

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.**
 ▶ **Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.**

OMB No 1545-0052
2017
Open to Public Inspection

For calendar year 2017, or tax year beginning 09-01-2017, and ending 08-31-2018

Name of foundation THE ROCK ISLAND COMMUNITY FOUNDATION		A Employer identification number 36-6163829	
Number and street (or P O box number if mail is not delivered to street address) PO BOX 3331		B Telephone number (see instructions) (309) 794-1120	
City or town, state or province, country, and ZIP or foreign postal code ROCK ISLAND, IL 61204		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 1,945,469		J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	
		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	13,612			
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	5,146	5,146		
	4 Dividends and interest from securities	48,269	48,269		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	21,841			
	b Gross sales price for all assets on line 6a 369,247				
	7 Capital gain net income (from Part IV, line 2)		21,841		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)	509	0	0		
12 Total. Add lines 1 through 11	89,377	75,256	0		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0	0	0	0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)				
	c Other professional fees (attach schedule)	24,821	24,821	0	0
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	1,785	0	0	0
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	34,898	0	0	0
	24 Total operating and administrative expenses. Add lines 13 through 23	61,504	24,821	0	0
	25 Contributions, gifts, grants paid	110,951			110,951
26 Total expenses and disbursements. Add lines 24 and 25	172,455	24,821	0	110,951	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	-83,078				
b Net investment income (if negative, enter -0-)		50,435			
c Adjusted net income (if negative, enter -0-)			0		

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year		
		(a) Book Value	(b) Book Value	(c) Fair Market Value	
Assets	1 Cash—non-interest-bearing			-7	-7
	2 Savings and temporary cash investments	17,852	3,347		3,347
	3 Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____				
	4 Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____				
	5 Grants receivable				
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____				
	8 Inventories for sale or use				
	9 Prepaid expenses and deferred charges				
	10a Investments—U S and state government obligations (attach schedule)				
	b Investments—corporate stock (attach schedule)	1,511,170	1,488,505		1,671,137
	c Investments—corporate bonds (attach schedule)	305,726	260,725		251,307
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____				
	12 Investments—mortgage loans				
	13 Investments—other (attach schedule)	20,130	19,230		19,685
	14 Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____				
15 Other assets (describe ▶ _____)					
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	1,854,878	1,771,800		1,945,469	
Liabilities	17 Accounts payable and accrued expenses				
	18 Grants payable.				
	19 Deferred revenue				
	20 Loans from officers, directors, trustees, and other disqualified persons				
	21 Mortgages and other notes payable (attach schedule).				
	22 Other liabilities (describe ▶ _____)				
	23 Total liabilities (add lines 17 through 22)	0	0		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24 Unrestricted				
	25 Temporarily restricted				
	26 Permanently restricted				
	Foundations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 31.				
	27 Capital stock, trust principal, or current funds	1,854,878	1,771,800		
	28 Paid-in or capital surplus, or land, bldg, and equipment fund	0	0		
29 Retained earnings, accumulated income, endowment, or other funds	0	0			
30 Total net assets or fund balances (see instructions)	1,854,878	1,771,800			
31 Total liabilities and net assets/fund balances (see instructions) .	1,854,878	1,771,800			

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	1,854,878
2 Enter amount from Part I, line 27a	2	-83,078
3 Other increases not included in line 2 (itemize) ▶ _____	3	0
4 Add lines 1, 2, and 3	4	1,771,800
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 30 .	6	1,771,800

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
1a See Additional Data Table				
b				
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a See Additional Data Table				
b				
c				
d				
e				
(i) F M V as of 12/31/69			(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
a See Additional Data Table				
b				
c				
d				
e				
2 Capital gain net income or (net capital loss)		{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7		2 21,841
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7		3

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
 If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2016	126,316	1,911,567	0.066080
2015	118,406	1,872,912	0.063220
2014	123,331	1,983,614	0.062175
2013	121,249	1,989,335	0.060950
2012	114,022	1,854,657	0.061479
2 Total of line 1, column (d)			2 0.313904
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			3 0.062781
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5			4 1,931,038
5 Multiply line 4 by line 3			5 121,232
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 504
7 Add lines 5 and 6			7 121,736
8 Enter qualifying distributions from Part XII, line 4			8 110,951

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

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

Table with 11 rows for excise tax calculations. Includes fields for exempt foundations, domestic foundations, tax under section 511, subtitle A tax, and credits/payments. Total amount owed is 1,009.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Includes questions about political campaigns, political expenditures, unrelated business income, and state reporting. Includes Yes/No columns.

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-14 regarding controlled entities, donor advised funds, public inspection requirements, and books in care.

Located at 1600 4TH AVENUE SUITE 405 ROCK ISLAND IL ZIP+4 61201

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year.

Table with 3 columns: Question, Yes, No. Row 16 regarding interest in foreign countries.

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

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

Main table with 3 columns: Question, Yes, No. Rows 1a-4b regarding Form 4720 exceptions and requirements.

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

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

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

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000. **0**

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

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services. **0**

Part IX-A Summary of Direct Charitable Activities

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

1	Expenses

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

1	Amount
All other program-related investments See instructions	

Total. Add lines 1 through 3 **0**

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	1,949,843
b	Average of monthly cash balances.	1b	10,602
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	1,960,445
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	1,960,445
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	29,407
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	1,931,038
6	Minimum investment return. Enter 5% of line 5.	6	96,552

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

1	Minimum investment return from Part X, line 6.	1	96,552
2a	Tax on investment income for 2017 from Part VI, line 5.	2a	1,009
b	Income tax for 2017 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	1,009
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	95,543
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	95,543
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	95,543

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	110,951
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	110,951
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	110,951

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				95,543
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only.			0	
b Total for prior years 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2017				
a From 2012.	22,487			
b From 2013.	24,563			
c From 2014.	27,168			
d From 2015.	28,536			
e From 2016.	31,662			
f Total of lines 3a through e.	134,416			
4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ <u>110,951</u>				
a Applied to 2016, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2017 distributable amount.				95,543
e Remaining amount distributed out of corpus	15,408			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))				0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	149,824			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).		0		
8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions).	22,487			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	127,337			
10 Analysis of line 9				
a Excess from 2013.	24,563			
b Excess from 2014.	27,168			
c Excess from 2015.	28,536			
d Excess from 2016.	31,662			
e Excess from 2017.	15,408			

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

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling. ▶

b Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					
c "Support" alternative test—enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

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

1 Information Regarding Foundation Managers:

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

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed
 THE ROCK ISLAND COMMUNITY FOUNDATIO
 PO BOX 3331
 ROCK ISLAND, IL 61201
 (309) 794-2846

b The form in which applications should be submitted and information and materials they should include
 LETTER STATING PURPOSE AND USE

c Any submission deadlines
 JULY 31

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors
 CITY OF ROCK ISLAND AND VICINITY THEREOF

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	110,951
b <i>Approved for future payment</i>				
Total			▶ 3b	0

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

Part XVII

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting foundation to a noncharitable exempt organization of

- (1) Cash.
(2) Other assets.

b Other transactions

- (1) Sales of assets to a noncharitable exempt organization.
(2) Purchases of assets from a noncharitable exempt organization.
(3) Rental of facilities, equipment, or other assets.
(4) Reimbursement arrangements.
(5) Loans or loan guarantees.
(6) Performance of services or membership or fundraising solicitations.

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.

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

Table with 3 columns: Question, Yes, No. Rows correspond to items 1a(1), 1a(2), 1b(1) through 1b(6), and 1c.

Schedule table with 4 columns: (a) Line No, (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements.

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

b If "Yes," complete the following schedule

Schedule table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship.

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

Sign Here

Signature of officer or trustee: ***** Date: 2019-02-01 Title: *****

May the IRS discuss this return with the preparer shown below (see instr)? [] Yes [] No

Paid Preparer Use Only

Table for paid preparer information with columns: Print/Type preparer's name (JERRY L GODDARD), Preparer's Signature, Date, Check if self-employed, PTIN (P00029133), Firm's name (CARPENTIER MITCHELL GODDARD & COLL), Firm's EIN (36-2662809), Firm's address (4915 21ST AVENUE A, MOLINE, IL 61265), Phone no (309) 762-3626.

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
AMERICAN BANK - CAPITAL GAIN DIVIDEND	P	2015-06-15	2017-12-01
AMERICAN BANK	P	2015-10-27	2017-12-15
AMERICAN BANK	P	2015-12-14	2017-11-20
AMERICAN BANK	P	2015-10-27	2018-08-15
AMERICAN BANK	P	2015-12-09	2017-09-14
US BANK	P	2017-01-10	2017-11-03
US BANK	P	2015-01-13	2017-11-03
CAPITAL GAINS DIVIDENDS	P		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
4,119			4,119
27,201		22,765	4,436
15,000		14,963	37
64,648		69,573	-4,925
		15,000	-15,000
29,626		24,733	4,893
214,346		200,372	13,974
14,307			14,307

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
			4,119
			4,436
			37
			-4,925
			-15,000
			4,893
			13,974
			14,307

Form 990FP Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
ALISON BEARDSLEY 1405 40TH AVENUE ROCK ISLAND, IL 61201	DIRECTOR 1 00	0	0	0
CHARLOTTE DOEHLER-MORRISON 1601 RIVER DRIVE SUITE 110 MOLINE, IL 61265	DIRECTOR 1 00	0	0	0
SARA DARROW 211-19TH STREET ROCK ISLAND, IL 61201	DIRECTOR 1 00	0	0	0
JENNIFER WALKER 1025 17TH STREET ROCK ISLAND, IL 61201	DIRECTOR 1 00	0	0	0
JOHN PHILLIPS 2910 22 1/2 AVENUE ROCK ISLAND, IL 61201	DIRECTOR 1 00	0	0	0
GARY ROWE 1800 3RD AVE STE 302 ROCK ISLAND, IL 61201	EXEC-DIRECTOR 1 00	0	0	0
BRANDY DONALDSON PO BOX 3331 ROCK ISLAND, IL 61201	DIRECTOR 1 00	0	0	0
CHRISTOPHER MANDLE 806 W 4TH STREET 1 DAVENPORT, IA 52802	DIRECTOR 1 00	0	0	0
KELLY MCLAUGHLIN 1260 37TH AVENUE ROCK ISLAND, IL 61201	DIRECTOR 1 00	0	0	0
DEBBIE SCHWIEBERT 3913 14TH STREET ROCK ISLAND, IL 61201	DIRECTOR 1 00	0	0	0

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ALLEMAN HIGH SCHOOL 1103 40TH STREET ROCK ISLAND, IL 61201	NONE	PUBLIC CHARITY	SUPPORT CHILDRENS EDUCATION PROGRAMS	1,000
AMERICAN RED CROSS 1100 RIVER DRIVE MOLINE, IL 61265	NONE	PUBLIC CHARITY	SUPPORTS DISASTER RELIEF, HEALTH & SAFETY, LIFESAVING BLOOD	1,000
ARC OF THE QUAD CITIES 4016 9TH STREET ROCK ISLAND, IL 61201	NONE	PUBLIC CHARITY	SUPPORT PROGRAMS FOR PEOPLE WITH DISABILITIES	750
Total ▶ 3a				110,951

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AUGUSTANA COLLEGE639 38TH ST ROCK ISLAND, IL 61201	NONE	PUBLIC CHARITY	SUPPORTS EDUCATION	1,000
BALLET QUAD CITIES613 17TH STREET ROCK ISLAND, IL 61201	NONE	PUBLIC CHARITY	SUPPORT ART PROGRAMS	3,000
BETHANY FOR CHILDREN AND FAMILIES 1830 6TH AVENUE MOLINE, IL 61265	NONE	PUBLIC CHARITY	SUPPORTS FAMILY NEEDS	3,000
Total ▶ 3a				110,951


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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BIG BROTHERS BIG SISTERS 130 WEST 5TH STREET DAVENPORT, IA 52801	NONE	PUBLIC CHARITY	SUPPORT ASSISTANCE TO CHILDREN	3,000
CF YOUTH HOPE3928 12TH AVE MOLINE, IL 61265	NONE	PUBLIC CHARITY	SUPPORT PROGRAMS FOR THE YOUTH	5,000
CHILD ABUSE COUNCIL524 15TH ST MOLINE, IL 61265	NONE	PUBLIC CHARITY	SUPPORTS CHILDREN & HELPS FIGHT CHILD ABUSE	2,000
Total ▶				110,951
3a				

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CHRISTIAN CARE 2209 3RD AVENUE MOLINE, IL 61265	NONE	PUBLIC CHARITY	SUPPORTS FAMILY NEEDS	2,000
CHURCH OF PEACE 1114 12TH ST ROCK ISLAND, IL 61201	NONE	PUBLIC CHARITY	SUPPORTS CHURCH ASSOCIATION PROGRAMS	1,000
CHURCHES UNITED OF THE QC 2535 TECH DRIVE SUITE 205 BETTENDORF, IA 52722	NONE	PUBLIC CHARITY	SUPPORTS CHURCH ASSOCIATION PROGRAMS SUPPORT CHURCH ASSOCIATION'S PROGRAMS	2,500
Total ▶ 3a				110,951

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
COMMUNITY CARING CONFERENCE 1110 12TH STREET ROCK ISLAND, IL 61021	NONE	PUBLIC CHARITY	REACHING OUT TO THE COMMUNITY	2,000
COMMUNITY HEALTH CARE INC 1106 4TH AVE MOLINE, IL 61265	NONE	PUBLIC CHARITY	SUPPORTS HEALTH CARE	2,879
DE LA CERDA HOUSE 2827 7TH AVE 11 ROCK ISLAND, IL 61201	NONE	PUBLIC CHARITY	SUPPORTS THE NEEDS OF FAMILIES	1,000
Total 3a 				110,951

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
DRESS FOR SUCCESS311 E 2ND ST DAVENPORT, IA 52801	NONE	PUBLIC CHARITY	HELPS WOMEN THRIVE IN WORK AND IN LIFE	1,000
FAMILY MUSEUM OF ARTS & SCIENCE 2900 LEARNING CAMPUS DR BETTENDORF, IA 52722	NONE	PUBLIC CHARITY	HELPS KIDS LEARN ABOUT THE ARTS & SCIENCES	1,000
FIGGE ART MUSEUM225 W 2ND S DAVENPORT, IA 52801	NONE	PUBLIC CHARITY	SUPPORTS ART PROGRAMS	2,000
Total ▶ 3a				110,951

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FIRST DAY FUND OF ROCK ISLAND PO BOX 3331 ROCK ISLAND, IL 61201	NONE	PUBLIC CHARITY	PROVIDE SCHOOL SUPPLIES TO CHILDREN	1,500
FRESH FILMSDREAMING639 38TH ST ROCK ISLAND, IL 61201	NONE	PUBLIC CHARITY	SUPPORTS TEEN PROGRAMS IN FILMS	500
FRIENDS OF HAUBERG CIVIC CENTER 1300 24TH ST ROCK ISLAND, IL 61201	NONE	PUBLIC CHARITY	PROVIDES SUPPORT FOR THE HAUBERG CIVC CENTER PRESERVING OUR COMMUNITIES HISTORY	1,000
Total ▶ 3a				110,951

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FRIENDSHIP MANOR 1209 21ST AVE ROCK ISLAND, IL 61201	NONE	PUBLIC CHARITY	HELPS SUPPORT THE ELDERLY	1,000
GENESIUS THEATRE 1120 40TH STREET ROCK ISLAND, IL 61201	NONE	PUBLIC CHARITY	SUPPORT THEATRE	1,000
GIGI'S PLAYHOUSE 3906 38TH AVE MOLINE, IL 61265	NONE	PUBLIC CHARITY	SUPPORTS YOUTH PROGRAMS	500
Total ▶				110,951
3a				

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GIRL SCOUTS OF EASTERN IOWA 2011 2ND AVE ROCK ISLAND, IL 61201	NONE	PUBLIC CHARITY	SUPPORTS PROGRAMS FOR THE YOUTH	3,000
HAND IN HAND FOR CHILDREN PO BOX 3331 ROCK ISLAND, IL 61201	NONE	PUBLIC CHARITY	SUPPORTS PROGRAMS FOR THE YOUTH	1,000
HEART OF HOPE MINISTRIES 1740 9TH AVE ROCK ISLAND, IL 61201	NONE	PUBLIC CHARITY	SUPPORTS CHURCH ASSOCIATION'S PROGRAMS	1,000
Total	3a ▶			110,951

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MARRIAGE & FAMILY COUNSELING SERVICES 1800 3RD AVE 512 ROCK ISLAND, IL 61201	NONE	PUBLIC CHARITY	SUPPORTS FAMILYS IN THE QUAD CITIES	2,450
MARTIN LUTHER KING COMMUNITY CENTER 630 9TH STREET ROCK ISLAND, IL 61201	NONE	PUBLIC CHARITY	PROVIDE SUPPORT TO FACILITY FOR AT RISK YOUTH	6,000
MILAN CHRISTIAN FOOD PANTRY 128 4TH ST W MILAN, IL 61264	NONE	PUBLIC CHARITY	HELPS PROVIDE FOOD TO THE NEEDY	500
Total ▶ 3a				110,951

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NAMI GREATER MISSISSIPPI VALLEY 1035 W KIMBERLY RD 4 DAVENPORT, IA 52806	NONE	PUBLIC CHARITY	SUPPORTS PROGRAMS THAT HELP INDIVIDUALS LIVING WITH A MENTAL HEALTH CONDITION AND THEIR FAMILIES	1,500
NORMALEAH OVARIAN CANCER INSTITUTE 1612 2ND AVE ROCK ISLAND, IL 61201	NONE	PUBLIC CHARITY	HELPS SUPPORT OVARIAN CANCER AWARENESS	400
ONE EIGHTY601 N MARQUETTE ST DAVENPORT, IL 52802	NONE	PUBLIC CHARITY	SUPPORT HELPING PEOPLE IN THE COMMUNITY	1,000
Total ▶ 3a				110,951

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PALOIMARES SOCIAL JUSTICE CENTER 133 4TH AVE MOLINE, IL 61265	NONE	PUBLIC CHARITY	HELPING PEOPLE IN THE COMMUNITY	1,000
PUTNAM MUSEUM AND IMAX 1717 W 12TH ST DAVENPORT, IA 52804	NONE	PUBLIC CHARITY	SUPPORT FOR CHARITABLE PROGRAMS	3,000
QUAD CITIES CLOSET2CLOSET PO BOX 3331 ROCK ISLAND, IA 61021	NONE	PUBLIC CHARITY	HELP PROVIDE CLOTHES TO THE QUAD CITY FAMILIES	1,000
Total ▶ 3a				110,951

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
QUAD CITY ARTS 1715 2ND AVENUE ROCK ISLAND, IL 61201	NONE	PUBLIC CHARITY	SUPPORT ART PROGRAMS	3,000
QUAD CITY BOTANICAL CENTER 2525 FOURTH AVENUE ROCK ISLAND, IL 61201	NONE	PUBLIC CHARITY	SUPPORT CHARITABLE PROGRAMS	5,000
QUAD CITY SYMPHONY ORCHESTRA 327 BRADY STREET DAVENPORT, IA 52801	NONE	PUBLIC CHARITY	SUPPORT FOR CHARITABLE PROGRAMS	3,000
Total ▶				110,951
3a				

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
QUILTS OF VALORPO BOX 2636 DAVENPORT, IA 52809	NONE	PUBLIC CHARITY	SUPPORTS HONORING OUR VETERANS	250
REBUILDING TOGETHER QUAD CITIES 2435 KIMBERLY ROAD SUITE 80N BETTENDORF, IA 52722	NONE	PUBLIC CHARITY	SUPPORT FOR CHARITABLE PROGRAMS	3,000
RI-MILAN AMERICAN LITTLE LEAGUE PO BOX 904 MILAN, IL 61264	NONE	PUBLIC CHARITY	SUPPORTS YOUTH PROGRAMS	500
Total ▶				110,951
3a				

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
RISE UP COMMUNITY GARDEN PO BOX 3331 ROCK ISLAND, IL 61021	NONE	PUBLIC CHARITY	SUPPORTS PROGRAMS IN THE COMMUNITY	1,000
RIVER ACTION822 E RIVER DR DAVENPORT, IA 52803	NONE	PUBLIC CHARITY	SUPPORT CHARITABLE PROGRAMS	500
RIVER BEND FOOD BANKPO BOX 3331 ROCK ISLAND, IL 61021	NONE	PUBLIC CHARITY	SUPPORTS CHARITABLE PROGRAMS	2,600
Total ▶ 3a				110,951

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
RIVER MUSIC EXPERIENCE 129 MAIN ST DAVENPORT, IA 52801	NONE	PUBLIC CHARITY	SUPPORTS MUSIC EDUCATION IN OUR COMMUNITY	1,000
ROBERT YOUNG CENTER FOR COMMUNITY MENTAL HEALTH 4600 3RD ST MILAN, IL 61265	NONE	PUBLIC CHARITY	HELPS PEOPLE IN OUR COMMUNITY	1,000
ROCK ISLAND COUNTY CHILDRENS ADVOCACY CENTER 734 20TH ST ROCK ISLAND, IL 61021	NONE	PUBLIC CHARITY	SUPPORTS MAKING OUR COMMUNITY A SAFER PLACE FOR CHILDREN	1,668
Total ▶ 3a				110,951

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ROCK ISLAND GIRLS SOFT BALL LEAGUE 4303 24TH ST ROCK ISLAND, IL 61201	NONE	PUBLIC CHARITY	SUPPORT YOUTH PROGRAMS	2,500
ROCK ISLAND MUSIC ASSOCIATION BOX 5111 ROCK ISLAND, IL 61201	NONE	PUBLIC CHARITY	SUPPORT MUSIC PROGRAMS	2,154
ROCK ISLAND PARKS & RECORATION FOUNDATION 4303 24TH ST ROCK ISLAND, IL 61201	NONE	PUBLIC CHARITY	HELPS SUPPORT YOUTH PROGRAMS	1,000
Total ▶ 3a				110,951

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ROCK ISLAND PUBLIC LIBRARY 401 19TH STREET ROCK ISLAND, IL 61201	NONE	PUBLIC CHARITY	SUPPORT THE COMMUNITY SUPPORT READING IN THE QUAD CITIES	1,000
SBC OUTREACH MUSIC & ARTS ACADEMY 919 6TH AVENUE ROCK ISLAND, IL 61201	NONE	PUBLIC CHARITY	SUPPORT MUSIC AND ART PROGRAMS	1,800
SPRING FORWARD LEARNING CENTER 2101 6TH AVENUE ROCK ISLAND, IL 61021	NONE	PUBLIC CHARITY	PROVIDES KIDS WITH A SAFE LEARNING ENVIRONMENT	1,000
Total ▶ 3a				110,951

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ST AMBROSE UNIVERSITY 518 W LOCUST DAVENPORT, IA 52803	NONE	PUBLIC CHARITY	SUPPORT FOR EDUCATION IN LOCAL AREA	2,000
ST JOSEPH WORKER HOUSE FOR WOMEN AND KIDS 901 20TH STREET ROCK ISLAND, IL 61201	NONE	PUBLIC CHARITY	HELPING WOMEN AND CHILDREN IN NEED	2,500
SUPPLEMENTAL EMERGENCY ASSISTANCE PROGRAM 985 LINCOLN ROAD BETTENDORF, IA 52722	NONE	PUBLIC CHARITY	SUPPORT EMERGENCY ASSISTANCE PROGRAM	2,000
Total ▶ 3a				110,951

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THY LOVING KINDNESS MINISTRIES PO BOX 6245 ROCK ISLAND, IL 61021	NONE	PUBLIC CHARITY	HELPS FAMILIES IN NEED	1,000
TWO RIVERS YMCA2040 53RD STREET MOLINE, IL 61265	NONE	PUBLIC CHARITY	SUPPORTS PROGRAM FOR YWCA MEMBERS	3,000
UNDERWEAR BECAUSE WE CARE PO BOX 3331 ROCK ISLAND, IL 61201	NONE	PUBLIC CHARITY	HELPING PEOPLE IN NEED	1,000
Total ▶ 3a				110,951

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WQPT PUBLIC TELEVISION 3300 RIVER DRIVE MOLINE, IL 61265	NONE	PUBLIC CHARITY	SUPPORT EDUCATING THE PEOPLE OF THE COMMUNITY	1,000
WVIK QUAD CITIES NPR639 38TH ST ROCK ISLAND, IL 61201	NONE	PUBLIC CHARITY	SUPPORTING NEWS, MUSIC, ARTS, AND CULTURE	1,000
YWCA OF THE QUAD CITIES 229 16TH STREET ROCK ISLAND, IL 61201	NONE	PUBLIC CHARITY	SUPPORTS PROGRAMS FOR YMCA MEMBERS	3,000
Total ▶				110,951
3a				

TY 2017 Investments Corporate Bonds Schedule**Name:** THE ROCK ISLAND COMMUNITY FOUNDATION**EIN:** 36-6163829**Investments Corporate Bonds Schedule**

Name of Bond	End of Year Book Value	End of Year Fair Market Value
AMERICAN BANK - BOND FUND	10,000	9,592
US BANK - BOND FUNDS	250,725	241,715

TY 2017 Investments Corporate Stock Schedule**Name:** THE ROCK ISLAND COMMUNITY FOUNDATION**EIN:** 36-6163829

Name of Stock	End of Year Book Value	End of Year Fair Market Value
AMERICAN BANK - STOCK FUND	929,445	1,034,128
US BANK - STOCK FUNDS	559,060	637,009

TY 2017 Investments - Other Schedule**Name:** THE ROCK ISLAND COMMUNITY FOUNDATION**EIN:** 36-6163829**Investments Other Schedule 2**

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
US BANK - REAL ESTATE	AT COST	19,230	19,685

TY 2017 Other Expenses Schedule**Name:** THE ROCK ISLAND COMMUNITY FOUNDATION**EIN:** 36-6163829**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FILING FEE	15	0	0	0
CONTRACT LABOR	25,276	0	0	0
INSURANCE	1,341	0	0	0
MEMORIAL	141	0	0	0
OFFICE EXPENSE	3,197	0	0	0
RENT	3,720	0	0	0
POSTAGE	50	0	0	0
MISCELLANEOUS	1,158	0	0	0

TY 2017 Other Income Schedule**Name:** THE ROCK ISLAND COMMUNITY FOUNDATION**EIN:** 36-6163829**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
MISCELLANEOUS	509	0	0

TY 2017 Other Professional Fees Schedule**Name:** THE ROCK ISLAND COMMUNITY FOUNDATION**EIN:** 36-6163829

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TRUST FEES-US BANK	9,021	9,021	0	0
TRUST FEES-AMERICAN BANK	12,789	12,789	0	0
CMG FEES	3,011	3,011	0	0

TY 2017 Taxes Schedule**Name:** THE ROCK ISLAND COMMUNITY FOUNDATION**EIN:** 36-6163829

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAX EXPENSE	851	0	0	0
990PF ESTIMATE	934	0	0	0