efile GRAPHIC print - DO NOT PROCESS DLN: 93491247000140 OMB No 1545-0052 :_{orm}990-PF **Return of Private Foundation** 2019 or Section 4947(a)(1) Trust Treated as Private Foundation Department of the Treasury Do not enter social security numbers on this form as it may be made public. Open to Public Internal Revenue Service ▶ Go to www.irs.gov/Form990PF for instructions and the latest information. Inspection For calendar year 2019, or tax year beginning 01-01-2019 , and ending 12-31-2019 A Employer identification number THE IOWA FOUNDATION FOR EDUCATION ENVIRONMENT AND THE ARTS 42-1333063 Number and street (or P O box number if mail is not delivered to street address) 14434 HOLCOMB AVENUE B Telephone number (see instructions) (515) 961-6780 City or town, state or province, country, and ZIP or foreign postal code URBANDALE, IA 50323 ${f C}$ If exemption application is pending, check here ☐ Initial return ☐ Initial return of a former public charity G Check all that apply D 1. Foreign organizations, check here Amended return ☐ Final return 2 Foreign organizations meeting the 85% test, check here and attach computation ☐ Name change Address change E If private foundation status was terminated ☑ Section 501(c)(3) exempt private foundation H Check type of organization under section 507(b)(1)(A), check here ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation I Fair market value of all assets at end **J** Accounting method ✓ Cash ☐ Accrual If the foundation is in a 60-month termination of year (from Part II, col (c), under section 507(b)(1)(B), check here line 16) >\$ 4,049,534 (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The total Disbursements for charitable Revenue and (b) Net investment Adjusted net (c) of amounts in columns (b), (c), and (d) may not necessarily expenses per books purposes equal the amounts in column (a) (see instructions)) (cash basis only) Contributions, gifts, grants, etc , received (attach schedule) Check ► ✓ If the foundation is **not** required to attach 2 3 Interest on savings and temporary cash investments Dividends and interest from securities 19,042 19,042 Gross rents b Net rental income or (loss) 70,120 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 70.120 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications . 10a

Gross sales less returns and allowances Less Cost of goods sold Gross profit or (loss) (attach schedule) c Other income (attach schedule) 11 Total. Add lines 1 through 11 89,162 89,162 7,500 13 Compensation of officers, directors, trustees, etc 63.373 55,873 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) . . . 15,926 7,963 Accounting fees (attach schedule) Other professional fees (attach schedule) [چە 2,659 2.08 18 Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion 19 20 21 Travel, conferences, and meetings 22 Printing and publications . . 23 Other expenses (attach schedule) 25.875 25.875 Total operating and administrative expenses. 24 Add lines 13 through 23 107,833 91,796 180,842 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 288,675 91,796 27 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-) . . . Cat No 11289X

Operating and Administrative Expenses 7,963 16,037 180,842 196,879 For Paperwork Reduction Act Notice, see instructions. Form **990-PF** (2019)

	2	Savings and temporary cash investments	536,720	460,034	460,03
	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 ▶			
n	8	Inventories for sale or use			
Ď	9	Prepaid expenses and deferred charges			
î	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	1,409,385	1,624,095	1,624,09
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	1,567,510	1,965,405	1,965,40
	14	Land, buildings, and equipment basis >			
		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe >)			
	I	_			

	16	Total assets (to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	3,513,615	4,049,534	4,049,534
	17	Accounts payable and accrued expenses	4,167	4,167	
Liabilities	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)	4,167	4,167	
Š		Foundations that follow FASB ASC 958, check here ▶			
Balances		and complete lines 24, 25, 29 and 30.			
ala	24	Net assets without donor restrictions			
d B	25	Net assets with donor restrictions			
_	1				

Liat	21 22	Mortgages and other notes payable (attach schedule)		
	23	Total liabilities(add lines 17 through 22)	4,167	4,167
Fund Balances		Foundations that follow FASB ASC 958, check here ▶ □ and complete lines 24, 25, 29 and 30.		
를	24	Net assets without donor restrictions		
<u>.</u>	25	Net assets with donor restrictions		
or Func		Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30.		
_	26	Capital stock, trust principal, or current funds	0	l 0

Fund Balances	Foundations that follow FASB ASC 958, check here ▶ □ and complete lines 24, 25, 29 and 30.		
[24	Net assets without donor restrictions		
25	Net assets with donor restrictions		
or Fund	Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30.		
26	Capital stock, trust principal, or current funds	0	0
27	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0
26 27 28 28	Retained earnings, accumulated income, endowment, or other funds	3,509,448	4,045,367
29	Total net assets or fund balances (see instructions)	3,509,448	4,045,367
Z 30	Total liabilities and net assets/fund balances (see instructions)	3.513.615	4.049.534

3,513,615

4,049,534

1 2

3

4

5

6

3,509,448

-199,513

735,453

21

4,045,388

4,045,367

Form **990-PF** (2019)

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

Analysis of Changes in Net Assets or Fund Balances

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

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize) Add lines 1, 2, and 3

Enter amount from Part I, line 27a

Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

30

Part III

2

3

	pe the kind(s) of property sold (e g , real arehouse, or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a K-1 MARATHON PARTNE	RS - SHORT TERM		Р		
b K-1 MARATHON PARTNE	RS - LONG TERM		Р		
c PUBLICLY TRADED SEC	JRITIES		Р		
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain d	h) ır (loss)) mınus (g)
a			19,783		-19,783
	22,574				122,574
c4	10,020		442,691		-32,671
d					
e					
Complete only for asset	s showing gain in column (h) and owne	d by the foundation (on 12/31/69		1)
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) of col (ı) (յ), ıf any	col (k), but not	h) gain minus less than -0-) or om col (h))
a					-19,783
b					122,574
c					-32,671
d					
e					
·	gain or (loss) as defined in sections 12: art I, line 8, column (c) (see instruction:		}	3	
Part V Qualification	Under Section 4940(e) for Red	uced Tax on Net	Investment Inc	come	
If section 4940(d)(2) applies, Was the foundation liable for t If "Yes," the foundation does r	private foundations subject to the section eave this part blank he section 4942 tax on the distributable ot qualify under section 4940(e) Do no mount in each column for each year, se	amount of any year tomplete this part	ın the base period?		es 🗸 No
(a)	Thought in each column for each year, se	e ilistructions before	making any entries	(d)	
Base period years Calendar year (or tax year beginning in)	, , , ,	(c) Net value of noncharitab		Distribution rat (col (b) divided by c	ol (c))
2018	212,081		3,851,024		0 055071
2017	231,670		4,319,839		0 053629
2016	223,908		4,298,585		0 052089
2015	265,646		4,414,270		0 060179
2014	242,970		4,843,478		0 050164
2 Total of line 1, column	• •		2		0 271132
number of years the fou	o for the 5-year base period—divide the ndation has been in existence if less tha oncharitable-use assets for 2019 from P	an 5 years	0, or by the 3		<u>0 054226</u> 3,724,853
5 Multiply line 4 by line 3		,	5		201,984
• • • •	ent income (1% of Part I, line 27b)		6		0
			7		201,984
	tions from Part XII, line 4 ,				196,879
	reater than line 7, check the box in Part			g a 1% tax rate Se	

	rt VII-B Statements Regar	ding Activities for Which	Form 4720 May Be	Required (continued)		F	age o
	During the year did the foundation	_	7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	redaired (communes)		Yes	No
Ju	(1) Carry on propaganda, or other	• • •	ation (section 4945(e))?			103	
	(2) Influence the outcome of any s		, , , , ,	∐ Yes 🗹 ſ	No		
	on, directly or indirectly, any v	oter registration drive?	ıstratıon drıve?				
	(3) Provide a grant to an individual for travel, study, or other similar purposes?						
	(4) Provide a grant to an organizat	tion other than a charitable, etc	, organization described		10		
	in section 4945(d)(4)(A)? See	instructions		· · 🗌 Yes 🗸 I	No		
	(5) Provide for any purpose other	- ·					
	educational purposes, or for th	•		∟ Yes 🖭 ſ	No		
b	If any answer is "Yes" to 5a(1)–(5)	·		·	-		
	Regulations section 53 4945 or in a Organizations relying on a current			_	5b		
	If the answer is "Yes" to question 5						
·	tax because it maintained expendit	* **	•				
	If "Yes," attach the statement requ	• • •		' '	No		
6a	Did the foundation, during the year	· -	• •	ms on			
	a personal benefit contract?		** * * * * * * * * * * * * * * * * * * *	. \square	No		
b	Did the foundation, during the year			tes 🛂 i	10 6b		No
	If "Yes" to 6b, file Form 8870						
	At any time during the tax year, wa			∟ tes 🖭 i	No		
	If "Yes", did the foundation receive	, ,			7b		
8	Is the foundation subject to the sec			in remuneration or			
	excess parachute payment during t	<u> </u>			No L		
Pai	rt VIIII and Contractors	Officers, Directors, Trust	tees, Foundation Ma	nagers, Highly Paid Em	ployees,	•	
1	List all officers, directors, truste	es, foundation managers ar	nd their compensation.	See instructions			
_	and an ornicoro, an octoro, craste	(b) Title, and average	(c) Compensation (If		(e) Exper		
	(a) Name and address	hours per week	not paid, enter	employee benefit plans and	other a		
AUR.	IE BELIN	devoted to position PRESIDENT	-0-) 15,000	deferred compensation 0			
	4 HOLCOMB AVENUE	5 00	15,000				·
	NDALE, IA 50323						
	HOMAS RICHARD BELIN 4 HOLCOMB AVENUE	VICE-PRESIDENT 1 00	0	0			0
	NDALE, IA 50323						
OY E	LIZABETH BELIN	DIRECTOR	0	0			0
	4 HOLCOMB AVENUE NDALE, IA 50323	1 00					
	S M BELIN	SECRETARY/TREASURER	48,373	0			
	4 HOLCOMB AVENUE	1 00	10,373				·
	NDALE, IA 50323	-:	 :		t W	NONE	71
2	Compensation of five highest-pa	aid employees (other than ti	nose included on line 1	(d) Contributions to	e, enter	NONE.	<u>'</u>
(a)	Name and address of each employee	e paid (b) Title, and average hours per week	(c) Compensation		(e) Expen	se acco	ount,
	more than \$50,000	devoted to position	(C) Compensation	plans and deferred	other all	owanc	es
NON	 E			compensation			
1011							
Гota	I number of other employees paid or	ver \$50,000					0
					Form 99	0-PF ((2019)

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly I	Paid Employees,
3 Five highest-paid independent contractors for professional service	ces (see instructions). If none, ente	er "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 relorganizations and other beneficiaries served, conferences convened, research papers produ		per of Expenses
1 N/A	aced, etc	0
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see	<u> </u>	
Describe the two largest program-related investments made by the foundation during t	he tax year on lines 1 and 2	Amount
1		
_		
2		
All able and a second a second and a second		
All other program-related investments See instructions 3		
Total. Add lines 1 through 3		
		Form 990-PF (2019)

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

За 3h

4

5

196.879

196.879

Form **990-PF** (2019)

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

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

Adjusted qualifying distributions. Subtract line 5 from line 4.

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

4

5

Page 9

186,243

186.243

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0

Form 990-PF (20	019)
Part XIII	U

b Total for prior years

From 2014.

b From 2015. . . . c From 2016. . .

d From 2017.

e From 2018.

)-PF	(2	01	9)	
				-	

D-PF (20	019)			
XIII	Undistributed Income	(see	instructions)	,

Distributable amount for 2019 from Part XI, line 7

3.861 45,882

9 876

15.678 17,494

45.882 9,876

15.678

17,494

10.636

2 Undistributed income, if any, as of the end of 2019 a Enter amount for 2018 only.

Excess distributions carryover, if any, to 2019

f Total of lines 3a through e.

d Applied to 2019 distributable amount. e Remaining amount distributed out of corpus

same amount must be shown in column (a))

5 Excess distributions carryover applied to 2019

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

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2020.

10 Analysis of line 9 a Excess from 2015. .

b Excess from 2016. .

d Excess from 2018. .

e Excess from 2019. .

c Excess from 2017. . . .

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

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2018 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2019 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2014 not

indicated below:

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 (a)

Corpus

92.791

10.636

103,427

3.861

99,566

0

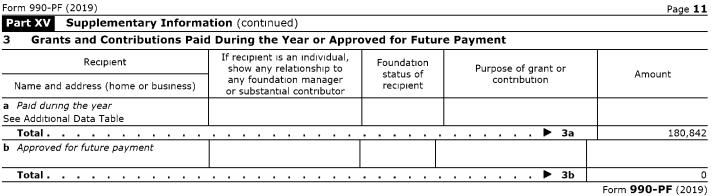
(b)

Years prior to 2018

(c)

2018

factors



Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section	(e) Related or exempt	
_	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
	·					
		+				
	and contracts from government agencies					
_	ership dues and assessments					
3 Intere	st on savings and temporary cash nents					
1 Divide	nds and interest from securities			14	19,042	
5 Net re	ntal income or (loss) from real estate					
	-financed property					
b Not o	lebt-financed property					
	ntal income or (loss) from personal property					
	nvestment income					
	r (loss) from sales of assets other than					
invent	•			18	70,120	
	come or (loss) from special events					
	profit or (loss) from sales of inventory					
L Other	revenue a					
		+				
٠						
a						
d						
е			0		90.163	
e 2 Subto	ral Add columns (b), (d), and (e).		0		89,162	
e 2 Subtot 3 Total.	ral Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)				89,162 3	
e 2 Subtot 3 Total.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations)		13	· · · · · · · · · · · · · · · · · · ·	
e 2 Subtot 3 Total. (See w	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish Income is report	ment of Exempled in column (e) of	pt Purposes	ted importantly to	
e 2 Subtot 3 Total. (See w Part XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to the Explain below how each activity for which	lations) le Accomplish Income is report	ment of Exempled in column (e) of	pt Purposes	ted importantly to	
e 2 Subtoo 3 Total. (See w Part XV .ine No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish Income is report	ment of Exempled in column (e) of	pt Purposes	ted importantly to	
e 2 Subtot 3 Total. (See w Part XV .ine No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish Income is report	ment of Exempled in column (e) of	pt Purposes	ted importantly to	
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e 2 Subtoon 3 Total. (See wart XV ine No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish Income is report	ment of Exempled in column (e) of	pt Purposes	ted importantly to	
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e 2 Subtot 3 Total. (See w Part XV .ine No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish Income is report	ment of Exempled in column (e) of	pt Purposes	ted importantly to	
e 2 Subtoon 3 Total. (See wart XV ine No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish Income is report	ment of Exempled in column (e) of	pt Purposes	ted importantly to	
e 2 Subtoon 3 Total. (See wart XV ine No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish Income is report	ment of Exempled in column (e) of	pt Purposes	ted importantly to	
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e Subtook Total. (See w Part XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish Income is report	ment of Exempled in column (e) of	pt Purposes	ted importantly to	
e Subtook Total. (See w Part XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish Income is report	ment of Exempled in column (e) of	pt Purposes	ted importantly to	
e Subtook Total. (See w Part XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish Income is report	ment of Exempled in column (e) of	pt Purposes	ted importantly to	
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e Subto Total. (See w art XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish Income is report	ment of Exempled in column (e) of	pt Purposes	ted importantly to	
e Subto Total. (See w art XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish Income is report	ment of Exempled in column (e) of	pt Purposes	ted importantly to	
e 2 Subtoon 3 Total. (See wart XV ine No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish Income is report	ment of Exempled in column (e) of	pt Purposes	ted importantly to	
e 2 Subtoon 3 Total. (See wart XV ine No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish Income is report	ment of Exempled in column (e) of	pt Purposes	ted importantly to	
e 2 Subtoon 3 Total. (See wart XV ine No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish Income is report	ment of Exempled in column (e) of	pt Purposes	ted importantly to	89,162

Part >	(VII	Exempt Organi		ansı	ers to a	and Fransacti	ons and	Relatio	nsnips with Non	спагітаріе		
		anization directly or in han section 501(c)(3)	directly engag							n 501	Yes	No
a Trans	sfers fr	om the reporting foun	dation to a no	oncha	rıtable exe	empt organizatio	n of	-				
(1)	Cash.									. 1a(1)		No
(2)	Other	assets								. 1a(2)		No
b Othe	r trans	actions										
		of assets to a nonchari	•	_						. 1b(1)		No
		ses of assets from a n			-					1b(2)		No
` '		of facilities, equipmen	•							1b(3)	-	No
		ursement arrangemen								. 1b(4)	-	No
		or loan guarantees.								. 1b(5)		No
٠.		nance of services or m	•		-					. 1b(6)		No
	-	acilities, equipment, n er to any of the above	-							. Lo		No
		er to any of the above s, other assets, or ser										
		action or sharing arra										
(a) Line N	uo I	(b) Amount involved	(c) Name of	noncha	ırıtahle ever	mpt organization	(d) De	scription of	transfers, transactions,	and charing arra	ıngemen	nte
(a) Line i	10	(b) Amount involved	(C) Nume on	HOHEHA	iritable exer	inpe organization	(u) be	3CHPCION OF	cransiers, transactions,	and snaring arre	ingemen	103
		dation directly or indire	•	,		•						
		n section 501(c) (other		501(c)(3)) or ı	in section 527? .			ЦYе	s 🗹 No		
b If "Ye	es," coi	mplete the following so						1				
		(a) Name of organization	n		(E) Type of organiza	tion		(c) Description	of relationship		
	of my	r penalties of perjury, knowledge and belief preparer has any kno	, it is true, co									
Sign Here	*:	****	-		2020-08-18		*****		May the IRS d return with the prepa			
	S	ignature of officer or ti	rustee			Date		Title		below (see instr)	_	
•		Print/Type preparer's	name	Prepa	Preparer's Signature Date		Date		Check if self-	TIN		
n=1:1		JERRY A EICHENBE	ERGER						employed ▶ □	P0100	5965	
Paid Prepa	rer	Firm's name ► RSM	US LLP									
Use O									F	irm's EIN ▶42	:-07143	325
		Firm's address ► 40	0 LOCUST ST	STE	640					hana na 1515	:) EFO (6600
		DE	S MOINES, I	A 503	3092354					hone no (515	, 338-t	

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year 1000 FRIENDS OF IOWA NONE PC GENERAL OPERATING BUDGET 18,556 3850 MERLE HAY RD STE 605

DES MOINES, IA 503101300				
AMAS COMMUNITY THEATRE 257 WEST 52ND STREET NEW YORK, NY 10019	NONE	PC	GENERAL OPERATING BUDGET	500
AMERICAN SOCIETY FOR PREVENTION OF CRUELTY TO ANIMALS 520 EIGHTH AVE 7TH FLOOR NEW YORK, NY 10018	NONE	PC	GENERAL OPERATING BUDGET	5,000

Total . .

180,842

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year BRONX MUSEUM OF THE ARTS NONE PC GENERAL OPERATING BUDGET 1,250 1040 GRAND CONCOURSE

BRONX, NY 10456				
CIVIC MUSIC ASSOCIATION 1620 PLEASANT ST STE 244 DES MOINES, IA 50314	NONE	PC	BELIN QUARTET EXPENSES	83,886
DES MOINES AREA RELIGIOUS COUNCIL 3816 36TH ST STE 202	NONE	PC	FOOD PANTRY SYSTEM	3,600

180,842

DES MOINES, IA 50310

Total . .

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year DES MOINES PASTORAL COUNSELING NONE PC CAPITAL CAMPAIGN PLEDGE 1.800

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

RESTRICTION OF THE STATE OF THE				
ENVIRONMENTAL LAW AND POLICY CENTER OF THE MIDWEST 35 EAST WACKER DRIVE STE 1600	NONE	PC	IOWA ACTIVITIES	5,000

ENVIRONMENTAL LAW AND POLICY CENTER OF THE MIDWEST 35 EAST WACKER DRIVE STE 1600 CHICAGO, IL 60601	NONE	PC	IOWA ACTIVITIES	5,000
GINGOLD THEATRICAL GROUP 520 8TH AVE SUITE 304	NONE	PC	GENERAL OPERATING BUDGET	1,000

CHICAGO, IL 60601				
GINGOLD THEATRICAL GROUP 520 8TH AVE SUITE 304 NEW YORK, NY 10018	NONE	PC	GENERAL OPERATING BUDGET	1,000
Total			> 3a	180,842

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

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

	or substantial contributor			
a Paid during the year				
IOWA ENVIRONMENTAL COUNCIL 521 EAST LOCUST ST SUITE 220	NONE	PC	GENERAL OPERATING BUDGET	6,000

DES MOINES, IA 503091939				
IOWA INTERFAITH POWER AND LIGHT 505 5TH AVE STE 333 DES MOINES, IA 50309	NONE	PC	GENERAL OPERATING BUDGET	3,600

IOWA INTERFAITH POWER AND LIGHT 505 5TH AVE STE 333 DES MOINES, IA 50309	NONE	PC	GENERAL OPERATING BUDGET	3,600
IOWA JEWISH SENIOR LIFE CENTER 900 POLK BLVD DES MOINES IA 50312	NONE	PC	GENERAL OPERATING BUDGET	3,600

Total			▶ 3a	180,842
IOWA JEWISH SENIOR LIFE CENTER 900 POLK BLVD DES MOINES, IA 50312	NONE	PC	GENERAL OPERATING BUDGET	3,600
DES MOINES, IA 50309				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year IOWA LEGAL AID NONE PC GENERAL OPERATING BUDGET 2,500 1111 9TH AVE SUITE 230 DES MOINES, IA 50314

· ·				
IOWA NATURAL HERITAGE FOUNDATION 505 FIFTH AVE SUITE 444 DES MOINES, IA 50309	NONE	PC	GENERAL OPERATING BUDGET	1,000
IOWA STAGE THEATRE COMPANY	NONE	PC	GENERAL OPERATING BUDGET	2,500

505 FIFTH AVE SUITE 444 DES MOINES, IA 50309				
IOWA STAGE THEATRE COMPANY 111 11TH ST DES MOINES, IA 50309	NONE	PC	GENERAL OPERATING BUDGET	2,500
Total			▶ 3a	180,842

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year IRONDALE PRODUCTIONS INC NONE PC **ENSEMBLE PROJECT & GALA** 6.750 85 S OXFORD STREET BROOKLYN, NY 11217

MONTGOMERY COUNTY HUMANE SOCIETY INC 14645 ROTHGEB DRIVE ROCKVILLE, MD 20850	NONE	PC	GENERAL OPERATING BUDGET	6,000
NEW JERSEY SCHOLARS PROGRAM PO BOX 6008	NONE	PC	GENERAL OPERATING BUDGET	5,000

180,842

SOCIETY INC 14645 ROTHGEB DRIVE ROCKVILLE, MD 20850				
NEW JERSEY SCHOLARS PROGRAM PO BOX 6008	NONE	PC	GENERAL OPERATING BUDGET	5,0

Total .

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

any foundation manager

or substantial contributor

Name and address (home or business)

Total .

	or substantial contributor			
a Paid during the year				
PLANNED PARENTHOOD OF THE HEARTLAND INC PO BOX 4557 DES MOINES, IA 50305	NONE	PC	GENERAL OPERATING BUDGET	10,000

recipient

180,842

	PO BOX 4557 DES MOINES, IA 50305				
,	PRATT INSTITUTE200 WILLOUGHBY AVE BROOKLYN, NY 11205	NONE	PC	ANNUAL FUND	500
	WHITEROCK CONSERVANCY 1390 HWY 141	NONE	PC	GENERAL OPERATING BUDGET	5,000

	I			
PRATT INSTITUTE200 WILLOUGHBY AVE BROOKLYN, NY 11205	NONE	PC	ANNUAL FUND	500
WHITEROCK CONSERVANCY 1390 HWY 141 COON RAPIDS, IA 50058	NONE	PC	GENERAL OPERATING BUDGET	5,000

BROOKLYN, NY 11205				
WHITEROCK CONSERVANCY 1390 HWY 141 COON RAPIDS, IA 50058	NONE	PC	GENERAL OPERATING BUDGET	5,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year WOMEN FOOD AND AGRICULTURE NONE PC GENERAL OPERATING BUDGET 1.000 NETWORK

PO BOX 611 AMES, IA 50010				
YOUNG WOMEN'S RESOURCE CENTER 818 5TH AVE DES MOINES, IA 50309	NONE	PC	DOULA PROGRAM TRAINING MATERIALS	5,000
YOUTH EMERGENCY SERVICES & SHELTER OF IOWA 918 SE 11TH STREET	NONE	PC	GENERAL OPERATING BUDGET	1,800

▶ 3a

180,842

DES MOINES, IA 50309

Total .

efile GRAPHIC print - DO NOT P	ROCESS	As Filed Data -		DI	LN: 93491247000140			
TY 2019 Accounting Fees Schedule								
	Name:	THE IOWA FO	UNDATION FO	R EDUCATION				
		ENVIRONMEN	T AND THE AR	RTS				
	EIN: 42-1333063							
Category	Amo	ount Net	Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			

15,926

TAX PREPARATION & ANNUAL

ACCOUNTING

7,963

7,963

DLN: 93491247000140

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Name: THE IOWA FOUNDATION FOR EDUCATION

ENVIRONMENT AND THE ARTS

EIN: 42-1333063

Congral Explanation Attachment

<u>General E</u>	eneral Explanation Attachment							
Identifier	Return Reference	Explanation						
1		FORM 990, PAGE 1, LINE 13 AND PAGE 6, PART VIII	COMPENSATION TO OFFICERS/DIRECTORS INCLUDES \$48,373 PAID TO JAMES M BELIN FOR INVESTMENT ADVISORY FEES					

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491247000140

TY 2019 Investments Corporate Stock Schedule

Name: THE IOWA FOUNDATION FOR EDUCATION

ENVIRONMENT AND THE ARTS

ETN. 42 1222062

EIN: 42-1333063		
Investments Corporation Stock Schedule		
Name of Stock	End of Year Book Value	End of Year Fair Market Value
KNIGHT THERAPEUTICS INC	263,700	263,700
SANDSTORM GOLD LTD COM	283,100	283,100
STRATEGIC METALS LTD COM	114,000	114,000
CREW ENERGY INC	8,522	8,522
GOLDEN VALLEY MINES LTD	243,480	243,480
OSISKO GOLD ROYALTIES LTD	165,070	165,070
SUBSEA 7 S.A. SPONSORED ADR	72,575	72,575
TIDEWATER INC NEW	48,200	48,200
TOURMALINE OIL CORP	46,960	46,960
OSISKO GOLD ROYALTIES LTD - WELLS FARGO	38,840	38,840
TOURMALINE OIL CORP - WELLS FARGO	11,740	11,740
FIDELITY FUNDS PRIME RESERVES PORTFOLIO	208,998	208,998
AMERIPRISE FINANCIAL	188	188
SUBSEA 7 S.A. SPONSORED ADR	118,722	118,722

As Filed Data -		DL	N: 93491247000140				
TY 2019 Investments - Other Schedule							
THE IOWA FOUND	ATION FOR E	EDUCATION					
ENVIRONMENT AN	D THE ARTS						
42-1333063							
	S chedule THE IOWA FOUND ENVIRONMENT AN	Schedule THE IOWA FOUNDATION FOR E ENVIRONMENT AND THE ARTS	Schedule THE IOWA FOUNDATION FOR EDUCATION ENVIRONMENT AND THE ARTS				

Investments Other Schedule 2					
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value		
INVESTMENT IN PARTNERSHIP	FMV	1,965,405	1,965,405		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 9349124700	0140		
TY 2019 Other Decreases Schedule						
Name:	THE IOWA FO	UNDATION FOR EDUCATION				
	ENVIRONMEN ⁻	T AND THE ARTS				
EIN:	42-1333063					
De	escription		Amount			
STATE OF IOWA PENALTY				21		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491247000140		
TY 2019 Other Expenses Schedule						
Name:	: THE IOWA FOUN	NDATION FOR EC	UCATION			
1	ENVIRONMENT AND THE ARTS					
EIN:	42-1333063					
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
K-1 MARATHON PARTNERS - PORTFOLIO DEDUCTIONS	21,987	21,987		0		
K-1 MARATHON PARTNERS - INTEREST EXPENSE ON INVESTMENTS	3,788	3,788		0		

MORGAN STANLEY FEES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491247000140		
TY 2019 Other Increases Schedule					
Name:	THE IOWA FO	UNDATION FOR EDUCATION			
	ENVIRONMEN ^T	T AND THE ARTS			
EIN:	42-1333063				
De	escription		Amount		
UNREALIZED GAIN/LOSS ON INVESTMEN	NTS		735,453		

efile GRAPHIC print - DO NOT PR	OCESS As Filed Dat	a -	DLI	N: 93491247000140		
TY 2019 Taxes Schedule						
Name: THE IOWA FOUNDATION FOR EDUCATION						
	ENVIRONM	ENT AND THE ARTS	5			
EIN: 42-1333063						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
FOREIGN TAXES	1,51	1,511		0		
PAYROLL TAXES	1,14	574		574		