
_	(e) Gross sales price	(1)	Depreciation allowed (or allowable)		t or other basis xpense of sale				ain or (loss s (f) minus			
	1											
_ <u>t</u>						_						
_	**											
_ <u>`</u>									 			
_`	Complete only for assets showin	g gain in (column (h) and owned by th	ne foundation	on 12/31/69.			(1) Gains (C	Col. (h) gain	minus		
_	(i) FMV as of 12/31/69		j) Adjusted basis as of 12/31/69	(k) Ex	ces of col. (1)			ol. (k), but i	not less tha (from col. (n -0-) o r		
	1											
Ŀ)											
_												
_	<u> </u>											
_5						_	<u> </u>					
2	Capital gain net income or (net ca	pital loss)	If gam, also enter If (loss), enter -0-			}	2					
3	Net short-term capital gain or (los	s) as defo	ned in sections 1222(5) and	d (6):								
	If gain, also enter in Part I, line 8,											
	If (loss), enter -0- in Part I, line 8 Part V Qualification U	ndor S	ection 4940(e) for l	2 dired	Tay on Not	love	stment Inc	ome				
_			<u> </u>					OITIC				
(F	or optional use by domestic private	loundand	ons subject to the section 4s	940(a) tax on	net nivesument na	COME	.)					
lf :	section 4940(d)(2) applies, leave th	ns part ble	ınk.									
	as the foundation liable for the sect "Yes," the foundation doesn't qualify				•	iod?				Yes X No		
1	Enter the appropriate amount in e					ntries.						
_	(a) Base period years		(b)			(c)			Destru	(d) oution ratio		
	Calendar year (or tax year beginnir	ng m)	Adjusted qualifying dist	ributions	Net value of no		ritable-use asset	s	(col. (b) div	nded by col. (c))		
_	2018			250.			2,06	_	23.81528			
_	2017			L,690.	3,678					68.43121		
_	2016			5,989.		3,091				24.58395		
_	2015			4,788.			1,10			104.25794		
_	2014	J		2,489.			1,41	3.	<u> </u>	44.22434		
^	Total of Inc. 1. column (d)									265.312738		
	Total of line 1, column (d) Average distribution ratio for the	Salpar had	e period - dwide the total o	n line 2 hv 5 (or by the number	or of v	10210	-2	_	203.312/30		
J	the foundation has been in exister	-	=	ii iiiie Z by J.C	, or by the number	GI UI)	cas	₃		53.062548		
	the realitation has been in exister	100 11 1033	man o yano					<u> </u>				
4	Enter the net value of noncharitab	le-use ass	ets for 2019 from Part X, I	ne 5				4		2,068		
5	Multiply line 4 by line 3							5		<u>109,</u> 733.		
6	Enter 1% of net investment incom	ie (1% of l	Part I, line 27b)					6	ļ	0.		
										400 =00		
7	Add lines 5 and 6							7_	 	109,733		
8	Enter qualifying distributions from	n Part XII,	line 4					_8_		55,324		
	If line 8 is equal to or greater than See the Part VI instructions.	ı lıne 7, ch	eck the box in Part VI, line	1b, and comp	lete that part usin	g a 19	% tax rate.					

	90-PF (2019) MCCARTHY/BUSH FOUNDATION				-1322			Page 4
Par				<u>4948</u>	- see ii	nstruc	ti on s	i)
1a E	xempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and en	nter "N/A'	on line 1.					1
Ľ	late of ruling or determination letter: (attach copy of letter if nece	essary-s	ee instructions)					
b [comestic foundations that meet the section 4940(e) requirements in Part V, check here.	- □ a	nd enter 1%	L	1			0.
c	f Part I, line 27b							ĺ
c A	li other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4%	of Part I	, line 12, col (b)					
	ax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; other				2			0.
	dd lines 1 and 2		·		3			0.
4 9	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, oth	hers, ent	er -0-)		4			0.
	ax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	•	,		5	_	-	0.
	redits/Payments:							
	019 estimated tax payments and 2018 overpayment credited to 2019	6a	0).				
	xempt foreign organizations - tax withheld at source	6b		ī.				İ
	ax paid with application for extension of time to file (Form 8868)	6c	0	7.				ŀ
	Rackup withholding erroneously withheld	6d	0		ľ			- 1
	otal credits and payments. Add In es 6a through 6d		_		,			╗.
	inter any penalty for underpayment of estimated tax. Check here if Form 2220 is attac	ched	•		, B			0.
	ax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		•		9			0.
	werpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			_	0			
	inter the amount of fine 10 to be: Credited to 2020 estimated tax		Refunded		1			
	t VII-A Statements Regarding Activities		Thoraliaca P		•			
	Ouring the tax year, did the foundation attempt to influence any national, state, or local legisla	ation or	did it participate or interve	ene in			Yes	No
	ny political campaign?		on a participate of attorne			1a		X
	ory point accompage. Old it spend more than \$100 during the year (either directly or indirectly) for political purpositions.	es? See	the instructions for the de	finition	1	1b		X
	f the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies o					1-15-1		
	Istributed by the foundation in connection with the activities.	any me	act are publication of					
	old the foundation file Form 1120-POL for this year?					1c		$\overline{\mathbf{x}}$
	inter the amount (if any) of tax on political expenditures (section 4955) imposed during the	vear.				"		
	1) On the foundation. > \$ (2) On foundation managers.		0).				
	inter the reimbursement (if any) paid by the foundation during the year for political expendit							
	•	uic taxii	iiposed oii loulidation					
	nanagers. ► \$	8				2		X
		13,				-	-	
	f "Yes," attach a detailed description of the activities.	actrumo n	t artiples of incompantion	or				
	tas the foundation made any changes, not previously reported to the IRS, in its governing in Lylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	150 0111611	is, articles of incorpolation	i, Ui		3		X
	• •	2				4a		X
	old the found ation have unrelated business gross income of \$1,000 or more during the year' f "Yes," has it filed a tax return on Form 990-T for this year?	•			N/A	4.		<u> </u>
					11/ 11	5		х
	Nas there a liquidation, termination, dissolution, or substantial contraction during the year?					-		
	f "Yes," attach the statement required by General Instruction T	har						1
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eith • By language in the governing instrument, or	1161.						
		, dirantia	ne that conflict with the of	ata hu	,			
	By state legislation that effectively amends the governing instrument so that no mandatory	un ecuo	iis uial comiict with the st	alt KAW	•	6	<u> </u>	
	emain in the governing instrument?	lata Dart	II and (a) and Dod W.			\vdash	X	<u> </u>
<i>/</i> [old the foundation have at least \$5,000 in assets at any time during the year? If "Yes," compl	ele Part	ıı, col. (c), and Part XV			7	Λ	1
	The she shake to which the foundation variety or with which it is a continued to a	•						
va t	enter the states to which the foundation reports or with which it is registered. See instruction	118.						
	IA	4						
	f the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Att	tomey G	enerai (or designate)				~	J
	of each state as required by General Instruction G? If "No," attach explanation					8b	X	
	s the foundation claiming status as a private operating foundation within the meaning of sec			alendar	•			اـــا
-	ear 2019 or the taxyear beginning in 2019? See the instructions for Part XIV. If "Yes," comp					9	X	
10_[old any persons become substantial contributors during the tax year? If "Yes," attach a schedule	e listing th	eir names and addresses			10		<u>X</u>
					F	orm 990)-PF	(2019)

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 und stributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)

c if the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

3a Did the found ation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?

during the year?

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 Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019.)

4a Did the foundation invest during the year any amount in a manner that would popardize its chantable purposes?

b Did the found ation 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?

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X

N/A

2b

3b

4a

Part VII-B Statements Regarding Activities for which F	orm 4/20 May Be He	equired (contin	ued)			
5a During the year, did the foundation pay or incur any amount to:					es/	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	es X No			
`(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ctly,				
any voter registration drive?			es X No			
(3) Provide a grant to an individual for travel, study, or other similar purposes	Ye	es 🗓 No				
(4) Provide a grant to an organization other than a charitable, etc., organization						
4945(d)(4)(A)? See instructions		es X No				
(5) Provide for any purpose other than religious, charitable, scientific, literary,			i			
the prevention of cruelty to children or animals?		es X No				
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un		n Regulations	,_ -	_		
section 53.4945 or in a current notice regarding disaster assistance? See instru			N/A	5b	_	
Organizations relying on a current notice regarding disaster assistance, check h			▶∟∤			
c If the answer is "Yes" to question 5a(4), does the foundation daim exemption fi				- [
expenditure responsibility for the grant?	N	I/A Ye	es Mo			
If "Yes," attach the statement required by Regulations section 53.4945-5(d).				- [
6a Did the foundation, during the year, receive any funds, drectly or indirectly, to	pay premiums on					·
a personal benefit contract?		Ye	es 🗶 No 📙	<u>-</u> - -		
b Did the found ation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		-	<u>6b</u>	\rightarrow	X
If "Yes" to 6b, file Form 8870.		—	(TE)	İ		ı
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye		_ _+		- 1
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	1,000,000 in remuneration or	<u>,</u>	ਿਦਾ			ļ
excess parachute payment(s) during the year? Part VIII Information About Officers, Directors, Truste	oo Foundation Mon	Ye	es X No			
Paid Employees, and Contractors	æs, roundation Mai	agers, migniy				
List all officers, directors, trustees, and foundation managers and the second se	neir compensation.					
	1	(c) Compensation	(d) Contributions to	(e) Expe	ense
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other allowances		
BARBARA B. JOHNSON	to position TRUSTEE	enter'-0-)	compensation	 "	iowaii	1003
5401 VICTORIA AVE	11100122			1		
DAVENPORT, IA 52807	10.00	0.	0.	1		0.
MARY P. WALSH	TRUSTEE		<u>~</u>	\vdash		
5401 VICTORIA AVE						
DAVENPORT, IA 52807	10.00	0.	0.			0.
THOMAS M. BUSH	TRUSTEE			1		<u> </u>
5401 VICTORIA AVE				į		
DAVENPORT, IA 52807	10.00	0.	٥.			0.
				1		
	1					
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none, e	enter "NONE."				
(a) Name and address of each amplying paid mare than 650,000	(b) Title, and average	(4) Company	(d) Contributions to employee benefit plans and deferred	(e)	Expe ount, lowan	ense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	al	lowan	1008
NONE						
	<u></u>					
Total number of other employees paid over \$50,000						0
			Form	990-	PF ((2019)

Paid Employees, and Contractors (continued)	42-132: Managers, Highly	2400 Page
B Five highest-paid independent contractors for professional services. If none, enter "NC		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		
		-
Fotal 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 i	nformation such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers produced,		
CONTRIBUTIONS TO TAX EXEMPT ORGANIZATIONS PRIMA		
DAVENPORT-BETTENDORF, IOWA AREA. 7 ORGANIZATION CONTRIBUTION.	IS RECEIVED A	55,324
2		
·		
<u> </u>		
	 	
Part IX-B Summary of Program-Related Investments		
Describe the two largest program related investments made by the foundation during the tax year on lines ${\sf constant}$	1 and 2.	Amount
	1 and 2.	Amount
Describe the two largest program-related investments made by the foundation during the tax year on lines	1 and 2.	Amount
Describe the two largest program related investments made by the foundation during the tax year on lines N/A	1 and 2.	Amount
Describe the two largest program -related investments made by the foundation during the tax year on lines N/A	1 and 2.	Amount
Describe the two largest program -related investments made by the foundation during the tax year on lines N/A	1 and 2.	Amount
Describe the two largest program related investments made by the foundation during the tax year on lines N/A	1 and 2.	Amount
Describe the two largest program related investments made by the foundation during the tax year on lines N/A All other program related investments. See instructions.	1 and 2.	Amount
Describe the two largest program related investments made by the foundation during the tax year on lines N/A	1 and 2.	Amount
Describe the two largest program related investments made by the foundation during the tax year on lines N/A All other program related investments. See instructions.	1 and 2.	Amount
Describe the two largest program related investments made by the foundation during the tax year on lines N/A All other program related investments. See instructions.	1 and 2.	Amount

Total. Add Ines 1 through 3

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ΙŖ	ar,t:X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, see instruction	s.) ,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	2,100.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	2,100.
е	Reduction darmed 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	2,100.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	32.
5	Net value of nonchantable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,068.
6	Minimum investment return. Enter 5% of line 5	6	103.
Į P	Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and foreign organizations, check here X and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2019 from Part VI, line 5		
Ь	Income tax for 2019. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
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	
P	ar.t.XIII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	55,324.
	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 chantable projects that satisfy the:		
а	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	55,324.
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	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	55,324.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q	ualifies for the section	

MCCARTHY/BUSH FOUNDATION

Form **990-PF** (2019)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (se	e instructions)	N/A		
	(a)	(b)	(c)	(d)
	Corpus	Years pnor to 2018	2018	2019
1 Distributable amount for 2019 from Part XI,	· ·			
ine 7				
2 Undistributed income, if any, as of the end of 20 19				
a Enter amount for 2018 only				
b Total for prior years:	•		三	
, ,			े अ र	
3 Excess distributions carryover, if any, to 2019:				
a From 2014				
b From 2015				
c From 2016				
d From 2017				
e From 2018				
f Total of Imes 3a through e			,	
4 Qualifying distributions for 2019 from				
Part XII, line 4: ► \$				
a Applied to 2018, 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 2019 distributable amount				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2019			1	
(If an amount appears in column (d), the same amount must be shown in column (a))			A 15 St	
6 Enter the net total of each column as indicated below.				
2 Corpus Addlines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income. Subtract		-		
ine 4b from line 2b				
c Enter the amount of prior years'			 	
undstributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously assessed				į
d Subtract line 6c from line 6b. Taxable		- 		
amount - see instructions				
e Undistributed income for 2018. Subtract line				
4a from line 2a. Taxable amount - see instr.				
f Undistributed income for 2019. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2020				
7 Amount's 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 2014				
not applied on line 5 or line 7				
9 Excess distributions carryover to 2020.				
Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9:				, ,
a Excess from 2015				
b Excess from 2016				
c Excess from 2017				
d Excess from 2018				1
e Excess from 2019				

Form 990-PF (2019) MCCARTH	Y/BUSH FOUNI	DATION		42-132	2400 Page 1
Part XIV Private Operating Fo			A, question 9)		
1 a If the foundation has received a ruling o		· · · · · · · · · · · · · · · · · · ·			
foundation, and the ruling is effective fo	· ·	-	► <u></u>	10.10(1/0)	
b Check box to indicate whether the found		g foundation described in		4942(j)(3) or 494	12(1)(5)
2 a Enter the lesser of the adjusted net	Tax year	(h) 0010	Prior 3 years	1 41 2000	(a) Tatal
ncome from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
investment return from Part X for	400	400			22.5
each year listed	103.	103.	0.	0.	206.
b 85% of line 2a	88.	88.	0.	0.	175.
c Qualifying distributions from Part XII,				1	
line 4, for each year listed	55,324.	49,250.	251,690.	75,989.	432,253.
d Amounts included in line 2c not		;			
used directly for active conduct of					
exempt activities	0.	0.	0.	0.	0.
e Qualifying distributions made directly					
for active conduct of exempt activities.				1	
Subtract line 2d from line 2c	55,324.	49,250 4	251,690.	75,989.	432,253.
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:(1) Value of all assets					0.
(2) Value of assets qualifying under section 4942()(3)(B)(i)					0,
b 'Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6, for each year					
fisted	69.	69.	123.	103.	364.
c 'Support' alternative test - enter:		7			
(1) Total support other than gross	/				
investment income (interest,	/			1	
dividends, rents, payments on					
securities loans (section 512(a)(5)), orroyalties)					0.
(2) Support from general public					
and 5 or more exempt	/				
organizations as provided in section 4942(j)(3)(B)(iii)	/				0.
(3) Largest amount of support from					
an exempt organization					0.
(4) Gross investment income	1				0.
Part XV Supplementary Info	rmation (Complet	e this part only if	the foundation b	nad \$5.000 or more	
at any time during the				40,000 01 111011	
1 Information Regarding Foundation		han 20/ of the total centre	hutiana maayad hy tha t	oundation before the close	of any tax
a List any managers of the foundation who year (but only if they have contributed in			buttons received by the i	oundation belove the Gose	or any lax
• • •	1010 111411 40,000 1 (000 00	, , , , , , , , , , , , , , , , , , , ,			
NONE	400/	·			
b List any managers of the foundation who other entity) of which the foundation has			or an equally large portio	n of the ownership of a part	nership or
- •	o a 1070 or grouter into co				
NONE					
2 Information Regarding Contributi					
Check here X if the foundation of					its for funds. If
the foundation makes gifts, grants, etc.,			-	•	
a The name, address, and telephone number	ber or email address of the	e person to whom applica	itions should be address	ed:	
b The form in which applications should b	a cultimitted and informat	ion and materials they sha	ould include		
	e Subilina du alla lilloi illai	TOTALIU III ALEI KIIS LIICY SIIL	ou in include		
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographica	areas, charitable fields, l	ends of institutions, or o	ther factors:	

Page 11

Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution show any relationship to Foundation **Amount** any foundation manager status of Name and address (home or business) or substantal contributor reapient a Paid during the year LIFE & FAMILY EDUCATION TRUST N/A EDUCATION AND ASSISTANCE TO WOMEN 2711 HAPPY JOE DR BETTENDORF, IA 52722 24,000. HEALTH SERVICES N/A MERCY HEALTH FOUNDATION 1410 N 4TH ST CLINTON, IA 52732 1,000. GENESIS HEALTH SERVICES FOUNDATION N/A HEALTH SERVICES 1227 EAST RUSHHOLME STREET 24,346. DAVENPORT, IA 52803 **EDUCATION** ST AMBROSE UNIVERSITY N/A 518 W LOCUST STREET 5,000. DAVENPORT, IA 52803 OUR LADY OF LOURDES N/A COMMUNITY 1414 MISSISSIPPI BLVD BETTENDORF, IA 52722 978. 55,324. ➤ 3a Total b Approved for future payment NONE ٥. Total

Form 990-PF (2019)

Part XVI-A Analysis of Income-Producing Activities

	Lhrolata	d business income	1 6	d-d bu 640, 540, 544			
Enter gross amounts unless of herwise indicated.	(a) (b) Business Amount		(C) Exclu- sion	ded by section 512, 513, or 514 (d) Amount	— (e) Related or exempt function income		
1 Program service revenue:	∞de	741100111	eboo	Allouit	TOTICION INCOME		
a			 				
b			 		· · · · · · · · · · · · · · · · · · ·		
c			 		·		
de	-	-					
f							
g Fees and contracts from government agencies				-			
2 Membership dues and assessments							
3 Interest on savings and temporary cash							
nvestments							
4 Dividends and interest from securities							
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			<u> </u>				
8 Gain or (loss) from sales of assets other							
than inventory				120.00			
Net income or (loss) from special events Gross profit or (loss) from sales of inventory							
1 Other revenue:							
a SHARE INCOME	900099	138.					
b	200033	1301					
c		·					
d							
e		-					
2 Subtotal. Add columns (b), (d), and (e)		138.		0.	0.		
3 Total Add line 12, columns (b), (d), and (e)				13	138.		
See worksheet in line 13 instructions to verify calculations.)							
Part XVI-B Relationship of Activities to	the Acco	mplishment of Exe	mpt	Purposes			
Line No. Explain below how each activity for which incorrupte the foundation's exempt purposes (other than be			contrib	uted importantly to the accom	plishment of		
	7						
		 		····			
				. <u>.</u>			
							
		<u>.</u>					
				· · · · · · · · · · · · · · · · · · ·			
	•		-				
		·					

Form 990-PF (2019) MCCARTHY/BUSH FOUNDATION 42-1322400 [Parit*XVIII Information Regarding Transfers to and Transactions and Relationships With Noncharitable

		Exempt Organi	izations							
1	Did the	organization directly or indir	rectly engage in any o	on described in secti	on 501(c)		Yes	No		
		nan section 501(c)(3) organi								
	•	s from the reporting founda	•	_				ļies I		
	(1) Cas	• •			,			1a(1)		X
	• •	er assets						1a(2)	-	х
		ansactions:						14(2)		
		es of assets to a noncharital	hle averent ergenzati	00				1b(1)		X
	• •		• •					1b(1)		X
		chases of assets from a nor	•	yanızalıdı						X
	. -,	ntal of facilities, equipment,	or other assets					1b(3)	-	X
	• •	mbursement arrangements						1b(4)		X
	٠,	ins or loan guarantees						1b(5)		ı
	` '	formance of services or me	•	-				1b(6)		X
	_	of facilities, equipment, ma	• .		•			<u> 1c </u>	•	
		swer to any of the above is							ns,	
		ces given by the reporting fo			eu lessthan fair market van	de in any transaciion	or snamy an angemen	L SHOW III		
(a) Lii		(d) the value of the goods, (b) Amount involved			e exempt organization	(d) December	of transfers, transactions, a	ndehavaa am	nao mo n	
(4)	16 110	(b) Anount involved	(c) realise of	N/A	CACITIFE Organization	(u) cescipioi	TOT (Talsies, Talsactions, a	ilu sharing aria	ilige i ile i	
	-+			1N/ A						
	-						 -			
	-									
	-					_				
	-+									
								_		
	_	-								—
	-+		<u> </u>			<u> </u>				
						<u> </u>				
	_									
									-	
	Is the fo	undation directly or indirect	tly affiliated with, or r	elated to, one	or more tax-exempt organ	izations described				
		on 501(c) (other than section			or more tax onempt organ			Yes	ГХ	No
ь		complete the following scho								
		(a) Name of org			(b) Type of organization		(c) Description of relation	onship		
		N/A					•			
				•						
		er penalties of penjury, Ideclare t						May the IRS di	s cuss ti	his
Sig	ın 👢	belief, it is true, correct, and com	plete Declaration of prep	oaner (other than	, ,	ation of which preparer h	as any knowledge	return with the shown below?	prepare	er 📗
He	re	hul 12	ke /		12/14/2020	PRESID	ENT	X Yes		No
	Si	gnature of officer or trustee			Date	Trtle		_		
		Print/Type preparer's na	me	Preparer's si		Date	Check f PT	IN		
	_			,	Rinn.		self-employed			
Pai		BRAD MCNUL		<i>C</i>	Beal M. Hulto	12/14/2020		000183		
	pare	111111101111111111111111111111111111111	OITTE TAX	LLP	<u>-</u>		Firm's EIN ▶ 86 -	10657	72	
Us	e Only									
					r, SUITE 110					
		DA	VENPORT,	IA 5280	07	 	Phone no. (563)322-4		
_								Form 990	-PF	(2019)

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

To do to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2019

Employer identification number

MCCARTHY/BUSH FOUNDATION 42-1322400 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 X 501(c)(3) exempt private foundation Form 990PF 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 X 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 property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributors Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(v), 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, fine 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 J 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

□ To a point of the contributor o 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-PA, 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 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF) LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2019) Name of organization

Employer identification number

MCCARTHY/BUSH FOUNDATION

42-1322400

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	MCCARTHY-BUSH CORPORATION 5401 VICTORIA AVENUE DAVENPORT, IA 52807	\$\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Ocomplete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Per son Payroll Oncash Ocomplete Part II for noncash contributions.)
, (a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Ocomplete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Per son Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	. (b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)

Name of organization

Employer identification number

MCCARTHY/BUSH FOUNDATION

42-1322400

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed				
(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		
		- - - - - - - - -			

Name of organization

Employer identification number

CCARTI	HY/BUSH FOUNDATION		42-1322400		
Part III(through (e) and the following line entry	ion 501(c)(7), (8), or (10) that total more than \$1,000 for the year For organizations		
	Use duplicate copies of Part III if additional s	space is needed	SS TOT THE YEAR (CITES HER VINCE)		
(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.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
Part! -					
-	(e) Transfer of gift				
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
-	1				
(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 Parti	(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		
-					

FORM 990-PF	OTHER INCOME		STATEMENT 1	
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	ADJUSTED
SHARE INCOME	_	138.	0.	138.
TOTAL TO FORM 990-PF, PART I	, LINE 11 =	138.	0.	138.
FORM 990-PF	LEGA	L FEES	\$	STATEMENT 2
DESCRIPTION		NET INVEST-	(C) ADJUSTED NET INCOME	CHARITABLE
LEGAL AND PROFESSIONAL EXPENSE	42	. 0	. 0.	0.
TO FM 990-PF, PG 1, LN 16A	42	. 0	. 0.	0.
				-
FORM 990-PF	OTHER EXPENSES		STATEMENT 3	
DESCRIPTION	EXPENSES	NET INVEST-	(C) ADJUSTED NET INCOME	CHARITABLE
OFFICE EXPENSE	. 31	. 0	. 0.	0.
TO FORM 990-PF, PG 1, LN 23	31	·	. 0.	0.