

For calendar year 2018, or tax year beginning 01-01-2018, and ending 12-31-2018

Name of foundation KRAUSE GENTLE FOUNDATION		A Employer identification number 42-1414004	
Number and street (or P O box number if mail is not delivered to street address) 1459 GRAND AVE		Room/suite	B Telephone number (see instructions) (515) 226-0128
City or town, state or province, country, and ZIP or foreign postal code DES MOINES, IA 503093005		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 checked="" 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) ▶ \$ 7,722,184	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)				
	2 Check ▶ <input checked="" type="checkbox"/> If the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	195	195		
	4 Dividends and interest from securities	132,729	132,729		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10 _____	181,019			
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2)		181,019		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	93,383	-27,198		
	12 Total. Add lines 1 through 11	407,326	286,745		
	13 Compensation of officers, directors, trustees, etc	0	0		0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	5,630	2,815		2,815
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	8,266	1,070		0
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	296	0		0
	24 Total operating and administrative expenses. Add lines 13 through 23	14,192	3,885		2,815
	25 Contributions, gifts, grants paid	830,513			830,513
	26 Total expenses and disbursements. Add lines 24 and 25	844,705	3,885		833,328
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-437,379			
	b Net investment income (if negative, enter -0-)		282,860		
c Adjusted net income (if negative, enter -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 (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
Assets	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments	512,010	411,102	411,102
	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)	7,269,572	6,765,028	6,765,028
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	568,140	546,054	546,054
	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)	8,349,722	7,722,184	7,722,184	
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	0	0	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	8,349,722	7,722,184	
	30	Total net assets or fund balances (see instructions)	8,349,722	7,722,184	
31	Total liabilities and net assets/fund balances (see instructions) .	8,349,722	7,722,184		

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	8,349,722
2	Enter amount from Part I, line 27a	2	-437,379
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	7,912,343
5	Decreases not included in line 2 (itemize) ▶ _____	5	190,159
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	7,722,184

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a VANGUARD TOTAL STK MKT ETF		2013-11-18	2018-08-29
b K-1 CCSD II	P		2018-12-31
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 501,067		310,691	190,376
b		9,357	-9,357
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a			190,376
b			-9,357
c			
d			
e			

2 Capital gain net income or (net capital loss)	2	181,019
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2017	850,231	7,765,432	0 109489
2016	850,652	7,935,689	0 107193
2015	775,455	8,515,630	0 091063
2014	638,255	7,828,205	0 081533
2013	400,095	6,035,636	0 066289

2 Total of line 1, column (d)	2	0 455567
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years	3	0 091113
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	8,339,329
5 Multiply line 4 by line 3	5	759,821
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	2,829
7 Add lines 5 and 6	7	762,650
8 Enter qualifying distributions from Part XII, line 4	8	833,328

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

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

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	2,829
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2.	3	2,829
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	2,829
6	Credits/Payments		
a	2018 estimated tax payments and 2017 overpayment credited to 2018	6a	5,900
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	2,500
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	8,400
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	5,571
11	Enter the amount of line 10 to be Credited to 2019 estimated tax <input type="checkbox"/> 5,571 Refunded <input type="checkbox"/>	11	0

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ 0 (2) On foundation managers <input type="checkbox"/> \$ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ 0		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities	2	No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T	5	No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> IA		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	8b	Yes
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2018 or the taxable year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV	9	No
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions.	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ <u>N/A</u>	13	Yes	
14	The books are in care of ▶ <u>KYLE KRAUSE</u> Telephone no ▶ <u>(515) 226-0128</u>			

Located at ▶ 1459 GRAND AVE DES MOINES IA ZIP+4 ▶ 503093005

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here ▶ <input type="checkbox"/>			
	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15			
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶			

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

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

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions.	1b		No
	Organizations relying on a current notice regarding disaster assistance check here. ▶ <input type="checkbox"/>			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions).	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2018).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		No

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

5a	During the year did the foundation pay or incur any amount to		Yes	No
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<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.		5b	
	Organizations relying on a current notice regarding disaster assistance check here.	<input checked="" type="checkbox"/>		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d)	<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	6b	No
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7b	
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?			
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

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

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
KYLE J KRAUSE 1459 GRAND AVE DES MOINES, IA 503093005	DIRECTOR 1 00	0	0	0
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000.				0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

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

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services. ►		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 NONE	0
2	
3	
4	

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ►	0

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	7,620,064
b	Average of monthly cash balances.	1b	300,208
c	Fair market value of all other assets (see instructions).	1c	546,052
d	Total (add lines 1a, b, and c).	1d	8,466,324
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	8,466,324
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	126,995
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	8,339,329
6	Minimum investment return. Enter 5% of line 5.	6	416,966

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	416,966
2a	Tax on investment income for 2018 from Part VI, line 5.	2a	2,829
b	Income tax for 2018 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	2,829
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	414,137
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	414,137
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	414,137

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	833,328
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	833,328
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	2,829
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	830,499

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 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				414,137
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2018				
a From 2013.	103,824			
b From 2014.	241,164			
c From 2015.	352,499			
d From 2016.	458,754			
e From 2017.	471,343			
f Total of lines 3a through e.	1,627,584			
4 Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ 833,328				
a Applied to 2017, 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 2018 distributable amount.				414,137
e Remaining amount distributed out of corpus	419,191			
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,046,775			
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 2017 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019				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 2013 not applied on line 5 or line 7 (see instructions). . . .	103,824			
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	1,942,951			
10 Analysis of line 9				
a Excess from 2014.	241,164			
b Excess from 2015.	352,499			
c Excess from 2016.	458,754			
d Excess from 2017.	471,343			
e Excess from 2018.	419,191			

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 2018, 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) 2018	(b) 2017	(c) 2016	(d) 2015	
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 foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

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

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

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

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

a The name, address, and telephone number or email address of the person to whom applications should be addressed

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

c Any submission deadlines

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

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

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

Enter gross amounts unless otherwise indicated

(See worksheet in line 13 instructions to verify calculations)

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)
----------------------	--

[illegible]

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

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash.	1a(1)		No
(2) Other assets.	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization.	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization.	1b(2)		No
(3) Rental of facilities, equipment, or other assets.	1b(3)		No
(4) Reimbursement arrangements.	1b(4)		No
(5) Loans or loan guarantees.	1b(5)		No
(6) Performance of services or membership or fundraising solicitations.	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	1c		No
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.			

(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) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

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	*****	2019-11-12	*****	May the IRS discuss this return with the preparer shown below? (see instr)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Signature of officer or trustee	Date	Title	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	SHAWNA HULS				P01315330
	Firm's name ▶ RSM US LLP	Firm's EIN ▶ 42-0714325			
Firm's address ▶ 201 FIRST ST SE STE 800 CEDAR RAPIDS, IA 524011512					Phone no (319) 298-5333

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>				
ABOVE & BEYOND CANCER 1915 GRAND AVE DES MOINES, IA 50309	NONE	PC	QUALITY OF LIFE	5,000
ALTA UNITED METHODIST CHURCH 218 PROSPECT STREET ALTA, IA 51002	NONE	PC	FAITH	250
ALZHEIMERS ASSOCIATIONS 1730 28TH STREET WEST DES MOINES, IA 50266	NONE	PC	QUALITY OF LIFE	250
Total ▶ 3a				830,513

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>				
AMERICAN CANCER SOCIETY 1717 INGERSOLL AVE 111 DES MOINES, IA 50309	NONE	PC	QUALITY OF LIFE	250
BETHANY UNITED CHURCH OF CHRIST 5627 N 95TH AVE W BAXTER, IA 50028	NONE	PC	FAITH	250
BISHOP HEELAN CATHOLIC SCHOOLS 1018 GRANDVIEW SIOUX CITY, IA 51103	NONE	PC	EDUCATION	2,500
Total ▶ 3a				830,513

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>				
BLANK PARK ZOO FOUNDATION 7401 SW 9TH ST DES MOINES, IA 50315	NONE	PC	EDUCATION	500
BOYS AND GIRLS CLUB OF CENTRAL IOWA 1421 WALKER ST DES MOINES, IA 50316	NONE	PC	QUALITY OF LIFE	500
CAMP COURAGEOUS12007 190TH ST MONTICELLO, IA 52310	NONE	PC	QUALITY OF LIFE	1,000
Total ▶ 3a				830,513

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>				
CAMP COURAGEOUS 12007 190TH STREET PO BOX 418 MONTICELLO, IA 52310	NONE	PC	HEALTH	1,000
CAMP COURAGEOUS 12007 190TH STREET PO BOX 418 MONTICELLO, IA 52310	NONE	PC	QUALITY OF LIFE	250
COMMUNITY FOUNDATION OF GREATER DES MOINES 1915 GRAND AVE DES MOINES, IA 50309	NONE	PC	COMMUNITY BETTERMENT	90,000
Total ► 3a				830,513

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 FOUNDATION OF GREATER DES MOINES 1919 GRAND AVENUE DES MOINES, IA 50309	NONE	PC	COMMUNITY BETTERMENT	500
CONSERVATION FOUNDATION OF DICKINSON COUNTY PO BOX 973 OKOBOJI, IA 51355	NONE	PC	ENVIRONMENTAL	200
DALLAS COUNTY FOUNDATION PO BOX 46 ADEL, IA 50003	NONE	PC	QUALITY OF LIFE	500
Total ▶ 3a				830,513

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
DES MOINES PLAYHOUSE 831 42ND STREET DES MOINES, IA 50312	NONE	PC	ARTS AND CULTURE	2,000
DIOCESE OF DES MOINES 601 GRAND AVE DES MOINES, IA 50309	NONE	PC	FAITH	2,000
DIOCESE OF DES MOINES 601 GRAND AVE DES MOINES, IA 50309	NONE	PC	FAITH	100,000
Total ▶ 3a				830,513

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>				
DIOCESE OF DES MOINES 601 GRAND AVE DES MOINES, IA 50309	NONE	PC	FAITH	1,000
DIOCESE OF DES MOINES 601 GRAND AVE DES MOINES, IA 50309	NONE	PC	FAITH	2,200
DIOCESE OF DES MOINES 601 GRAND AVENUE DES MOINES, IA 50309	NONE	PC	FAITH	42,500
Total ▶ 3a				830,513

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>				
DOWLING CATHOLIC HIGH SCHOOL 1400 BUFFALO RD WEST DES MOINES, IA 50265	NONE	PC	EDUCATION	23,000
DOWLING CATHOLIC HIGH SCHOOL 1400 BUFFALO RD WEST DES MOINES, IA 50265	NONE	PC	EDUCATION	12,000
DOWLING CATHOLIC HIGH SCHOOL 1400 BUFFALO RD WEST DES MOINES, IA 50265	NONE	PC	EDUCATION	1,400
Total ► 3a				830,513

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>				
DRAKE UNIVERSITY 2507 UNIVERSITY AVENUE DES MOINES, IA 50311	NONE	PC	EDUCATION	5,000
EASTER SEALS SOCIETY OF DES MOINES 2920 30TH STREET DES MOINES, IA 50310	NONE	PC	QUALITY OF LIFE	2,000
FIRST CONGREGATIONAL UNITED CHRUCH OF CHRIST 100 1ST STREET NE MASON CITY, IA 50401	NONE	PC	FAITH	250
Total ▶ 3a				830,513

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
GIRL SCOUTS OF APPALACHIA 1567 DOWNTOWN WEST BLVD KNOXVILLE, TN 37919	NONE	PC	EDUCATION	250
HISTORICAL ARNOLDS PARK 37 LAKE DRIVE ARNOLDS PARK, IA 51331	NONE	PC	ARTS AND CULTURE	50,000
HOLY FAMILY CATHOLIC SCHOOL FOUNDATION PO BOX 8437 DES MOINES, IA 50301	NONE	PC	FAITH	1,000
Total ▶ 3a				830,513

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
HOSPICE & PALLIATIVE CARE CHARLOTTE REGION 900 DONTIA DRIVE LINCOLN, NC 28092	NONE	PC	QUALITY OF LIFE	500
IMMANUEL LUTHERAN CHURCH 30632 PARAGON AVENUE BURNSIDE, IA 50521	NONE	PC	FAITH	250
INTIMACY WITH GOD MINISTRIES 6829 RIVER BEND DRIVE JOHNSTON, IA 50131	NONE	PC	FAITH	250
Total ▶ 3a				830,513

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
IOWA ALLIANCE FOR ARTS EDUCATION 977 GLENDALE PARK DRIVE HAMPTON, IA 50441	NONE	PC	ARTS AND CULTURE	1,000
IOWA CATHOLIC RADIOBOX 838 DES MOINES, IA 50304	NONE	PC	FAITH	5,000
IOWA CATHOLIC RADIOBOX 838 DES MOINES, IA 50304	NONE	PC	FAITH	5,000
Total ▶ 3a				830,513

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
IOWA COLLEGE FOUNDATION 505 5TH AVENUE 1034 DES MOINES, IA 50309	NONE	PC	EDUCATION	1,000
IOWA HEALTH FOUNDATION - JOHN STODDARD CANCER (CHARLIE CUTLER HEALING) 1415 WOODLAND AVE DES MOINES, IA 50309	NONE	PC	QUALITY OF LIFE	500
IOWA HOSPICE900 56TH STREET DES MOINES, IA 50312	NONE	PC	HUMAN SERVICE	500
Total ▶ 3a				830,513

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
JOHNNY DANOS BETTER TOGETHER FUND CO COMMUNITY FOUNDATION OF GREATER DES MO 1915 GRAND AVE DES MOINES, IA 50309	NONE	PC	QUALITY OF LIFE	1,000
KEEP IOWA BEAUTIFUL 300 EAST LOCUST STE 100 DES MOINES, IA 50309	NONE	PC	ENVIRONMENTAL	250
LORAS COLLEGE1450 ALTA VISTA ST DUBUQUE, IA 52001	NONE	PC	EDUCATION	1,000
Total ▶ 3a				830,513

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>				
LUTHERAN HERITAGE FOUNDATION 51474 ROMEO PLANK RD MACOMB, MI 48042	NONE	PC	HUMAN SERVICE	500
MERCY FOUNDATION OF DES MOINES 1111 6TH AVE DES MOINES, IA 50314	NONE	PC	QUALITY OF LIFE	500
MERCY MEDICAL CENTER NORTH IOWA 1000 4TH ST SW MASON CITY, IA 50401	NONE	PC	HUMAN SERVICE	250
Total ► 3a				830,513

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>				
ONE MISSION108 1ST ST E MT VERNON, IA 52314	NONE	PC	HEALTH	263
PEARSON LAKES ART CENTER PO BOX 255 2001 HIGHWAY 1 OKOBOJI, IA 51355	NONE	PC	ARTS AND CULTURE	2,500
REGINA FOUNDATION 2140 ROCHESTER AVE IOWA CITY, IA 52245	NONE	PC	EDUCATION	2,500
Total ▶ 3a				830,513

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>				
RUTH HARBOR534 42ND STREET DES MOINES, IA 50312	NONE	PC	HUMAN SERVICE	1,000
SACRED HEART CATHOLIC CHURCH 1627 GRAND AVENUE WEST DES MOINES, IA 50265	NONE	PC	FAITH	250
ST ALBERT HIGH SCHOOL HILLTOP FUND 400 GLEASON AVENUE COUNCIL BLUFFS, IA 51503	NONE	PC	EDUCATION	2,500
Total ▶ 3a				830,513

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 CATHERINE'S OF SIENA 3636 N RIDGE ROAD WICHITA, KS 67205	NONE	PC	FAITH	1,000
ST FRANCIS OF ASSISI CATHOLIC CHURCH 7075 ASHWORTH ROAD WEST DES MOINES, IA 50266	NONE	PC	FAITH	126,400
ST FRANCIS OF ASSISI CATHOLIC CHURCH 7075 ASHWORTH ROAD WEST DES MOINES, IA 50266	NONE	PC	FAITH	250
Total ▶ 3a				830,513

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 JOHN THE APOSTLE CATHOLIC CHURCH 720 ORCHARD HILL DRIVE NORWALK, IA 50211	NONE	PC	FAITH	250
ST JUDE CHILDREN'S HOSPITAL 4722 N SHERIDAN RD PEORIA, IL 61614	NONE	PC	MEMORIAL	250
ST MARY'S CATHOLIC CHURCH 1005 HILL AVENUE SPIRIT LAKE, IA 51360	NONE	PC	FAITH	3,000
Total ▶ 3a				830,513

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 PETERS CATHOLIC CHURCH 34 MAIN STREET HOKAH, MN 55941	NONE	PC	FAITH	250
ST WILLIAMS CATHOLIC CHURCH 601 SEAGATE DRIVE NAPLES, FL 34103	NONE	PC	FAITH	2,000
ST WILLIAMS CATHOLIC CHURCH 601 SEAGATE DRIVE NAPLES, FL 34103	NONE	PC	FAITH	2,000
Total ► 3a				830,513

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>				
THE HONORS COLLEGE - UNIVERSITY OF HOUSTON 4333 UNIVERSITY DRIVE ROOM 212 HOUSTON, TX 77204	NONE	PC	EDUCATION	200
THE ROBERT D AND BILLIE RAY CENTER AT DRAKE UNIVERSITY 2702 FOREST AVENUE DES MOINES, IA 50311	NONE	PC	EDUCATION	500
UNITED WAY OF CENTRAL IOWA 1111 9TH STREET DES MOINES, IA 50314	NONE	PC	QUALITY OF LIFE	60,000
Total ▶ 3a				830,513

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
UNITED WAY OF CENTRAL IOWA 1111 9TH STREET DES MOINES, IA 50314	NONE	PC	QUALITY OF LIFE	136,500
UNIVERSITY OF IOWA CENTER FOR ADVANCEMENT PO BOX 4550 IOWA CITY, IA 52244	NONE	PC	QUALITY OF LIFE	10,000
UNIVERSITY OF IOWA CENTER FOR ADVANCEMENT PO BOX 4550 IOWA CITY, IA 52244	NONE	PC	EDUCATION	100,000
Total ▶ 3a				830,513

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>				
UNIVERSITY OF IOWA FOUNDATION PO BOX 4550 IOWA CITY, IA 52244	NONE	PC	HEALTH	10,000
UNIVERSITY OF NORTHERN IOWA 121 COMMONS CEDAR FALLS, IA 50314	NONE	PC	EDUCATION	1,100
WASHBURN UNIVERSITY FOUNDATION 1729 SW MACVICAR AVE TOPEKA, KS 66604	NONE	PC	EDUCATION	250
Total ▶ 3a				830,513

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>				
XAVIER HIGH SCHOOL FOUNDATION 6300 42ND STREET CEDAR RAPIDS, IA 52411	NONE	PC	EDUCATION	2,500
Total ▶ 3a				830,513

TY 2018 Accounting Fees Schedule**Name:** KRAUSE GENTLE FOUNDATION**EIN:** 42-1414004

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	5,630	2,815		2,815

TY 2018 Investments Corporate Stock Schedule**Name:** KRAUSE GENTLE FOUNDATION**EIN:** 42-1414004**Investments Corporation Stock Schedule**

Name of Stock	End of Year Book Value	End of Year Fair Market Value
BERKSHIRE HATHAWAY A	306,000	306,000
BERKSHIRE HATHAWAY B	122,508	122,508
FACTSET RESEARCH SYSTEMS INC	4,152,698	4,152,698
VANGUARD TOTAL STOCK	1,796,392	1,796,392
VANGUARD INTL EQUITY	387,430	387,430

TY 2018 Investments - Other Schedule**Name:** KRAUSE GENTLE FOUNDATION**EIN:** 42-1414004**Investments Other Schedule 2**

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
CCSD II LP	FMV	505,636	505,636
CAPITAL ALIGNMENT PARTNERS III, LP	FMV	40,418	40,418

TY 2018 Other Decreases Schedule

Name: KRAUSE GENTLE FOUNDATION
EIN: 42-1414004

Description	Amount
CHANGE IN UNREALIZED GAIN/LOSS	190,159

TY 2018 Other Expenses Schedule**Name:** KRAUSE GENTLE FOUNDATION**EIN:** 42-1414004**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OTHER EXPENSES	257	0		0
BANK FEES	39	0		0

TY 2018 Other Income Schedule**Name:** KRAUSE GENTLE FOUNDATION**EIN:** 42-1414004**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
CCSD II LP SCH K-1	97,942	-22,480	97,942
SCH K-1 CAPITAL ALIGNMENT PARTNERS III LP	-4,809	-4,718	-4,809
EXPENDITURE REIMBURSEMENT	250		250

TY 2018 Taxes Schedule**Name:** KRAUSE GENTLE FOUNDATION**EIN:** 42-1414004

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES	1,070	1,070		0
EXCISE TAXES	7,196	0		0