efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491175007240

2019

OMB No. 1545-0052

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 <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

or	caler	ndar year 2019, or tax year beginning 01-01-20	)19 , ar	nd ending 12-31	·2019	
		Indation		A Employer id	entification numbe	er
TH	IE GALL	AGHER FAMILY FOUNDATION		42-1362579		
	ber and	street (or P.O. box number if mail is not delivered to street address)	Room/suite	<b>B</b> Telephone nu	ımber (see instructio	ns)
F,	J BOX 1	1331		(319) 215-707	3	
		n, state or province, country, and ZIP or foreign postal code IA 50704	•	C If exemption	application is pendir	g, check here
- C	neck al	I that apply:	former public charity	D 1 Foreign or	ganizations, check h	ere -
<b>J</b> C1	ieck ai	Final return Amended return	Tormer public charity	1	rganizations meeting	▶ ∟
		Address change Name change			k here and attach co	
1 Ch	neck ty	tpe of organization: $\mathbf{\nabla}$ Section 501(c)(3) exempt private	foundation		undation status was in 507(b)(1)(A), chec	
	Section	1 4947(a)(1) nonexempt charitable trust Other taxable	e private foundation		( // // //	
of '	year (f	xet value of all assets at end from Part II, col. (c),  ▶\$ 20,625,401  J Accounting method:  □ Other (specify) (Part I, column (d) must	☑ Cash ☐ Accru		ation is in a 60-mont in 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue and Expenses (The total	( ) 5	<u> </u>		(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(a) Revenue and expenses per books	<b>(b)</b> Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	25,000			
	2	Check ▶ ☐ if the foundation is <b>not</b> required to attach				
	3	Sch. B Interest on savings and temporary cash investments	57	57		
	4	Dividends and interest from securities	335,261	335,261		
	5a	Gross rents				
	b	Net rental income or (loss)				
ē	6a	Net gain or (loss) from sale of assets not on line 10	358,989			
Revenue	b	Gross sales price for all assets on line 6a 5,807,686				
Re	7	Capital gain net income (from Part IV, line 2)		358,989		
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b c	Less: Cost of goods sold				
	11	Other income (attach schedule)				
	12	Total. Add lines 1 through 11	719,307	694,307		
	13	Compensation of officers, directors, trustees, etc.	9,742	· ·		9,742
	14	Other employee salaries and wages				,
Š	15	Pension plans, employee benefits	410			410
nse	16a	Legal fees (attach schedule)				
<u>\$</u>	b	Accounting fees (attach schedule)	<b>9</b> 6,950	3,475		3,475
نن دە	c	Other professional fees (attach schedule)	49,653	49,653		
⋛	17	Interest				
st ra	18	Taxes (attach schedule) (see instructions)	<b>%</b> 7,560	1,387		
Ξ	19	Depreciation (attach schedule) and depletion				
Ę	20	Occupancy				
₹ □	21	Travel, conferences, and meetings	8			8
a	22	Printing and publications				
Operating and Administrative Expenses	23	Other expenses (attach schedule)	3,392	424		2,968
¥at	24	Total operating and administrative expenses.				
<u>ಹ</u>		Add lines 13 through 23	77,715			16,603
_	25	Contributions, gifts, grants paid	1,277,000			1,277,000
	26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	1,354,715	54,939		1,293,603
	27	Subtract line 26 from line 12:				
	a	Excess of revenue over expenses and disbursements	-635,408			
	ь	Net investment income (if negative, enter -0-)	,	639,368		
	С	Adjusted net income (if negative, enter -0-)				
_						

# 8 Assets 9

10a

11

12

13

14

15

16

17 18

19

20 21

22

23

24 25

28

30

Part III

Liabilities

**Fund Balances** 

ō 26

Assets 27

Net 29

2

3

b C

Prepaid expenses and deferred charges . . . . . .

Investments—land, buildings, and equipment: basis ▶ \_\_\_

Investments—other (attach schedule) . . . . . .

Total assets (to be completed by all filers—see the

Less: accumulated depreciation (attach schedule) ▶

Foundations that follow FASB ASC 958, check here

Investments-mortgage loans . . . .

Land, buildings, and equipment: basis

instructions. Also, see page 1, item I)

and complete lines 24, 25, 29 and 30. Net assets without donor restrictions . . .

Net assets with donor restrictions . . .

and complete lines 26 through 30.

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

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Other assets (describe > .

Other liabilities (describe ▶\_

Grants pavable

Investments—U.S. and state government obligations (attach schedule)

Investments—corporate stock (attach schedule) . . . . . . .

Less: accumulated depreciation (attach schedule) ▶ \_\_\_\_\_

Accounts payable and accrued expenses . . . . . . . . . . . .

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule). . . . .

Total liabilities(add lines 17 through 22) . . . . . . . . . . . . .

Foundations that do not follow FASB ASC 958, check here 🕨 🗹

Retained earnings, accumulated income, endowment, or other funds

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

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

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

**Analysis of Changes in Net Assets or Fund Balances** 

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

```
8,731
         19,717,048
                            19,081,178
9
               810
               810
```

20,153,739

-437,501

19,716,238

19,717,048

14,415,431

4,303,640

13,338,730

5,041,900

33,702

348

348

20,178,739

-1,097,909

19,080,830 19,081,178

19,716,238

19,080,830

19,080,830 Form **990-PF** (2019)

-635,408

1

2

3 4

5

6

14,772,609

5,152,244

33,702

20.625,401

(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.)

Page **3** 

			D Donation	_ I	I	
1 a REGIONS SALES			Р			
<b>b</b> BESSEMER SALES			Р			
c						
d						
e						
	(f)		(g)	+	(h	<u>,, , , , , , , , , , , , , , , , , , ,</u>
(e)	Depreciation allowed	Cost o	r other basis		Gain or	
Gross sales price	(or allowable)	plus ex	pense of sale		(e) plus (f)	minus (g)
<b>a</b> 26	55,776		256,70	3		9,07
<b>b</b> 5,27	70,268		5,191,99	4		78,2
c						
d						
e						
			n on 12/21/60			
Complete only for assets	s showing gain in column (h) and o	whed by the foundatio		-	(I Gains (Col. (h	
(i)	<b>(j)</b> Adjusted basis	Fyce	<b>(k)</b> ss of col. (i)			less than -0-) <b>or</b>
F.M.V. as of 12/31/69	as of 12/31/69		ol. (j), if any		Losses (fro	
			(3), /			9,07
b						78,2
						, 0,2
d						
				-		
<u>e</u>				+		
<ul><li>2 Capital gain net income</li><li>3 Net short-term capital e</li></ul>	e or (net capital loss) $igg\{$	If gain, also enter in If (loss), enter -0- in 1222(5) and (6):		2		358,989
· ·	art I, line 8, column (c) (see instruc	. , . ,	-0-	3		
Part V Qualification	Under Section 4940(e) for R	educed Tax on Ne	et Investment I	ncome		
					<u>-</u>	
(For optional use by domestic p	private foundations subject to the se	ection 4940(a) tax on	net investment inco	me.)		
If section 4940(d)(2) applies, le	eave this part blank.					
Was the foundation liable for th	ne section 4942 tax on the distribut ot qualify under section 4940(e). Do			d?	☐ Ye	es 🔽 No
1 Enter the appropriate ar	nount in each column for each year	; see instructions befo	re making any entri	es.		
(a) Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharit	able-use assets	(col.	(d) Distribution ratio (b) divided by co	obl. (c))
2018	1,107,849	9	19,126,649			0.057922
2017	509,30		9,689,399			0.052563
2016	419,000	0	5,837,903			0.071772
2015	198,73		3,984,661			0.049875
2014	79,53		2,162,046			0.036786
2 Total of line 1, column (	,		2			0.268918
3 Average distribution ratio	o for the 5-year base period—divident ndation has been in existence if less	the total on line 2 by				0.053784
	oncharitable-use assets for 2019 fro		4			19,830,224
<b>5</b> Multiply line 4 by line 3			5			1,066,549
• • • • •	ent income (1% of Part I, line 27b)		6			6,394
			7			1,072,943
	ions from Part XII, line 4 ,					1,293,603
	eater than line 7, check the box in I			ing a 1	% tax rate. See	
IIISU UCUOTIS.					Fo	rm <b>990-PF</b> (201

(b)

How acquired

P—Purchase

(c) Date acquired

(mo., day, yr.)

Page **6** 

Ба	During the year did the foundation p	ay or incur any amount to:					Yes	No
	(1) Carry on propaganda, or otherw	ise attempt to influence legisl	ation (section 4945(e))?	☐ Yes	✓ N	,		
	(2) Influence the outcome of any sp							
	on, directly or indirectly, any vot	<del>-</del>		· · 🔲 Yes	✓ N	o		
	(3) Provide a grant to an individual (	• • • • • • • • • • • • • • • • • • • •		Yes	✓ N	o		
	(4) Provide a grant to an organization in section 4945(d)(4)(A)? See in		· -					
	(5) Provide for any purpose other th			· · L Yes	✓ N	0		
	educational purposes, or for the	•		· · 🗌 Yes	✓ N	<b>。</b>		
b	If any answer is "Yes" to $5a(1)-(5)$ ,					l		
	Regulations section 53.4945 or in a c			uctions	•	5b		
_	Organizations relying on a current no							
С	If the answer is "Yes" to question 5a tax because it maintained expenditu		•					
	If "Yes," attach the statement requir	· · · · · · · · · · · · · · · · · · ·		· · L Yes	∐ N•	o		
5a	Did the foundation, during the year,	· -		ime on				
Ja	a personal benefit contract?							
b	Did the foundation, during the year,			res	<u>✓</u> N	6b		No
_	If "Yes" to 6b, file Form 8870.	pa, promano, an out, or me			•	132		1
7a	At any time during the tax year, was	the foundation a party to a p	prohibited tax shelter trai	nsaction?	✓ N			
b	If "Yes", did the foundation receive a			⊔ res	. N	o   7b		
3	Is the foundation subject to the secti	ion 4960 tax on payment(s) o	of more than \$1,000,000	in remuneration or				
	excess parachute payment during th	e year?		· · 🔲 Yes	<b>✓</b> №	, L		
	Information About O	fficers, Directors, Trus	tees, Foundation Ma				,	
Pa	and Contractors		·	,	•	•		
1	List all officers, directors, trustee	s, foundation managers a	nd their compensation	. See instructions				
		(b) Title, and average	(c) Compensation (If	(d) Contributions t		e) Exper	nse acc	ount.
	(a) Name and address	hours per week devoted to position	not paid, enter -0-)	employee benefit plans deferred compensati	sano   `	other a		
ee /	Additional Data Table	uctottu to position	- ,	acioni da componida.	-			
2	Compensation of five highest-pai	d employees (other than t	hose included on line	L—see instructions). I	f none,	enter "	NONE	."
٠.,١	Name and address of each ampleyee	(b) Title, and average		(d) Contributions t		.) Evnon		
aj	Name and address of each employee p more than \$50,000	nours per week	(c) Compensation	employee benefit		Expen) <b>(e</b> other al		
		devoted to position		compensation				
ON	E							
ot-	I number of other employees paid ove		1					
ota	i number of other employees paid ove	:: ф.50,000:		· · · · · · · · ·		orm <b>99</b>	0-PE	(2010
					r	OIIII <b>3</b> 3	J-PF	(SOT)

Form 990-PF (2019)		Page <b>7</b>
Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional service	ces (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		
<b>Total</b> 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 rel- organizations and other beneficiaries served, conferences convened, research papers produ	evant statistical information such as the number uced, etc.	r of 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 t		Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		<b>•</b>
Iotal. Add lines 1 through 3		Form 900 PE (2010)

2a	Tax on investment income for 2019 from Part VI, line 5	<b>2a</b> 6,3	94	
b	Income tax for 2019. (This does not include the tax from Part VI.)	2b		
С	Add lines 2a and 2b		2c	6,394
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	985,117
4	Recoveries of amounts treated as qualifying distributions		4	
5	Add lines 3 and 4		5	985,117
6	Deduction from distributable amount (see instructions)		6	

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

1a

1b

2

За 3h

4

5

1,293,603

1,293,603

1,287,209

Form 990-PF (2019)

6,394

Part XII

1

2

3

4

5

b

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . . . . . . . . .

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

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

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

985,117

Form **990-PF** (2019)

Page 9

Form 990-PF (2019)							
Part XIII	Undi						

Form 990-PF (2019)								
Part XIII	Undistributed Income (see instruc	tions)						
		•						

a From 2014. . . . . **b** From 2015. . . . . c From 2016. . .

d From 2017. . . . .

e From 2018. . . . .

1 Distributable amount for 2019 from Part XI, line 7

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

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

6 Enter the net total of each column as

**b** Prior years' undistributed income. Subtract c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . . **d** Subtract line 6c from line 6b. Taxable amount —see instructions . . . . . . . . . . . . . . . . e Undistributed income for 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 applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2020.

10 Analysis of line 9: a Excess from 2015. . . **b** Excess from 2016. .

c Excess from 2017. . . .

d Excess from 2018. . .

e Excess from 2019. . .

Subtract lines 7 and 8 from line 6a . . . .

indicated below:

4 Qualifying distributions for 2019 from Part XII, line 4: ► \$ 1,293,603 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). . . . . . . . . . (a)

Corpus

265.515

308.486

574,001

574,001

61 004

39.848 164,663

> 61,004 39.848

164,663

308.486

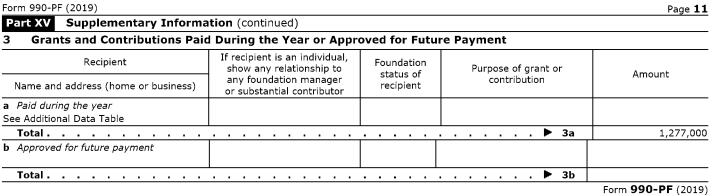
(b)

Years prior to 2018

(c)

2018

- - **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:



r gross a	amounts unless otherwise indicated.		usiness income	Excluded by section		(e) Related or exer function incor
_	service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	(See instruction
	<del> </del>					
	nd contracts from government agencies					
	ship dues and assessments					
nvestme	on savings and temporary cash					
	ls and interest from securities			14	57 335,261	
	al income or (loss) from real estate:			14	333,201	
	nanced property					
	bt-financed property					
	al income or (loss) from personal property					
	vestment income.					
	(loss) from sales of assets other than					
nventor	• ,			18	358,989	
	me or (loss) from special events:			10	330,909	
	rofit or (loss) from sales of inventory					
	venue: a					
	venue. a					
 Subtotal	Add columns (b) (d) and (e)				694,307	L
Gubtotal Otal. A	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e)			1	694,307 <b>3</b>	L
Subtotal	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calcu	lations.)			<u> </u>	694
Gubtotal  Fotal. A See wor  T XVI-	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which	lations.)  e Accomplisi income is report	hment of Exem	<b>pt Purposes</b> f Part XVI-A contribu	3	L
Gubtotal Total. A See wor	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e)	lations.)  e Accomplisi income is report	hment of Exem	<b>pt Purposes</b> f Part XVI-A contribu	3	L
Gubtotal Gotal. A Gee wor t XVI-	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  e Accomplisi income is report	hment of Exem	<b>pt Purposes</b> f Part XVI-A contribu	3	L
Gubtotal Gotal. A Gee wor t XVI-	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  e Accomplisi income is report	hment of Exem	<b>pt Purposes</b> f Part XVI-A contribu	3	L
otal. A See wor t XVI-	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  e Accomplisi income is report	hment of Exem	<b>pt Purposes</b> f Part XVI-A contribu	3	L
otal. A See wor t XVI-	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  e Accomplisi income is report	hment of Exem	<b>pt Purposes</b> f Part XVI-A contribu	3	L
ubtotal otal. A See wor t XVI-	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  e Accomplisi income is report	hment of Exem	<b>pt Purposes</b> f Part XVI-A contribu	3	L
ubtotal otal. A see wor t XVI-	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  e Accomplisi income is report	hment of Exem	<b>pt Purposes</b> f Part XVI-A contribu	3	L
ubtotal otal. A See wor t XVI-	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  e Accomplisi income is report	hment of Exem	<b>pt Purposes</b> f Part XVI-A contribu	3	L
ubtotal otal. A ee wor : XVI-	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  e Accomplisi income is report	hment of Exem	<b>pt Purposes</b> f Part XVI-A contribu	3	L
ubtotal otal. A see wor t XVI-	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  e Accomplisi income is report	hment of Exem	<b>pt Purposes</b> f Part XVI-A contribu	3	L
ubtotal otal. A ee wor XVI- No.	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  e Accomplisi income is report	hment of Exem	<b>pt Purposes</b> f Part XVI-A contribu	3	L
ubtotal otal. A ee wor : XVI-	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  e Accomplisi income is report	hment of Exem	<b>pt Purposes</b> f Part XVI-A contribu	3	L
ubtotal otal. A see wor t XVI-	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  e Accomplisi income is report	hment of Exem	<b>pt Purposes</b> f Part XVI-A contribu	3	L
ubtotal otal. A see wor t XVI-	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  e Accomplisi income is report	hment of Exem	<b>pt Purposes</b> f Part XVI-A contribu	3	L
ubtotal otal. A see wor t XVI-	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  e Accomplisi income is report	hment of Exem	<b>pt Purposes</b> f Part XVI-A contribu	3	L
ubtotal otal. A see wor t XVI-	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  e Accomplisi income is report	hment of Exem	<b>pt Purposes</b> f Part XVI-A contribu	3	L
otal. A See wor t XVI-	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  e Accomplisi income is report	hment of Exem	<b>pt Purposes</b> f Part XVI-A contribu	3	L
ubtotal otal. A See wor t XVI-	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  e Accomplisi income is report	hment of Exem	<b>pt Purposes</b> f Part XVI-A contribu	3	L
ubtotal otal. A See wor t XVI-	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  e Accomplisi income is report	hment of Exem	<b>pt Purposes</b> f Part XVI-A contribu	3	L
otal. A See wor t XVI-	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  e Accomplisi income is report	hment of Exem	<b>pt Purposes</b> f Part XVI-A contribu	3	L
ubtotal otal. A See wor t XVI-	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  e Accomplisi income is report	hment of Exem	<b>pt Purposes</b> f Part XVI-A contribu	3	L
otal. A See wor t XVI-	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  e Accomplisi income is report	hment of Exem	<b>pt Purposes</b> f Part XVI-A contribu	3	L
Subtotal Sotal. A See wor t XVI-	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  e Accomplisi income is report	hment of Exem	<b>pt Purposes</b> f Part XVI-A contribu	3	L
Subtotal Sotal. A See wor t XVI-	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  e Accomplisi income is report	hment of Exem	<b>pt Purposes</b> f Part XVI-A contribu	3	L

Part XVII	Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations	
1 Did the even	-in-time discretions in discretion are as in a constitution with a constitution are already and a contract of the following source of the following so	Т

	Exempt Organi	zations										
	ganization directly or in than section 501(c)(3)								ion 501		Yes	No
a Transfers t	from the reporting foun	dation to a no	onchar	itable exe	empt organizatio	on of	f:					
<b>(1)</b> Cash.									. 1a	(1)		No
<b>(2)</b> Other	rassets								. 1a	(2)		No
<b>b</b> Other tran	sactions:											
	of assets to a nonchari	itable exempt	organ	nization.					16	(1)		No
	nases of assets from a n	·-	-							(2)		No
				_		•				• •		
	al of facilities, equipmer	•				•				(3)		No
` '	bursement arrangemen									(4)		No
. ,	s or loan guarantees.									(5)		No
( <b>6</b> ) Perfor	mance of services or m	embership or	fundr	aising sol	icitations				. <u> 1</u> 6	(6)		No
c Sharing of	facilities, equipment, n	nailing lists, c	ther a	ssets, or	paid employees	· .			:	Lc		No
of the goo	wer to any of the above ds, other assets, or ser nsaction or sharing arra	vices given by	y the r	eporting	foundation. If th	ne fo	undation receive	d less than fair mai	rket value	e		
(a) Line No.	(b) Amount involved	(c) Name of	nonchai	ritable exe	mpt organization	1	(d) Description of	transfers, transactions	s, and sharing	arrai	ngemen	ts
	• •				· •			•				
<b>2a</b> Is the four	ndation directly or indire	ectly affiliated	l with,	or relate	d to, one or mo	re ta	x-exempt organi		_			
described	in section 501(c) (other	r than section	501(	c)(3)) or i	n section 527?			$\square$	'es 🔽 N	0		
<b>b</b> If "Yes," co	omplete the following so	chedule.										
	(a) Name of organization	on		(l	) Type of organiza	ation		(c) Description	n of relationsh	ip		
						_						
of m	er penalties of perjury, ly knowledge and belief th preparer has any kno	, it is true, co										
Sign Here	****	-			2020-06-22		*****		May the I return with the p			
<b> </b>	Signature of officer or t	rustee			Date		Title		below (see instr	· ) <b>~</b>	Yes [	] No
•	Print/Type preparer's	name	Prepa	rer's Sigr	nature		Date	Check if self	PTIN	202	214	
Paid	MONICA M HAAG						2020-06-23	employed ▶ 🗹	701	0303	∠1 <del>4</del>	
Preparer Jse Only		NEY ALEXAND	DER MA	AROLD &	CO LLP				Firm's EIN I	▶42-	-07284	123
	Firm's address ▶ PC	BOX 1290										
	W	ATERLOO, IA	5070	41290					Phone no. (	319]	233-3	3318
	1											

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation

EJ GALLAGHER III	PRESIDENT	1,000	0	C
PO BOX 1351 WATERLOO, IA 50704	14.00			
MARY KAY BEECHER	VICE-PRES	1,000	0	C

MARY KAY BEECHER	VICE-PRES	1,000	0	0
PO BOX 1351 WATERLOO, IA 50704	4.00			
NANCY FISCHER	SECRETARY	4,742	0	0
PO BOX 1351	4.00			

WATERLOO, IA 50704				
NANCY FISCHER	SECRETARY	4,742	0	0
PO BOX 1351 WATERLOO, IA 50704	4.00			
JOHN J BURNS	TREASURER	1,000	0	0

PO BOX 1351 WATERLOO, IA 50704	4.00			
JOHN J BURNS	TREASURER	1,000	0	0
PO BOX 1351 WATERLOO, IA 50704	1 4.00			

JOHN J BURNS	TREASURER	1,000	0	0
PO BOX 1351 WATERLOO, IA 50704	4.00			
KATHRYN BEECHER KOLCK	DIRECTOR	1,000	0	0
PO BOX 1351	1.00			

WATERLOO, IA 50704				
KATHRYN BEECHER KOLCK	DIRECTOR	1,000	0	0
PO BOX 1351 WATERLOO, IA 50704	1.00			

KATHRYN BEECHER KOLCK	DIRECTOR	1,000	0	
PO BOX 1351 WATERLOO, IA 50704	1.00			
GAIL GALLAGHER	DIRECTOR	1,000	0	

1.00

PO BOX 1351 WATERLOO, IA 50704

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ALLIANCE FOR THE MENTALLY III. N/A N/A **EDUCATION SUPPORT** 5,000 OF DUBUQUE AKA NANI-DUBUQUE 900 JACKSON ST SUITE LL5 DUBUQUE, IA 520015006

ARCHDIOCESE OF DUBUQUE 1229 MT LORETTA PO BOX 479 DUBUQUE, IA 520040479	N/A	N/A	EDUCATION SUPPORT	10,000
BLESSED SACRAMENT CHURCH 650 STEPHAN AVENUE WATERLOO, IA 507012036	N/A	N/A	EDUCATION SUPPORT	10,000

Total .

За

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

BOSCO CATHOLIC SCHOOL SYSTEM

405 16TH AVENUE

N/A

PO BOX 106 GILBERTVILLE, IA 50634				
BOYS & GIRLS CLUBS CEDAR VALLEY 515 LIME STREET WATERLOO, IA 50703	N/A	N/A	EDUCATION SUPPORT	15,000

N/A

**EDUCATION SUPPORT** 

5,000

BOYS & GIRLS CLUBS CEDAR VALLEY 515 LIME STREET WATERLOO, IA 50703	N/A	N/A	EDUCATION SUPPORT	15,000
CATHOLIC CHARITIES 1229 MT LORETTA AVENUE	N/A	N/A	EDUCATION SUPPORT	25,000

WithErees, Int. 30703				
CATHOLIC CHARITIES 1229 MT LORETTA AVENUE DUBUQUE, IA 52003	N/A	N/A	EDUCATION SUPPORT	25,000
Total			▶ 3a	1,277,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CATHOLIC RURAL LIFE N/A N/A **EDUCATION SUPPORT** 10,000 UNIVERSITY OF ST THOMAS 2115 SUMMIT AVENUE MAIL NUMBER 4080 ST PAUL, MN 557051078 00

CEDAR TRAILS PARTNERSHIP 6510 HUDSON ROAD CEDAR FALLS, IA 506136404	N/A	N/A	EDUCATION SUPPORT	2,000
CEDAR VALLEY CATHOLIC SCHOOLS 3231 WEST 9TH STREET WATERLOO, IA 50702	N/A	N/A	EDUCATION SUPPORT	30,000

Total .

За

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CEDAR VALLEY CHAMBER MUSIC INC N/A N/A **EDUCATION SUPPORT** 15,000 104 BROOKERIDGE DR 187 WATERLOO, IA 50702

l	CEDAR VALLEY HOSPICE 2101 KIMBALL AVE STE 401 PO BOX 2880 WATERLOO, IA 507022880	N/A	N/A	EDUCATION SUPPORT	15,000
I	CEDAR VALLEY UNITED WAY	N/A	N/A	EDUCATION SUPPORT	10,000

WATERLOO, IA 507022880				
CEDAR VALLEY UNITED WAY 425 CEDAR ST SUITE 300 WATERLOO, IA 50701	N/A	N/A	EDUCATION SUPPORT	10,000

Total .

За

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CLARKE UNIVERSITY N/A N/A **EDUCATION SUPPORT** 199,300 1550 CLARKE DRIVE

DUBUQUE, IA 520013198

WATERLOO, IA 50701

Total . .

COMM FDN OF NE IOWA HOUSE OF HOPE 3117 GREENHILL CIRCLE CEDAR FALLS, IA 50613	N/A	N/A	EDUCATION SUPPORT	5,000
COMMUNITY PLAYHOUSE 224 COMMERCIAL STREET	N/A	N/A	EDUCATION SUPPORT	20,000

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

a Paid during the year

CONCEPTION ABBEY INCPO BOX 501 37174 STATE HIGHWAY VV CONCEPTION, MO 64433	N/A	N/A	EDUCATION SUPPORT	2,000
COVENANT FOUNDATION INC	N/A	N/A	EDUCATION SUPPORT	5,000

3421 W 9TH STREET WATERLOO, IA 507025401	19/4	17/0	EDUCATION SOFT OR	3,000
FAMILY & CHILDREN'S COUNCIL OF BLACK HAWK COUNTY 316 W 5TH STREET SUITE A	N/A	N/A	EDUCATION SUPPORT	10,000

				1
FAMILY & CHILDREN'S COUNCIL OF BLACK HAWK COUNTY 316 W 5TH STREET SUITE A WATERLOO, IA 50701	N/A	N/A	EDUCATION SUPPORT	10,000
Total				1,277,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
FAMILY YMCA OF BLACK HAWK COUNTY	N/A	N/A	EDUCATION SUPPORT	7,000

669 SOUTH HACKETT ROAD WATERLOO, IA 50701				
FRIENDS OF HARTMAN RESERVE INC 657 RESERVE DRIVE CEDAR FALLS, IA 50613	N/A	N/A	EDUCATION SUPPORT	20,000

657 RESERVE DRIVE CEDAR FALLS, IA 50613	IVA	19/4	EDUCATION SUPPORT	20,000
FRIENDS OF THE ARTS CENTER 225 COMMERCIAL STREET WATERLOO, IA 50701	N/A	N/A	EDUCATION SUPPORT	15,000

Total			▶ 3a	1,277,000
FRIENDS OF THE ARTS CENTER 225 COMMERCIAL STREET WATERLOO, IA 50701	N/A	N/A	EDUCATION SUPPORT	15,000
CEDAR FALLS, IA 50613				

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year FRIENDS OF THE WATERLOO PUB N/A N/A **EDUCATION SUPPORT** 15,000 LIBRARY

WATERLOO, IA 50701				
GEORGETOWN UNIVERSITY 2115 WISCONSIN AVENUE NW SUITE 500	N/A	N/A	EDUCATION SUPPORT	

415 COMMERCIAL STREET

SUITE 500 WASHINGTON, DC 20007				
GIRL SCOUTS OF EASTERN IA & WEST IL 510 MULBERRY ST	N/A	N/A	EDUCATION SUPPORT	5,000

10,000

510 MULBERRY ST WATERLOO, IA 50703			<b>&gt;</b> 3a	1,277,000
GIRL SCOUTS OF EASTERN IA & WEST IL	N/A	N/A	EDUCATION SUPPORT	5,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year GROUT MUSEUM INC N/A N/A **EDUCATION SUPPORT** 40,000 503 SOUTH STREET WATERLOO, IA 50701 HAWKEVE COMMUNITY COLLEGE FON N/A NI/A EDUCATION SUDDOPT 15 000

1501 EAST ORANGE ROAD PO BOX 8015 WATERLOO, IA 507048015	IN/A	IN/A	EDUCATION SUPPORT	13,000
IOWA LEGAL AID FOUNDATION 1111 9TH STREET STE 230 DES MOINES, IA 503142527	N/A	N/A	EDUCATION SUPPORT	2,000

Total .

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

or substantial contributor

a Paid during the year				
a raid during the year				
IOWA STATE BAR FOUNDATION 625 EAST COURT AVENUE	N/A	N/A	EDUCATION SUPPORT	1,000

DES MOINES, IA 50309				
LEAGUE OF WOMEN VOTERS OF IOWA 4116 MARYHILL DRIVE CEDAR FALLS, IA 506135781	N/A	N/A	EDUCATION SUPPORT	5,000
			l .	

4116 MARYHILL DRIVE CEDAR FALLS, IA 506135781	N/A	N/A	EDUCATION SUPPORT	5,000
LORAS COLLEGE1450 ALTA VISTA PO BOX 178 DUBUQUE 14 52001	N/A	N/A	EDUCATION SUPPORT	317,700

Total			▶ 3a	1,277,000
LORAS COLLEGE1450 ALTA VISTA PO BOX 178 DUBUQUE, IA 52001	N/A	N/A	EDUCATION SUPPORT	317,700
CEDAR FALLS, IA 506135781				

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year MEMORIAL FOUNDATION OF ALLEN N/A N/A **EDUCATION SUPPORT** 15,000

HOSP 1825 LOGAN AVE WATERLOO, IA 50703				
MOUNT MERCY UNIVERSITY	N/A	N/A	EDUCATION SUPPORT	10,000

1330 ELMHURST DRIVE NE CEDAR RAPIDS, IA 524024797				
NAMI BLACK HAWK COUNTY 1825 LOGAN AVENUE WATERLOO, IA 50703	N/A	N/A	EDUCATION SUPPORT	5,000

Total .

За

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year **NEW MELLERAY ABBEY** N/A N/A **EDUCATION SUPPORT** 8,000 6632 MELLERAY CIRCLE PEOSTA, IA 52068

NORTHEAST IOWA FOOD BANK INC 1605 LAFAYETTE STREET BOX 2397 WATERLOO, IA 507042397	N/A	N/A	EDUCATION SUPPORT	20,000
OUR LADY OF THE MISSISSIPPI ABBEY 8400 ABBEY HILL ROAD	N/A	N/A	EDUCATION SUPPORT	5,000

Total			▶ 3a	1,277,000
OUR LADY OF THE MISSISSIPPI ABBEY 8400 ABBEY HILL ROAD DUBUQUE, IA 52003	N/A	N/A	EDUCATION SUPPORT	5,000
WATERLOO, IA 507042397				

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
PEOPLES COMMUNITY HEALTH CLINIC	N/A	N/A	EDUCATION SUPPORT	5,000

905 FRANKLIN STREET WATERLOO, IA 50703				
QUEEN OF PEACE CHURCH 320 MULBERRY STREET WATER OO 1A 50703	N/A	N/A	EDUCATION SUPPORT	10,000

QUEEN OF PEACE CHURCH 320 MULBERRY STREET WATERLOO, IA 50703	N/A	N/A	EDUCATION SUPPORT	10,000
SACRED HEART CHURCH 627 WEST 4TH STREET	N/A	N/A	EDUCATION SUPPORT	10,000

WATERLOO, IA 50703				
SACRED HEART CHURCH 627 WEST 4TH STREET WATERLOO, IA 50702	N/A	N/A	EDUCATION SUPPORT	10,000

SACRED HEART CHURCH 627 WEST 4TH STREET	N/A	N/A	EDUCATION SUPPORT	10,000
WATERLOO, IA 50702				
Total			▶ 3a	1,277,000

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

SINSINAWA DOMINICAN INC 585 COUNTY RD Z SINSINAWA, WI 53824	N/A	N/A	EDUCATION SUPPORT	5,000
CICTEDS OF CHARITY DVM	N/A	I NI / A	EDUCATION CURRORT	F 000

SISTERS OF CHARITY BVM 1100 CARMEL DRIVE DUBUQUE, IA 520037991	N/A	N/A	EDUCATION SUPPORT	5,000
SISTERS OF MERCY WEST MIDWEST	N/A	NA/	EDUCATION SUPPORT	5,000

D0B0Q0E,1A 320037991				
SISTERS OF MERCY WEST MIDWEST COMM 7262 MERCY ROAD OMAHA, NE 681242389	N/A	NA/	EDUCATION SUPPORT	5,000

OMAHA, NE 681242389			▶ 3a	1,277,000
7262 MERCY ROAD				
COMM	IN/A	INA	LDOCATION SOFFORT	3,000
SISTERS OF MERCY WEST MIDWEST	I N/A	I NA/	I EDUCATION SUPPORT	5,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SISTERS OF ST FRANCIS OF DUBUOUE N/A N/A **EDUCATION SUPPORT** 5,000 MOUNT ST FRANCIS 3390 WINDSOR AVE DUBUQUE, IA 520011311

SISTERS OF THE PRESENTATION BVM 2360 CARTER ROAD DUBUQUE, IA 52001	N/A	N/A	EDUCATION SUPPORT	5,000
SOCIETY OF ST VINCENT DE PAUL 320 BROADWAY WATERLOO, IA 50703	N/A	N/A	EDUCATION SUPPORT	15,000

Total .

За

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ST EDWARD'S CATHOLIC CHURCH N/A N/A **EDUCATION SUPPORT** 30,000 1423 KIMBALL AVENUE WATERLOO, IA 50702 ST STEPHENS THE WITNESS N/A N/A **EDUCATION SUPPORT** 15,000

STUDENT CENTER 1019 WEST 23RD STREET CEDAR FALLS, IA 50613				
STONEHILL BENEVOLENT FOUNDATION 3485 WINDSOR AVENUE	N/A	N/A	EDUCATION SUPPORT	1,000

STONEHILL BENEVOLENT FOUNDATION 3485 WINDSOR AVENUE DUBUQUE, IA 52001	N/A	N/A	EDUCATION SUPPORT	1,000
Total	1 277 000			

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year THE JOB FOUNDATION N/A N/A **EDUCATION SUPPORT** 10,000 2712 ORCHARD DRIVE ST B2

CEDAR FALLS, IA 50613				
THE ROTARY FOUNDATION OF ROTARY INTERNATIONAL 1560 SHERMAN AVENUE EVANSTON, IL 602013698	N/A	N/A	EDUCATION SUPPORT	1,000
UNI FOUNDATION ENDOWMENT FUND	N/A	N/A	EDUCATION SUPPORT	207,000

UNI FOUNDATION ENDOWMENT FUND N/A N/A EDUCATION SUPPORT 207,000 CEDAR FALLS, IA 506140282	EVANSTON, IL 602013698				
	204 COMMONS	N/A	N/A	EDUCATION SUPPORT	207,000

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year WATERLOO COMMUNITY FOUNDATION N/A N/A **EDUCATION SUPPORT** 4,000 K4K PO BOX 1253

WATERLOO, IA 507041253

Total .

WATERLOO-CEDAR FALLS SYMPHONY ORCHESTRA ASSOCIATIONGBPAC 17 CEDAR FALLS, IA 506140803	N/A	N/A	EDUCATION SUPPORT	20,000
WINNEBAGO COUNCIL BOY SCOUTS OF AMERICA 1732929 AIRPORT BLVD	N/A	N/A	EDUCATION SUPPORT	5,000

CEDAR FALLS, IA 506140803				
WINNEBAGO COUNCIL BOY SCOUTS OF AMERICA 1732929 AIRPORT BLVD WATERLOO, IA 50703	N/A	N/A	EDUCATION SUPPORT	5,000

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

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
YWCA OF BLACK HAWK COUNTY	N/A	N/A	EDUCATION SUPPORT	10,000

YWCA OF BLACK HAWK COUNTY 425 LAFAYETTE STREET WATERLOO, IA 50703	N/A	N/A	EDUCATION SUPPORT	
Total			▶ 3a	

efile GRAPHIC print - DO NOT P	ROCESS As Filed	Data -		DLN: 93491175007240				
TY 2019 Accounting Fe	TY 2019 Accounting Fees Schedule							
Name: THE GALLAGHER FAMILY FOUNDATION EIN: 42-1362579								
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes				
ACCOUNTING FEES	6,95	0 3,475		3,475				

TY 2019 In	vestments Corporato	e Bonds Schedu	ule	

DLN: 93491175007240

Name: THE GALLAGHER FAMILY FOUNDATION

**EIN:** 42-1362579

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

Investments Corporate Bonds Schedule		
Name of Bond	End of Year Book	End of Year Fair

Name of Bond	End of Year Book Value	End of Year Fair Market Value
REGIONS FIXED INCOME FUNDS	365,156	382,878

effie GRAPHIC	print - DO NOT PROCESS	AS FIIED Data -	DLN: 93491175007240

## **TY 2019 Investments Corporate Stock Schedule**

Name: THE GALLAGHER FAMILY FOUNDATION

**EIN:** 42-1362579

Investments Corporation Stock Schedule		
Name of Stock	End of Year Book Value	End of Year Fair Market Value
REGIONS EQUITY FUNDS	500,167	601,670
REGIONS ALTERNATIVE FUNDS	163,374	164,644
BESSEMER CAP CORE FUNDS	2,158,020	2,902,207
BESSEMER LARGE CAP STRATEGIES FUNDS	5,577,041	6,031,018
BESSEMER SMALL & MID CAP STRAT FUNDS	386,068	452,530
BESSEMER STRATEGIC OPPORTUNITIES FDS		
BESSEMER NON US FUNDS	585,036	599,940
BESSEMER MID CAP	880,808	900,828
BESSEMER SMALL & MID CAP CORE FUNDS	440,719	562,505
BESSEMER MULTI-ASSET OPPORTUN FUNDS	2,647,497	2,557,267

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491175007240				
TY 2019 Investments - Other Schedule						

Name: THE GALLAGHER FAMILY FOUNDATION

THE 3CPM COMPANY INC

Catagony / Thomas	Links d at Coat a	I \
Investments Other Schedule 2		
<b>EIN:</b> 42-1362579		

<b>EIN:</b> 42-13625/9							
Investments Other Schedule 2							
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value				
CEDAR VALLEY VENTURE FUND	AT COST	8,702	8,702				
ELECTROCHEMICAL OVVCEN CONCERTS INC	AT COST	35.000	35,000				

	Category/ Item	Listed at Cost or FMV	Book Value	End of You Market
	CEDAR VALLEY VENTURE FUND	AT COST	8,702	
ı	ELECTRO CHENTONI OVO/CENI CONICERTO INIC	AT COST	35.000	

	FMV		Market Value
CEDAR VALLEY VENTURE FUND	AT COST	8,702	8,702
ELECTROCHEMICAL OXYGEN CONCEPTS INC	AT COST	25,000	25,000

AT COST

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	l: 93491175007240	
TY 2019 Other Expenses Schedule					
Name: THE GALLAGHER FAMILY FOUNDATION					
<b>EIN:</b> 42-1362579					
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
EXPENSES					
SERVICE CHARGES & FEES	395	395			

2,463

345

160

29

29

2,463

345

160

INSURANCE

**POSTAGE** 

SUPPLIES

PARTNERSHIP LOSS

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		D	LN: 93491175007240		
<b>TY 2019 Other Liabilities Sche</b>	TY 2019 Other Liabilities Schedule					
Name:	THE GALLAGH	ER FAMILY F	OUNDATION			
<b>EIN:</b> 42-1362579						
Description			Beginning of Year - Book Value	End of Year - Book Value		
PAYROLL WITHHOLDINGS			810	348		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	-	DLN	N: 93491175007240	
TY 2019 Other Professional I	Fees Schedul	e			
Name	THE CALLAC	LIED EAMILY FOLI	ALD ATTON		
Name: THE GALLAGHER FAMILY FOUNDATION					
<b>EIN:</b> 42-1362579					
Category	Amount	Net Investment	Adjusted Net	Disbursements	
		Income	Income	for Charitable	
<b>l</b>				Purposes	

49,653

INVESTMENT FEES

49,653

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DL	N: 93491175007240	
TY 2019 Taxes Schedule					
Name	e: THE GALLAC	SHER FAMILY FOUN	NDATION		
<b>EIN:</b> 42-1362579					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
EXCISE TAXES	6,173				
FOREIGN TAXES WITHHELD	1,387	1,387			

efile GRAPHIC print - DO	NOT PROCESS As Filed Data	-		DLN: 93491175007240		
Schedule B	Sched	dule of Contributors		OMB No. 1545-0047		
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Attach to Form 990, 990-EZ, or 990-PF.  Sury ► Go to <u>www.irs.gov/Form990</u> for the latest information.		2019			
Name of the organization THE GALLAGHER FAMILY F	OUNDATION		Employer i	identification number		
Organization type (chec			42-1362579	<del>)</del>		
organization type (onec	K 6/16).					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)( ) (enter number)	organization				
	4947(a)(1) nonexempt ch	aritable trust <b>not</b> treated as a p	rivate foundation			
	☐ 527 political organization					
Form 990-PF	501(c)(3) exempt private	foundation				
	4947(a)(1) nonexempt ch	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private f	☐ 501(c)(3) taxable private foundation				
	tion filing Form 990, 990-EZ, or 990 property) from any one contributor.					
Special Rules						
under sections 50 received from any	on described in section 501(c)(3) fili 9(a)(1) and 170(b)(1)(A)(vi), that ch one contributor, during the year, to 1h, or (ii) Form 990-EZ, line 1. Con	necked Schedule A (Form 990 optal contributions of the greater	or 990-EZ), Part II, line 13	, 16a, or 16b, and that		
during the year, to	on described in section 501(c)(7), (8 otal contributions of more than \$1,00 ne prevention of cruelty to children of	00 <i>exclusively</i> for religious, cha	ritable, scientific, literary,			
during the year, c If this box is chec purpose. Don't co	on described in section 501(c)(7), (8) contributions <i>exclusively</i> for religious ked, enter here the total contribution mplete any of the parts unless the 6 le, etc., contributions totaling \$5,00	s, charitable, etc., purposes, but ns that were received during the <b>General Rule</b> applies to this org	t no such contributions tot e year for an e <i>xclusively</i> re ganization because it rece	taled more than \$1,000. religious, charitable, etc., eived <i>nonexclusively</i>		
990-EZ, or 990-PF), but i	that isn't covered by the General F t <b>must</b> answer "No" on Part IV, line rt I, line 2, to certify that it doesn't m	2, of its Form 990; or check the	e box on line H of its Form	ırm 990, ı 990-EZ		
For Paperwork Reduction Action Form 990, 990-EZ, or 990	t Notice, see the Instructions -PF.	Cat. No. 30613X	Schedule B (Form 996	0, 990-EZ, or 990-PF) (2019)		

Employer identification number

THE GALLAGHER F	FAMILY FOUNDATION	42-1362579	
Part I Contributors	Contributors (see instructions). Use duplicate copies of Part I if add	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PO BOX 1351  WATERLOO, IA 50704	\$ 25,000	☐ Person ☐ 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 Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person 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 Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person 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 Noncash (Complete Part II for noncash contributions.)

Schedule	B (Form 990, 990-EZ, or 990-PF) (2019)		Page <b>4</b>		
	rganization AGHER FAMILY FOUNDATION		Employer identification number 42-1362579		
Part III	Exclusively religious, charitable, etc., contributed than \$1,000 for the year from any one contribute organizations completing Part III, enter the total the year. (Enter this information once. See instruuts duplicate copies of Part III if additional space is	r. Complete columns (a) thr of exclusively religious, cha actions.) ► \$			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	Transferee's name, address, and ZIP 4	(e) Transfer of gift Transferee's name, address, and ZIP 4 Relationsh			
		_			
(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		
	Transferee's name, address, and ZIP 4	(e) Transfer of gift Re	elationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	c) Use of gift	(d) Description of how gift is held		
	Transferee's name, address, and ZIP 4	(e) Transfer of gift Re	elationship of transferor to transferee		
			Schedule B (Form 990, 990-EZ, or 990-PF) (2019)		