

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047
2018
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 07-01-2018, and ending 06-30-2019

- B** Check if applicable
- Address change
 - Name change
 - Initial return
 - Final return/terminated
 - Amended return
 - Application pending

C Name of organization
INNOVIA FOUNDATION

Doing business as

Number and street (or P O box if mail is not delivered to street address) Room/suite
421 W RIVERSIDE NO 606

City or town, state or province, country, and ZIP or foreign postal code
SPOKANE, WA 99201

D Employer identification number
91-0941053

E Telephone number
(509) 624-2606

G Gross receipts \$ 14,657,818

F Name and address of principal officer
SHELLY O'QUINN
421 W RIVERSIDE NO 606
SPOKANE, WA 99201

H(a) Is this a group return for subordinates? Yes No

H(b) Are all subordinates included? Yes No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527

J Website: ▶ WWW INNOVIA ORG

K Form of organization Corporation Trust Association Other ▶

L Year of formation 1974

M State of legal domicile WA

Part I Summary

1 Briefly describe the organization's mission or most significant activities
TO IGNITE GENEROSITY THAT TRANSFORMS LIVES AND COMMUNITIES

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)	3	13
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	13
5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	18
6 Total number of volunteers (estimate if necessary)	6	140
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
7b Net unrelated business taxable income from Form 990-T, line 34	7b	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	19,692,072	9,940,608
9 Program service revenue (Part VIII, line 2g)	148,986	40,183
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	5,450,002	3,545,846
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	0
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	25,291,060	13,526,637
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	6,786,993	6,142,686
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	939,980	1,280,334
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 137,659		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,659,524	1,066,410
18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	9,386,497	8,489,430
19 Revenue less expenses Subtract line 18 from line 12	15,904,563	5,037,207
	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	127,249,556	136,023,236
21 Total liabilities (Part X, line 26)	1,281,239	20,433,110
22 Net assets or fund balances Subtract line 21 from line 20	125,968,317	115,590,126

Part II Signature Block

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 officer) is based on all information of which preparer has any knowledge

Sign Here

Signature of officer: ***** Date: 2020-03-04

SHELLY O'QUINN CEO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name Preparer's signature Date 2020-02-17 Check if self-employed PTIN P00046197

Firm's name ▶ EIDE BAILLY LLP Firm's EIN ▶ 45-0250958

Firm's address ▶ 999 W RIVERSIDE AVE STE 101 Phone no (509) 747-6154
SPOKANE, WA 992011005

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

1 Briefly describe the organization's mission

INNOVIA IS A COMMUNITY FOUNDATION FORMED FOR THE BENEFIT OF THE COMMUNITIES WITHIN THEIR REGION OF OPERATION INNOVIA SEEKS TO PARTNER WITH PEOPLE AND OTHER ORGANIZATIONS WHO WANT TO MAKE THE WORLD BETTER BY ADDRESSING OUR REGION'S PROBLEMS, HELPING THOSE IN NEED, AND IDENTIFYING AND RESPONDING TO OUR REGION'S GREATEST OPPORTUNITIES

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 408,891 including grants of \$ 246,990) (Revenue \$ 40,183)
See Additional Data

4b (Code) (Expenses \$ 4,478,038 including grants of \$ 4,224,912) (Revenue \$)
See Additional Data

4c (Code) (Expenses \$ 1,996,241 including grants of \$ 1,402,896) (Revenue \$)
See Additional Data

(Code) (Expenses \$ 290,527 including grants of \$ 267,888) (Revenue \$)
SCHOLARSHIPS THESE FUNDS SUPPORT STUDENT EDUCATIONAL ACHIEVEMENT OVER 40 FUNDS ARE USED TO SUPPORT STUDENTS FROM THE INLAND NORTHWEST WITH SCHOLARSHIPS TO ATTEND COLLEGES, UNIVERSITIES OR VOCATIONAL SCHOOLS IN THE REGION AND BEYOND

4d Other program services (Describe in Schedule O)
(Expenses \$ 290,527 including grants of \$ 267,888) (Revenue \$)

4e Total program service expenses ▶ 7,173,697

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 22 regarding organizational requirements, such as political activities, lobbying, and financial reporting.

Part IV Checklist of Required Schedules (continued)

		Yes	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b	No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26	No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	Yes
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	15
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes

<p>2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return</p>	2a	18		
<p>b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</p>			2b	Yes
<p>3a Did the organization have unrelated business gross income of \$1,000 or more during the year?</p>			3a	No
<p>b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i></p>			3b	
<p>4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?</p>			4a	Yes
<p>b If "Yes," enter the name of the foreign country ▶CJ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)</p>				
<p>5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</p>			5a	No
<p>b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</p>			5b	No
<p>c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?</p>			5c	
<p>6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?</p>			6a	No
<p>b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</p>			6b	
7 Organizations that may receive deductible contributions under section 170(c).				
<p>a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?</p>			7a	No
<p>b If "Yes," did the organization notify the donor of the value of the goods or services provided?</p>			7b	
<p>c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?</p>			7c	No
<p>d If "Yes," indicate the number of Forms 8282 filed during the year</p>	7d			
<p>e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</p>			7e	No
<p>f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</p>			7f	No
<p>g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?</p>			7g	
<p>h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?</p>			7h	
8 Sponsoring organizations maintaining donor advised funds.				
<p>Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?</p>			8	No
<p>9a Did the sponsoring organization make any taxable distributions under section 4966?</p>			9a	No
<p>b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?</p>			9b	No
10 Section 501(c)(7) organizations. Enter				
<p>a Initiation fees and capital contributions included on Part VIII, line 12</p>	10a			
<p>b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</p>	10b			
11 Section 501(c)(12) organizations. Enter				
<p>a Gross income from members or shareholders</p>	11a			
<p>b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)</p>	11b			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?				
<p>b If "Yes," enter the amount of tax-exempt interest received or accrued during the year</p>	12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.				
<p>a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O</p>			13a	
<p>b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans</p>	13b			
<p>c Enter the amount of reserves on hand</p>	13c			
<p>14a Did the organization receive any payments for indoor tanning services during the tax year?</p>			14a	No
<p>b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i></p>			14b	
<p>15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N</p>			15	No
<p>16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O</p>			16	No

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response or note to any line in this Part VI



Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included in line 1a, above, who are independent; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following; 8a The governing body?; 8b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 17 List the States with which a copy of this Form 990 is required to be filed; 18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply: Own website, Another's website, Upon request, Other (explain in Schedule O); 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year; 20 State the name, address, and telephone number of the person who possesses the organization's books and records: LAUREN AUTREY 421 W RIVERSIDE AVENUE STE 606 SPOKANE, WA 99201 (509) 343-5752

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ROBERT BISHOPP PRESIDENT	4 00 6 00	X		X				0	0	0
(2) MEG MILLER VICE PRESIDENT	2 00	X		X				0	0	0
(3) ROBERT BLUME SECRETARY/TREASURER	2 00	X		X				0	0	0
(4) SHELLEY BENNETT PAST PRESIDENT	2 00	X						0	0	0
(5) JANICE BALDWIN DIRECTOR	2 00	X						0	0	0
(6) MICHAEL BIBIN DIRECTOR	2 00	X						0	0	0
(7) SANDI BLOEM DIRECTOR	2 00	X						0	0	0
(8) CARLA CICERO DIRECTOR	2 00	X						0	0	0
(9) ROBERT LARSON DIRECTOR	2 00	X						0	0	0
(10) GERALDINE LEWIS DIRECTOR	2 00	X						0	0	0
(11) JENNIFER WEST DIRECTOR	2 00	X						0	0	0
(12) BETSY WILKERSON DIRECTOR	2 00	X						0	0	0
(13) CAROL WILSON DIRECTOR	2 00	X						0	0	0
(14) SHELLY O'QUINN CHIEF EXECUTIVE OFFICER	40 00 6 00			X				178,430	0	25,563
(15) LAUREN AUTREY CHIEF FINANCIAL OFFICER	40 00 6 00			X				77,884	0	22,147
(16) AARON MCMURRAY CHIEF STRATEGY OFFICER	40 00			X				82,538	0	9,879
(17) PAMELA WATTERS DIRECTOR OF GIFT PLANNING	40 00					X		101,926	0	17,842

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns . . .	1a			
	b Membership dues . . .	1b			
	c Fundraising events . . .	1c			
	d Related organizations	1d	373,000		
	e Government grants (contributions)	1e			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	9,567,608		
	g Noncash contributions included in lines 1a - 1f \$		1,574,519		
	h Total. Add lines 1a-1f		9,940,608		

Program Service Revenue			Business Code			
	2a SERVICE FEES		713990	32,998	32,998	
b MISCELLANEOUS INCOME		713990	7,185	7,185		
c						
d						
e						
f All other program service revenue						
g Total. Add lines 2a-2f			40,183			

Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			3,258,977			3,258,977	
	4 Income from investment of tax-exempt bond proceeds							
	5 Royalties							
	6a Gross rents	(i) Real	(ii) Personal					
		b Less rental expenses						
		c Rental income or (loss)						
		d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other					
		1,418,050						
		b Less cost or other basis and sales expenses						
		1,131,181						
	c Gain or (loss)							
	286,869							
	d Net gain or (loss)			286,869			286,869	
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	a						
b Less direct expenses		b						
c Net income or (loss) from fundraising events								
9a Gross income from gaming activities See Part IV, line 19	a							
	b Less direct expenses	b						
	c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances	a							
	b Less cost of goods sold	b						
	c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	Business Code							
11a								
b								
c								
d All other revenue								
e Total. Add lines 11a-11d								
12 Total revenue. See Instructions			13,526,637	40,183	0	3,545,846		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	5,874,798	5,874,798		
2 Grants and other assistance to domestic individuals. See Part IV, line 22.	267,888	267,888		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	338,852	18,668	320,184	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7 Other salaries and wages.	685,915	598,446		87,469
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).				
9 Other employee benefits.	177,697	111,453	50,892	15,352
10 Payroll taxes.	77,870	49,190	22,033	6,647
11 Fees for services (non-employees)				
a Management.				
b Legal.	92,406		92,406	
c Accounting.	22,125		22,125	
d Lobbying.				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.	369,754		369,754	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	81,599		81,599	
12 Advertising and promotion.	104,977	66,316	29,701	8,960
13 Office expenses.	41,702	25,927	12,272	3,503
14 Information technology.				
15 Royalties.				
16 Occupancy.	153,153	44,240	102,935	5,978
17 Travel.	30,983	19,573	8,765	2,645
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	40,079	25,319	11,339	3,421
20 Interest.	38,647	38,647		
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	23,826		23,826	
23 Insurance.	8,664		8,664	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PHILANTHROPIC SERVICES	422,364	412,994	9,370	
b PROGRAM EXPENDITURES	208,352	208,352		
c DONOR RELATIONS	26,346	16,643	7,454	2,249
d DUES AND SUBSCRIPTIONS	16,808	10,618	4,755	1,435
e All other expenses	-615,375	-615,375		
25 Total functional expenses. Add lines 1 through 24e.	8,489,430	7,173,697	1,178,074	137,659
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part IX

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	291,640	1	254,499
	2 Savings and temporary cash investments	9,889,357	2	9,971,877
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	282,906	4	1,997
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	27,183	9	16,612
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	210,394		
	b Less accumulated depreciation	93,072		
		81,523	10c	117,322
	11 Investments—publicly traded securities		11	91,381,596
	12 Investments—other securities See Part IV, line 11	112,885,914	12	27,663,630
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets See Part IV, line 11	3,791,033	15	6,615,703	
16 Total assets. Add lines 1 through 15 (must equal line 34)	127,249,556	16	136,023,236	
Liabilities	17 Accounts payable and accrued expenses	731,929	17	479,261
	18 Grants payable	549,310	18	545,195
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	16,726,033
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24) Complete Part X of Schedule D	0	25	2,682,621
	26 Total liabilities. Add lines 17 through 25	1,281,239	26	20,433,110
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	122,177,284	27	109,889,341
	28 Temporarily restricted net assets	3,791,033	28	5,700,785
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	125,968,317	33	115,590,126	
34 Total liabilities and net assets/fund balances	127,249,556	34	136,023,236	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	13,526,637
2	Total expenses (must equal Part IX, column (A), line 25)	2	8,489,430
3	Revenue less expenses Subtract line 2 from line 1	3	5,037,207
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	125,968,317
5	Net unrealized gains (losses) on investments	5	-721,869
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-14,693,529
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	115,590,126

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a		No
b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	Yes	
c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Additional Data

Software ID:

Software Version:

EIN: 91-0941053

Name: INNOVIA FOUNDATION

Form 990 (2018)

Form 990, Part III, Line 4a:

COMMUNITY LEADERSHIP REALIZING OUR VISION FOR VIBRANT AND SUSTAINABLE COMMUNITIES WHERE EVERY PERSON THRIVES REQUIRES DEDICATION TO COMMUNITY LEADERSHIP EVERY COMMUNITY HAS UNIQUE OPPORTUNITIES AND CHALLENGES IN PARTNERSHIP WITH OUR COMMUNITIES, INNOVIA FOUNDATION PROVIDES LEADERSHIP TO CATALYZE TRANSFORMATIVE CHANGE IN OUR REGION AS A FUNDER AND CONVENER, WE ARE DEDICATED TO LEARNING ABOUT, AND INVESTING IN, COLLABORATIVE, COMMUNITY-BASED EFFORTS THE FOLLOWING INITIATIVES HIGHLIGHT INNOVIA FOUNDATION'S COMMITMENT TO ADDRESS OUR REGION'S UNIQUE OPPORTUNITIES AND CHALLENGES PRIORITY SPOKANE INNOVIA FOUNDATION WAS THE PRIMARY CONVENING ORGANIZATION THAT LED TO PRIORITY SPOKANE, A COLLABORATION OF ORGANIZATIONS WORKING TO CREATE A VIBRANT FUTURE FOR SPOKANE COUNTY THE GOAL OF PRIORITY SPOKANE, A COALITION OF 19 ORGANIZATIONS, IS TO FOSTER MEASURABLE IMPROVEMENTS IN KEY AREAS OF COMMUNITY VITALITY IT RECENTLY COMPLETED A PILOT PROJECT AIMED AT REDUCING FAMILY HOMELESSNESS BY PLACING COMMUNITY HEALTH WORKERS IN SELECT ELEMENTARY SCHOOLS TO WORK CLOSELY WITH FAMILIES AT RISK OF BECOMING HOMELESS MORE THAN 100 FAMILIES, AND NEARLY 300 CHILDREN, WERE EITHER PLACED IN HOUSING OR STABILIZED AND PREVENTED FROM BECOMING HOMELESS RURAL LEADERSHIP DEVELOPMENT A THREE-YEAR RURAL LEADERSHIP PROGRAM IN PARTNERSHIP WITH OTHER REGIONAL FUNDERS TO BUILD THE SUSTAINABILITY OF RURAL COMMUNITIES IN EASTERN WASHINGTON AND NORTH IDAHO THE GREATER PALOUSE RURAL COMMUNITY LEADERSHIP PROGRAM CONNECTS RURAL RESIDENTS TO EACH OTHER AND TO THEIR COMMUNITIES PARTICIPANTS JOIN IN 45 CLASS HOURS OF LEADERSHIP TRAINING EACH CLASS SELECTS A COMMUNITY PROJECT THAT THEY WORK ON TOGETHER THE 2018 LEADERSHIP COHORT SUCCESSFULLY ESTABLISHED "SHARING PANTRIES" IN THE COMMUNITIES OF COLTON AND UNIONTOWN THESE PANTRIES ALLOW COMMUNITY MEMBERS TO SHARE ITEMS WITH OTHERS IN THEIR COMMUNITIES WHO MAY BE IN NEED, AND INCLUDE ITEMS SUCH AS FOOD, HYGIENE SUPPLIES AND EVEN GAMES AND TOYS THE 2019 COHORT BROUGHT TOGETHER RESIDENTS FROM SOUTHEAST SPOKANE COUNTY AND NORTHERN WHITMAN COUNTY TO CREATE "PALOUSE PRIDE", A COMMUNITY ART PROJECT RESIDENTS IN BOTH COUNTIES NOW PROUDLY FLY THEIR SPECIALLY DESIGNED PALOUSE PRIDE FLAGS DEMONSTRATING COMMUNITY SPIRIT JUMPSTART THE JUMPSTART PROGRAM IS A FUNDRAISING CAPACITY-BUILDING PROGRAM THAT INNOVIA FOUNDATION OFFERS IN PARTNERSHIP WITH NETWORK FOR GOOD IN 2019, INNOVIA FUNDED 11 NONPROFIT ORGANIZATIONS FROM ACROSS OUR REGION TO PARTICIPATE IN THIS YEAR LONG PROGRAM WHICH INCLUDES ACCESS TO FUNDRAISING SOFTWARE, WEBINAR TRAININGS AND ONE-ON-ONE FUNDRAISING CONSULTATION AS A RESULT OF THE FIRST YEAR, THE INITIAL \$29,000 GRANTED BY INNOVIA FOUNDATION TRANSLATED INTO A GROWTH OF MORE THAN \$300,000 RAISED BY THE JUMPSTART PARTICIPANTS OPENING BOOKS, OPENING DOORS MOTIVATED BY COMMUNITY INTEREST IN COEUR D'ALENE, THIS THREE-YEAR PROGRAM IS ANCHORED BY A \$600,000 GRANT FROM INNOVIA FOUNDATION AND OTHER FUNDERS THE INITIATIVE COORDINATES THE EFFORTS OF UNIVERSITY OF IDAHO, THE COEUR D'ALENE SCHOOL DISTRICT, AND COMMUNITY PARTNERS TO HELP EVERY THIRD-GRADE STUDENT IN COEUR D'ALENE SCHOOL DISTRICT READ AT GRADE-LEVEL BY 2020 FOUR KEY STRATEGIES OF THE INITIATIVE ARE 1) KINDERGARTEN READINESS, 2) QUALITY TEACHERS IN A LITERACY-RICH LEARNING ENVIRONMENT, 3) PARENT ENGAGEMENT, 4) OUT-OF-SCHOOL LEARNING IN 2019, OPENING BOOKS, OPENING DOORS LAUNCHED A PUBLIC ACTION CAMPAIGN CALLED "THIS BOOK" TO FOSTER COMMUNITY SUPPORT AND BUY-IN "THIS BOOK CREATES COMMUNITY-WIDE AWARENESS AND OWNERSHIP FOR CHILDHOOD READING SUCCESS AND CALLS EVERYONE TO READ TO A CHILD, DONATE A BOOK AND HELP BUILD A STRONGER COMMUNITY LEWIS-CLARK VALLEY HEALTH NEEDS ASSESSMENT FUNDED BY A GRANT FROM THE LEWIS-CLARK VALLEY HEALTHCARE FOUNDATION, A NINE-COUNTY NEEDS AND OPPORTUNITY ASSESSMENT WAS COORDINATED AND IMPLEMENTED THROUGH INNOVIA FOUNDATION'S DEPARTMENT OF RESEARCH AND COMMUNITY IMPACT DATA WAS GATHERED ON TOPICS INCLUDING HEALTHCARE ACCESS AND AFFORDABILITY, FOOD SECURITY, HOUSING AFFORDABILITY, ECONOMIC OPPORTUNITY AND BEHAVIORAL HEALTH RESULTS OF THE ASSESSMENT WILL BE SHARED WITH COMMUNITY MEMBERS IN MOSCOW, PULLMAN, LEWISTON-CLARKSTON, GRANGEVILLE AND OROFINO AT DATA WALKS TO BE HELD IN FISCAL YEAR 2020

Form 990, Part III, Line 4b:

DONOR-DIRECTED GRANTMAKING INNOVIA FOUNDATION'S MISSION IS TO IGNITE GENEROSITY THAT TRANSFORMS LIVES AND COMMUNITIES WITH OVER 440 INDIVIDUAL, FAMILY AND CORPORATE FUNDS, THIS AREA OF INVESTMENT REFLECTS THE GRANTMAKING DIRECTED BY DONORS TO SUPPORT A BROAD RANGE OF COMMUNITY INTERESTS PRIMARILY IN OUR REGION AND WASHINGTON STATE AND ALSO EXTENDING NATIONALLY AND INTERNATIONALLY

Form 990, Part III, Line 4c:

FOUNDATION-DIRECTED GRANTMAKING INNOVIA FOUNDATION MANAGES OTHER FUNDS ESTABLISHED BY GENEROUS DONORS TO ADDRESS THE UNIQUE OPPORTUNITIES AND CHALLENGES IN OUR REGION OVER 125 INDIVIDUAL AND FAMILY FUNDS ARE USED TO SUPPORT THE FOUNDATION'S FIVE IMPACT AREAS OF HEALTH & WELLBEING, ECONOMIC OPPORTUNITY, EDUCATION AND YOUTH DEVELOPMENT, ARTS & CULTURE AND QUALITY OF LIFE INNOVIA FOUNDATION EVALUATES ORGANIZATIONS AND THEN MAKES GRANTS TO BEST REFLECT THE INTENDED PURPOSE OF THE FUNDS

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
 Attach to Form 990 or Form 990-EZ.
 Go to www.irs.gov/Form990 for the latest information.

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
INNOVIA FOUNDATION

Employer identification number

91-0941053

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ))
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)
- 8 A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university _____
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 11 An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
 - f Enter the number of supported organizations _____
 - g Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv), 170(b)(1)(A)(vi), and 170(b)(1)(A)(ix)

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

	Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")	11,629,939	11,157,325	12,776,881	16,748,520	9,940,608	62,253,273
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	11,629,939	11,157,325	12,776,881	16,748,520	9,940,608	62,253,273
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						10,483,935
6	Public support. Subtract line 5 from line 4						51,769,338

Section B. Total Support

	Calendar year (or fiscal year beginning in) ►	(a)2014	(b)2015	(c)2016	(d)2017	(e)2018	(f)Total
7	Amounts from line 4	11,629,939	11,157,325	12,776,881	16,748,520	9,940,608	62,253,273
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,834,831	2,527,820	2,974,362	2,627,995	3,545,846	13,510,854
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						75,764,127
12	Gross receipts from related activities, etc (see instructions)					12	484,055

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14	Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	68.330 %
15	Public support percentage for 2017 Schedule A, Part II, line 14	15	67.580 %

16a 33 1/3% support test—2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ►

Section C. Computation of Public Support Percentage

15	Public support percentage for 2018 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2017 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2018 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2017 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ►

b 33 1/3% support tests—2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ►

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ►

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.		
	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).		
	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.		
	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		
	10b		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3	Parent of Supported Organizations Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2018			
a From 2013.			
b From 2014.			
c From 2015.			
d From 2016.			
e From 2017.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2018 from Section D, line 7			
\$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2019. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2014.			
b Excess from 2015.			
c Excess from 2016.			
d Excess from 2017.			
e Excess from 2018.			

Additional Data

Software ID:

Software Version:

EIN: 91-0941053

Name: INNOVIA FOUNDATION

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

Facts And Circumstances Test

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements
► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047
2018
Open to Public Inspection

Name of the organization
INNOVIA FOUNDATION

Employer identification number
91-0941053

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	168	2
2 Aggregate value of contributions to (during year)	6,314,039	56,830
3 Aggregate value of grants from (during year)	3,749,385	24,145
4 Aggregate value at end of year	38,286,358	133,083

- 5** Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No
- 6** Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

- 1** Purpose(s) of conservation easements held by the organization (check all that apply)
- Preservation of land for public use (e g , recreation or education) Preservation of an historically important land area
- Protection of natural habitat Preservation of a certified historic structure
- Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year	
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included in (a)	2c	
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d	

- 3** Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____
- 4** Number of states where property subject to conservation easement is located ► _____
- 5** Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No
- 6** Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► _____
- 7** Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$ _____
- 8** Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No
- 9** In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

- 1a** If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items
- b** If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
- (i)** Revenue included on Form 990, Part VIII, line 1 ► \$ _____
- (ii)** Assets included in Form 990, Part X ► \$ _____
- 2** If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items
- a** Revenue included on Form 990, Part VIII, line 1 ► \$ _____
- b** Assets included in Form 990, Part X ► \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table
- | | Amount |
|--|--------|
| c Beginning balance | |
| d Additions during the year | |
| e Distributions during the year | |
| f Ending balance | |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . Yes No
- b** If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	105,341,931	89,967,689	75,891,389	73,479,844	68,348,352
b Contributions	8,131,286	19,450,309	12,777,571	11,098,663	11,561,097
c Net investment earnings, gains, and losses	4,128,815	4,378,607	8,555,932	-2,520,676	-964,537
d Grants or scholarships	6,878,293	7,066,778	6,232,450	5,029,697	4,643,643
e Other expenditures for facilities and programs	0			225,298	20,000
f Administrative expenses	1,375,560	1,387,896	1,024,753	911,447	801,425
g End of year balance	109,348,179	105,341,931	89,967,689	75,891,389	73,479,844

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶ 95 070 %
 - b** Permanent endowment ▶
 - c** Temporarily restricted endowment ▶ 4 930 %
- The percentages on lines 2a, 2b, and 2c should equal 100%
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- | | Yes | No |
|--|-----|----|
| (i) unrelated organizations | | No |
| (ii) related organizations | | No |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		210,394	93,072	117,322
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				117,322

Part VII Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) CASH VALUE LIFE INSURANCE	2,566,774	F
(B) VANGUARD TOTAL BOND MARKET INDEX	7,870,272	F
(C) GATEWAY FUND	8,498,425	F
(D) SCHWAB FUNDAMENTAL US	8,728,159	F
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	27,663,630	

Part VIII Investments—Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		

Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	

Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
SPLIT INTEREST LIABILITY	2,682,621
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	2,682,621

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	13,935,456
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	-721,869
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	1,491,530
e	Add lines 2a through 2d	2e	769,661
3	Subtract line 2e from line 1	3	13,165,795
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	360,842
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	360,842
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	13,526,637

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	9,910,156
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	1,781,568
e	Add lines 2a through 2d	2e	1,781,568
3	Subtract line 2e from line 1	3	8,128,588
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	360,842
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	360,842
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	8,489,430

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 91-0941053

Name: INNOVIA FOUNDATION

Supplemental Information

Return Reference	Explanation
PART IV, LINE 2B	AGENCY FUNDS HELD FOR OTHERS

Supplemental Information

Return Reference	Explanation
PART V, LINE 4	ENDOWMENT FUNDS ARE INVESTED TO PROVIDE FUNDS FOR FUTURE CHARITABLE DISTRIBUTIONS

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	<p>THE FOUNDATION IS ORGANIZED AS A WASHINGTON STATE NONPROFIT CORPORATION AND HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE (IRS) AS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(A) OF THE INTERNAL REVENUE CODE AS AN ORGANIZATION DESCRIBED IN SECTION 501(C)(3), QUALIFY FOR THE CHARITABLE CONTRIBUTION DEDUCTION, AND HAVE DETERMINE NOT TO BE A PRIVATE FOUNDATION THE FOUNDATION IS ANNUALLY REQUIRED TO FILE A RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX (FORM 990) WITH THE IRS IN ADDITION, THE FOUNDATION IS SUBJECT TO INCOME TAX ON NET INCOME THAT IS DERIVED FROM BUSINESS ACTIVITIES THAT ARE UNRELATED TO ITS EXEMPT PURPOSES THE FOUNDATION HAS DETERMINED THAT IT IS NOT SUBJECT TO UNRELATED BUSINESS TAX AND HAS NOT FILED AN EXEMPT ORGANIZATION BUSINESS INCOME TAX RETURN (FORM 990-T) WITH THE IRS MANAGEMENT BELIEVES THAT THE FOUNDATION HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN AFFECTING ITS ANNUAL FILING REQUIREMENTS, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO THE CONSOLIDATED FINANCIAL STATEMENTS THE FOUNDATION WOULD RECOGNIZE FUTURE ACCRUED INTEREST AND PENALTIES RELATED TO UNRECOGNIZED TAX BENEFITS AND LIABILITIES IN INCOME TAX EXPENSE IF SUCH INTEREST AND PENALTIES ARE INCURRED</p>

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	SUPPORTING ORGANIZATIONS REVENUE REMOVED 115,970 INTERNAL INVESTMENT FEES 1,375,560

Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	SUPPORTING ORGANIZATIONS EXPENSES REMOVED 118,008 INTERFUND CONTRIBUTIONS 288,000 INTERNAL INVESTMENT FEES 1,375,560

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PART X, LINE 1(B)	OTHER LIABILITIES ARE AGENCY FUNDS FUNDS HELD FOR OTHERS TOTALING \$16,726,033

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

**Schedule I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments and Individuals in the United States**

OMB No 1545-0047

2018

**Open to Public
Inspection**

Department of the
Treasury
Internal Revenue Service
Name of the organization
INNOVIA FOUNDATION

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

Employer identification number
91-0941053

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 279

3 Enter total number of other organizations listed in the line 1 table ▶ 0

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) SCHOLARSHIPS TO VARIOUS UNIVERSITIES	71	199,580			
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2	THE GRANT DISBURSEMENT COMMITTEE OF INNOVIA FOUNDATION MONITORS THE USE OF GRANT FUNDS

Additional Data

Software ID:
Software Version:
EIN: 91-0941053
Name: INNOVIA FOUNDATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
4-H CLUBS PO BOX 267 BONNERS FERRY, ID 83805	26-1316663	501(C)(3)	8,500	0			CHARITABLE, 4-H FRIDAY FRIENDS PROGRAM
ALL HEART INFUSION 601 S DIVISION SUITE B SPOKANE, WA 99202	82-2934846	501(C)(3)	21,277	0			CHARITABLE, GENERAL OPERATING SUPPORT

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ALS THERAPY DEVELOPMENT INSTITUTE 300 TECHNOLOGY SQUARE SUITE 400 CAMBRIDGE, MA 02139	04-3462719	501(C)(3)	10,000	0			CHARITABLE, GENERAL OPERATING SUPPORT
AMERICAN LUNG ASSOCIATION OF WA 5601 6TH AVENUE S SUITE 460 SEATTLE, WA 98108	91-0723398	501(C)(3)	5,000	0			CHARITABLE, WILDFIRE RELIEF PROJECT

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AMERICAN RED CROSS INLAND NW CHAPTER 315 W NORA AVENUE SPOKANE, WA 99205	53-0196605	501(C)(3)	5,598	0			CHARITABLE, GENERAL OPERATING SUPPORT
AMERICAN NATIONAL RED CROSS 2025 E STREET NW WASHINGTON, DC 20006	53-0196605	501(C)(3)	5,211	0			CHARITABLE, GENERAL OPERATING SUPPORT

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ANGELS OVER SANDPOINT PO BOX 2369 SANDPOINT, ID 83864	82-0536068	501(C)(3)	10,000	0			CHARITABLE, BACK TO SCHOOL PROGRAM
ANTHEM FRIENDS CHURCH 251 W MILES AVENUE HAYDEN, ID 83835	82-0345175	501(C)(3)	62,000	0			CHARITABLE, GENERAL OPERATING SUPPORT

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ARC OF SPOKANE 320 E 2ND AVENUE SPOKANE, WA 99202	91-0716160	501(C)(3)	23,773	0			CHARITABLE, GENERAL OPERATING SUPPORT
ARTIST TRUST 1835 12TH AVENUE SEATTLE, WA 98122	91-1353974	501(C)(3)	7,500	0			CHARITABLE, GENERAL OPERATING SUPPORT

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ASOTIN COUNTY LIBRARY FOUNDATION 417 SYCAMORE STREET CLARKSTON, WA 99403	91-6001295	501(C)(3)	9,900	0			CHARITABLE, STEM ACADEMIES AND DIGITAL MEDIA LAB PROGRAMS
AT THE CORE 4903 E PEONE PINES DRIVE MEAD, WA 99021	46-2937061	501(C)(3)	31,000	0			CHARITABLE, COMMUNITY READING BUDDIES

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BEAUTIFUL DOWNTOWN LEWISTON REVITALIZATION CORPORATION 301 MAIN STREET SUITE 103 LEWISTON, WA 83501	26-2200307	501(C)(3)	5,000	0			CHARITABLE, ORGANIZATIONAL STRATEGIC PLANNING
BENEWAH COUNTY HUMANE SOCIETY 53 ROBINSON LANE ST MARIES, ID 83861	82-0430864	501(C)(3)	24,000	0			CHARITABLE, COMMUNITY CAT PROGRAM

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BLANCHARD AREA SENIORS INCOPORATED PO BOX 127 BLANCHARD, ID 83804	82-0418029	501(C)(3)	8,440	0			CHARITABLE, DRAMATIC ARTS PROJECT
BONNER COMMUNITY FOOD CENTER 1707 CULVERS DRIVE SANDPOINT, ID 83864	82-0385747	501(C)(3)	20,000	0			CHARITABLE, HUNGER RELIEF

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BONNER COUNTY HISTORICAL SOCIETY 611 S ELLA AVENUE SANDPOINT, ID 83864	23-7219645	501(C)(3)	15,000	0			CHARITABLE, GRANARY RESTORATION & REPURPOSE
BONNER COUNTY HOMELESS TASK FORCE 330 S FLORENCE AVENUE SANDPOINT, ID 83864	82-0452673	501(C)(3)	15,000	0			CHARITABLE, TRANSITIONAL HOUSING CASE MANAGEMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BOUNDARY COUNTY BIKE & PEDESTRIAN TRAIL COMMITTEE INC PO BOX E BONNERS FERRY, ID 83805	82-4094576	501(C)(3)	24,000	0			CHARITABLE, TRAIL EQUIPMENT ACQUISITION
BOUNDARY COUNTY PARKS AND RECREATION 7171 5TH STREET BONNERS FERRY, ID 83805	82-6000287	GOVERNMENT	20,000	0			CHARITABLE, SYNTHETIC ICE RINK

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BOUNDARY COUNTY SCHOOL DISTRICT 101 6485 TAMARACK LANE BONNERS FERRY, ID 83805	82-6000683	GOVERNMENT	5,000	0			CHARITABLE, ROBOTICS PROGRAM
BOY SCOUTS OF AMERICA INLAND NW COUNCIL 411 W BOY SCOUT WAY SPOKANE, WA 99201	91-0567262	501(C)(3)	23,742	0			CHARITABLE, GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BOYS & GIRLS CLUBS OF SPOKANE COUNTY 544 E PROVIDENCE AVENUE SPOKANE, WA 99207	91-1983357	501(C)(3)	33,000	0			CHARITABLE, GENERAL OPERATING SUPPORT
BOYS & GIRLS CLUBS OF LEWIS CLARK VALLEY 1021 BURRELL AVENUE LEWISTON, ID 83501	82-6001432	501(C)(3)	5,000	0			CHARITABLE, TRANSPORTATION PROGRAM

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CALIFORNIA LUTHERAN UNIVERSITY 60 W OLSEN ROAD 1600 THOUSAND OAKS, CA 91360	95-2962604	501(C)(3)	7,765	0			CHARITABLE, PACIFIC LUTHERAN THEOLOGICAL SEMINARY
CAMP FIRE INLAND NORTHWEST 524 N MULLAN ROAD STE 102 SPOKANE VALLEY, WA 99206	91-0567727	501(C)(3)	25,000	0			CHARITABLE, CAMP SEPTIC SYSTEM

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CANCER CARE NORTHWEST FOUNDATION 1204 N VERCLER ROAD SPOKANE VALLEY, WA 99216	20-1453390	501(C)(3)	6,244	0			CHARITABLE, GENERAL OPERATING SUPPORT
CATHOLIC CHARITIES SPOKANE 12 E 5TH AVENUE SPOKANE, WA 99202	53-0196617	501(C)(3)	170,727	0			CHARITABLE, HOMELESS STUDENT STABILIZATION, GENERAL OPERATING SUPPORT

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DIOCESE OF SPOKANE PO BOX 1453 SPOKANE, WA 99210	91-0564957	501(C)(3)	7,000	0			CHARITABLE, GENERAL OPERATING SUPPORT
CEDAR HILLS CHURCH 227 MCGHEE ROAD SANDPOINT, ID 83864	82-0536462	501(C)(3)	5,000	0			CHARITABLE, GENERAL OPERATING SUPPORT

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CENTER FOR JUSTICE 35 W MAIN AVE STE 300 SPOKANE, WA 99201	91-1939768	501(C)(3)	8,337	0			CHARITABLE, GENERAL OPERATING SUPPORT
CENTER FOR WOMEN & THEIR WORK 1710 LAVACA STREET AUSTIN, TX 78701	74-1966689	501(C)(3)	5,000	0			CHARITABLE, GENERAL OPERATING SUPPORT

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CHASE YOUTH FOUNDATION 10 N POST STREET STE 649 SPOKANE, WA 99201	91-1582748	501(C)(3)	20,000	0			CHARITABLE, SISTER CITIES EXCHANGE PROGRAM
CHEWELAH PERFORMING AND CULTURAL ARTS CENTER PO BOX 1113 CHEWELAH, WA 99109	26-3307634	501(C)(3)	30,000	0			CHARITABLE, CONSTRUCT SCENE SHOP AND STORAGE AREA

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CHIEF JOSEPH FOUNDATION PO BOX 83540 LAPWAI, ID 83540	82-0445172	501(C)(3)	20,000	0			CHARITABLE, INDOOR HORSE ARENA
CHILDREN'S VILLAGE INC 1350 W HANLEY AVENUE COEUR DALENE, ID 83815	82-0385109	501(C)(3)	25,456	0			CHARITABLE, CAMPUS SECURITY, GENERAL OPERATING SUPPORT

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CHRISTIAN YOUTH THEATER - NORTH IDAHO 3655 N GOVERNMENT WAY STE 10 COEUR DALENE, ID 83815	26-0284643	501(C)(3)	8,070	0			CHARITABLE, IDAHO GIVES - YOUTH SCHOLARSHIP
CIRCLES OF CARING ADULT DAY HEALTH FOUNDATION 588 SE BISHOP BLVD PULLMAN, WA 99163	46-1501194	501(C)(3)	10,000	0			CHARITABLE, SOCIALIZATION - LUNCH AND SNACK TIME

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CITIZENS' COUNCIL FOR THE ARTS PO BOX 901 COEUR DALENE, ID 83816	51-0197066	501(C)(3)	21,393	0			CHARITABLE, ART CLASSES
CITY OF BONNERS FERRY PO BOX 149 BONNERS FERRY, ID 83805	82-6000166	GOVERNMENT	10,000	0			CHARITABLE, SPLASH PAD

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CITY OF PULLMAN 325 SE PARADISE ST PULLMAN, WA 99163		GOVERNMENT	31,218	0			CHARITABLE, HERITAGE ADDITION
CITY OF RITZVILLE 216 EAST MAIN AVENUE RITZVILLE, WA 99169	91-6001272	GOVERNMENT	45,453	0			CHARITABLE, GENERAL OPERATING SUPPORT

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CITY OF WALLACE 703 CEDAR STREET WALLACE, ID 83873	82-6000272	GOVERNMENT	30,000	0			CHARITABLE, SWIMMING POOL RENOVATION
CLARK FORK JRSR HIGH SCHOOL 121 E 4TH STREET CLARK FORK, ID 83811	94-3068342	501(C)(3)	22,327	0			SCHOLARSHIPS

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CLASSICAL CHRISTIAN ACADEMY 2289 W SELTICE WAY POST FALLS, ID 83854	82-0483395	501(C)(3)	10,250	0			CHARITABLE, GENERAL OPERATING SUPPORT
THE VILLAGE AT ORCHARD RIDGE 624W HARRISON AVENUE COEUR DALENE, ID 83814	82-0201589	501(C)(3)	5,000	0			CHARITABLE, GENERAL OPERATING SUPPORT

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COEUR D'ALENE PUBLIC LIBRARY FOUNDATION 702 E FRONT AVENUE COEUR DALENE, ID 83814	82-0485529	501(C)(3)	29,676	0			CHARITABLE, TECHNOLOGY UPGRADE
COEUR D'ALENE ROTARY ENDOWMENT FOUNDATION PO BOX 415 HAYDEN LAKE, ID 83835	26-1725990	501(C)(3)	5,109	0			CHARITABLE, GENERAL OPERATING SUPPORT

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COLFAX SCHOOLS FOUNDATION 223 N MAIN STREET COLFAX, WA 99111	71-0873664	501(C)(3)	14,139	0			SCHOLARSHIPS
COLLEGE OF THE HOLY CROSS 1 COLLEGE STREET WORCESTER, MA 01610	04-2103558	501(C)(3)	10,000	0			CHARITABLE, GENERAL OPERATING SUPPORT

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COLUMBIA BASIN ALLIED ARTS 7662 CHANUTE STREET NE MOSES LAKE, WA 98837	91-1035527	501(C)(3)	10,000	0			CHARITABLE, REGIONAL THEATER TOURS FOR PUBLIC SCHOOLS
COLVILLE DOLLARS FOR SCHOLARS PO BOX 333 COLVILLE, WA 99114	75-3022676	501(C)(3)	12,464	0			SCHOLARSHIPS

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COLVILLE VALLEY ANIMAL SANCTUARY 1250 N HWY PMB 266 COLVILLE, WA 99114	13-4247653	501(C)(3)	11,000	0			CHARITABLE, ANIMAL WELFARE SERVICES
COMMUNITIES IN SCHOOLS OF SPOKANE COUNTY 905 W RIVERSIDE AVE STE 301 SPOKANE, WA 99201	26-1581358	501(C)(3)	40,000	0			CHARITABLE, SITE COORDINATORS

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COMMUNITY CANCER SERVICES 1205 HWY 2 STE 101-B SANDPOINT, ID 83864	71-0899963	501(C)(3)	18,000	0			CHARITABLE, GENERAL OPERATING SUPPORT
COMMUNITY COALITION FOR FAMILIES PO BOX 3223 BONNERS FERRY, ID 83805	84-1393413	501(C)(3)	10,000	0			CHARITABLE, HOUSING ASSISTANCE

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COMMUNITY COLLEGES OF SPOKANE FOUNDATION PO BOX 6000 MS 1005 SPOKANE, WA 99217	91-0886962	501(C)(3)	6,837	0			CHARITABLE, GENERAL OPERATING SUPPORT
CONSOLIDATED FREE LIBRARY 802 W BANNOCK ST STE 900 BOISE, ID 83702	82-0332894	501(C)(3)	25,000	0			CHARITABLE, MOBILE DISCOVERY LAB

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COUNCIL ON AGING AND HUMAN SERVICES PO BOX 107 COLFAX, WA 99111	91-0964790	501(C)(3)	30,000	0			CHARITABLE, TRANSPORTATION TECHNOLOGY AND COMMUNICATIONS UPGRADE
COUNCIL ON FOUNDATIONS 121 CRYSTAL DR STE 700 ARLINGTON, VA 22202	13-6068327	501(C)(3)	12,850	0			CHARITABLE, DUES

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CREATE YOUR STATEMENT PO BOX 18934 SPOKANE, WA 99228	45-4505016	501(C)(3)	5,000	0			CHARITABLE, GENERAL OPERATING SUPPORT
CREIGHTON UNIVERSITY 2500 CALIFORNIA PLAZA OMAHA, NE 68178	47-0376583	501(C)(3)	5,250	0			CHARITABLE, GENERAL OPERATING SUPPORT

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CRU PO BOX 628222 ORLANDO, FL 32862	95-6006173	501(C)(3)	17,200	0			CHARITABLE, GENERAL OPERATING SUPPORT
CUSICK COMMUNITY DEVELOPMENT ASSOCIATION PO BOX 126 CUSICK, WA 99119	91-1102635	501(C)(3)	16,317	0			CHARTIABLE, INCREASE FOOD STORAGE CAPACITY AND GENERAL OPERATING SUPPORT

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DAYBREAK YOUTH SERVICES 960 E 3RD AVE SPOKANE, WA 99202	91-1083936	501(C)(3)	19,000	0			CHARITABLE, GENERAL OPERATING SUPPORT
DEER PARK HIGH SCHOOL 800 S WEBER RD DEER PARK, WA 99006	91-1228393	GOVERNMENT	6,000	0			SCHOLARSHIPS

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DISTRIBUTIVE EDUCATION CLUBS OF AMERICA - WASHINGTON DECA 200 WEST MERCER ST STE 207 SEATTLE, WA 98119	91-1602361	501(C)(3)	5,040	0			SCHOLARSHIPS
DOCTORS WITHOUT BORDERS 40 RECTOR ST 16TH FLR NEW YORK, NY 10006	13-3433452	501(C)(3)	16,750	0			CHARITABLE, GENERAL OPERATING SUPPORT

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EARLY LIFE SPEECH & LANGUAGE 506 W 2ND AVE SPOKANE, WA 99201	91-1239678	501(C)(3)	5,949	0			CHARITABLE, GENERAL OPERATING SUPPORT
ELDERHELP OF NORTH IDAHO INC PO BOX 3843 COEUR DALENE, ID 83816	20-8330877	501(C)(3)	26,000	0			CHARITABLE, GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ELEVATIONS 325 S UNIVERSITY RD STE 202 SPOKANE VALLEY, WA 99206	45-4130330	501(C)(3)	6,000	0			CHARITABLE, COMMUNITY ENGAGEMENT
WSU ELSON S FLOYD COLLEGE OF MEDICINE PO BOX 641927 PULLMAN, WA 99164	91-6001108	501(C)(3)	20,000	0			CHARITABLE, CANCER RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ETERNAL HOPE INC 2525 E 19TH AVE SPOKANE, WA 99223	46-3276542	501(C)(3)	123,000	0			CHARITABLE, GENERAL OPERATING SUPPORT
EUREKA INSTITUTE 513 OAK ST SANDPOINT, ID 83864	45-3828828	501(C)(3)	8,000	0			CHARITABLE, BUS SHELTER PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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EWU CATHOLIC NEWMAN CENTER 837 ELM STREET CHENEY, WA 99004	91-1019819	501(C)(3)	5,000	0			CHARITABLE, GENERAL OPERATING SUPPORT
EWU FOUNDATION 102 HARGREAVES HALL CHENEY, WA 99004	91-1019819	501(C)(3)	20,019	0			CHARITABLE, VARIOUS PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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EXCHANGE CLUB OF DOWNTOWN SPOKANE PO BOX 650 SPOKANE, WA 99210	23-7005509	501(C)(3)	8,085	0			CHARITABLE, VARIOUS PROGRAM SUPPORT
FAMILIES TOGETHER PO BOX 9323 MOSCOW, ID 83843	94-3054376	501(C)(3)	8,200	0			CHARITABLE, PARENTING CLASS AND PLAYGROUP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FAMILY CRISIS NETWORK PO BOX 944 NEWPORT, WA 99156	91-1248443	501(C)(3)	5,000	0			CHARITABLE, GENERAL OPERATING SUPPORT
FAMILY PROMISE OF NORTH IDAHO PO BOX 3682 COEUR DALENE, ID 83816	14-1971894	501(C)(3)	18,000	0			CHARITABLE, BETWEEN HOMES PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FAMILY PROMISE OF SPOKANE 904 E HARTSON AVE SPOKANE, WA 99202	91-1707988	501(C)(3)	26,500	0			CHARTIABLE, OPEN DOORS BUILDING EXPANSION
FEED SPOKANE PO BOX 141674 SPOKANE, WA 99214	77-0669785	501(C)(3)	15,700	0			CHARITABLE, GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FESTIVAL DANCE AND PERFORMING ARTS ASSOCIATION PO BOX 442403 MOSCOW, ID 83844	82-0430133	501(C)(3)	5,000	0			CHARITABLE, YOUTH ARTS ACCESS
FIRST JUDICIAL DISTRICT CASA PROGRAM 816 E SHERMAN STE 6 COEUR DALENE, ID 83814	82-0458229	501(C)(3)	20,362	0			CHARITABLE, ADVOCATE RECRUITMENT AND TRAINING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FIRST STORY 963 SW SIMPSON AVE STE 110 BEND, OR 97702	91-1755886	501(C)(3)	25,000	0			CHARITABLE, HOUSING CONSTRUCTION
FIRST WASHINGTON 1711 N WOODRUFF ROAD SPOKANE VALLEY, WA 99206	45-2443839	501(C)(3)	5,000	0			CHARITABLE, STEM ROBOTICS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FOUNDATION FITNESS INC 827 W PRAIRIE AVE HAYDEN, ID 83835	81-1781527	501(C)(3)	13,990	0			CHARITABLE, BATHROOM REMODEL AND ADDITION
FREE REIN THERAPEUTIC RIDING PO BOX 30893 SPOKANE, WA 99203	20-8377385	501(C)(3)	16,000	0			CHARITABLE, GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FRIENDS OF KSPS 3911 S REGAL ST SPOKANE, WA 99223	23-7203753	501(C)(3)	34,241	0			CHARITABLE, GENERAL OPERATING SUPPORT
FRIENDS OF MONGOLIA PO BOX 53314 WASHINGTON, DC 20009	06-1571562	501(C)(3)	15,246	0			SCHOLARSHIPS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FRIENDS OF NEILL PUBLIC LIBRARY 210 N GRAND AVE PULLMAN, WA 99163	91-1049324	501(C)(3)	13,850	0			CHARITABLE, GENERAL OPERATING SUPPORT
FRIENDS OF THE DESERT PO BOX 1281 PALM DESERT, CA 92261	33-0241242	501(C)(3)	5,000	0			CHARITABLE, GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FUTUREWISE 816 SECOND AVE STE 200 SEATTLE, WA 98104	91-1539831	501(C)(3)	20,000	0			CHARITABLE, GENERAL OPERATING SUPPORT
GENERATION ALIVE 418 W SHARP AVE SPOKANE, WA 99201	56-2598004	501(C)(3)	8,359	0			CHARITABLE, TRUCK LIFE-GATE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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GLOBAL NEIGHBORHOOD PO BOX 10330 SPOKANE, WA 99209	26-2571035	501(C)(3)	6,500	0			CHARITABLE, GENERAL OPERATING SUPPORT
GONZAGA PREPARATORY SCHOOL 1224 E EUCLID AVE SPOKANE, WA 99207	91-6072663	501(C)(3)	41,785	0			CHARITABLE, GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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GONZAGA UNIVERSITY 502 E BOONE AVE SPOKANE, WA 99258	91-0236600	501(C)(3)	14,273	0			CHARITABLE, VARIOUS PROGRAM SUPPORT
GOOD HOPE LUTHERAN CHURCH PO BOX 336 LIND, WA 99341		501(C)(3)	5,500	0			CHARITABLE, GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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GOOD SAMARITAN REHABILITATION 901 E BEST AVE COEUR DALENE, ID 83814	83-0344926	501(C)(3)	7,260	0			CHARITABLE, GENERAL OPERATING SUPPORT
GOODWILL INDUSTRIES OF THE INLAND NW 130 E 3RD AVE SPOKANE, WA 99202	91-0597006	501(C)(3)	7,765	0			CHARITABLE, GENERAL OPERATING SUPPORT

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GRANGEVILLE ARTS INC 1627 MOUNTAIN VIEW ROAD GRANGEVILLE, ID 83530	82-0412912	501(C)(3)	7,000	0			CHARITABLE, PIONEER PARK PAVILION
THE GROUNDTRUTH PROJECT INC 10 GUEST ST BOSTON, MA 02135	46-0908502	501(C)(3)	10,000	0			CHARITABLE, SUPPORT FOR PUBLIC HEALTH REPORTER

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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HABITAT FOR HUMANITY SPOKANE PO BOX 4130 SPOKANE, WA 99220	94-3066722	501(C)(3)	6,158	0			CHARITABLE, GENERAL OPERATING SUPPORT
HOSPICE OF NORTH IDAHO 2290 W PRAIRIE AVE COEUR DALENE, ID 83815	82-0368366	501(C)(3)	6,250	0			CHARITABLE, SPONSORSHIP AND GENERAL OPERATING SUPPORT

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HOSPICE OF SALMON VALLEY 506 VAN DREFF ST SALMON, ID 83467	82-0374295	501(C)(3)	9,044	0			CHARITABLE, GENERAL OPERATING SUPPORT
HOSPICE OF SPOKANE 121 S ARTHUR ST SPOKANE, WA 99202	91-0995069	501(C)(3)	8,038	0			CHARITABLE, GENERAL OPERATING SUPPORT

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HOUSE OF THE LORD CHRISTIAN ACADEMY 754 SILVER BIRCH LANE OLDTOWN, ID 83822	82-0460225	501(C)(3)	13,000	0			CHARITABLE, COMPUTERS AND SOFTWARE FOR STUDENTS AND TEACHERS
HUB SPORTS CENTER 19619 E CATALDO AVE LIBERTY LAKE, WA 99016	26-0173199	501(C)(3)	22,888	0			CHARITABLE, GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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HUTTON SETTLEMENT 422 W RIVERSIDE AVE STE 931 SPOKANE, WA 99201	91-0564969	501(C)(3)	6,168	0			CHARITABLE, GENERAL OPERATING SUPPORT
ICARE INC 2134 CANYON CREEK ROAD OROFINO, ID 83544	27-4647105	501(C)(3)	5,000	0			CHARITABLE, CANCER ASSISTANCE & RECOVERY EFFORTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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IDAHO FOODBANK WAREHOUSE INC 3562 S TK AVE BOISE, ID 83705	82-0425400	501(C)(3)	7,500	0			CHARITABLE, COOKING MATTERS PROGRAM
IDAHO NONPROFIT CENTER INC 5257 W FAIRVIEW AVE STE 260 BOISE, ID 83706	94-3419016	501(C)(3)	7,500	0			CHARITABLE, REGIONAL FORUMS SPONSORSHIP 2019

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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IDAHO TRAILS ASSOCIATION PO BOX 165 BOISE, ID 83701	36-4667290	501(C)(3)	5,500	0			CHARITABLE, NORTH IDAHO SUMMER TRAILS PROGRAM
IDAHO YOUTH RANCHANCHOR HOUSE 5465 W IRVING ST BOISE, ID 83706	82-0253346	501(C)(3)	20,000	0			CHARITABLE, MENTAL HEALTH SERVICES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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IMMANUEL EVANGELICAL COVENANT CHURCH 7402 N FOX POINT DRIVE SPOKANE, WA 99208	46-1987190	501(C)(3)	20,000	0			CHARITABLE, GENERAL OPERATING SUPPORT
INLAND NORTHWEST LAND CONSERVANCY 35 W MAIN AVE STE 210 SPOKANE, WA 99201	91-1510539	501(C)(3)	72,293	0			CHARITABLE, VARIOUS PROGRAM SUPPORT

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INSTITUTE FOR ORTHOPEDIC RESEARCH AND INNOVATION 1110 W PARK PLACE STE 212 COEUR DALENE, ID 83814	81-4702117	501(C)(3)	5,000	0			CHARITABLE, GENERAL OPERATING SUPPORT
INTERNATIONAL JUSTICE MISSION PO BOX 96961 WASHINGTON, DC 20090	54-1722887	501(C)(3)	6,500	0			CHARITABLE, GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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INTERNATIONAL STUDENTS INC PO BOX C COLORADO SPRINGS, CO 80901	53-0214853	501(C)(3)	5,000	0			CHARITABLE, WELCOMERS TO THE PALOUSE PROGRAM
INTERVARSITY CHRISTIAN FELLOWSHIP PO BOX 7895 MADISON, WI 53707	36-2171714	501(C)(3)	7,000	0			CHARITABLE, GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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JAKT FOUNDATION INC PO BOX 85 NEWMAN LAKE, WA 99025	81-5319087	501(C)(3)	5,000	0			CHARITABLE, SPOKANE VALLEY FARMER'S MARKET
JANNUS INC 1607 W JEFFERSON ST BOISE, ID 83702	81-6035382	501(C)(3)	26,747	0			CHARITABLE, EARLY HEAD START HEARING SCREENING FOR INFANTS AND TODDLERS

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JOYA CHILD & FAMILY DEVELOPMENT 2118 W GARLAND AVE SPOKANE, WA 99205	91-0863163	501(C)(3)	46,991	0			CHARITABLE, GENERAL OPERATING SUPPORT
JOYA FOUNDATION 2118 W GARLAND AVE SPOKANE, WA 99205	91-1233711	501(C)(3)	7,228	0			CHARITABLE, GENERAL OPERATING SUPPORT

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KANIKSU LAND TRUST PO BOX 2123 SANDPOINT, ID 83864	47-0898549	501(C)(3)	10,000	0			CHARITABLE, OUTDOOR EDUCATIONAL PROGRAMS
KENDRICK JR SR HIGH SCHOOL 2001 HIGHWAY 3 KENDRICK, ID 83537	82-6000816	GOVERNMENT	5,300	0			CHARITABLE, BEEFAB PROJECT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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KENWORTHY PERFORMING ARTS CENTRE PO BOX 8126 MOSCOW, ID 83843	82-0519693	501(C)(3)	5,000	0			CHARITABLE, THEATER RENOVATION
KITTITAS COUNTY GENEALOGICAL SOCIETY 413 N MAIN ST STE L ELLENSBURG, WA 98926	91-1265723	501(C)(3)	7,863	0			CHARITABLE, GENERAL OPERATING SUPPORT

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KOOTENAI ENVIRONMENTAL ALLIANCE 206 INDIANA STE 112 COEUR DALENE, ID 83814	82-0342101	501(C)(3)	17,800	0			CHARITABLE, GATHERING GARDEN STUDENT SERVICE - LEARNING PROGRAM
KOOTENAI HEALTH FOUNDATION 2003 KOOTENAI HEALTH WAY COEUR DALENE, ID 83814	82-0380784	501(C)(3)	29,621	0			CHARITABLE, VARIOUS PROGRAM SUPPORT

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KOOTENAI HUMANE SOCIETY PO BOX 1005 HAYDEN, ID 83835	82-0334845	501(C)(3)	35,788	0			CHARITABLE, VARIOUS PROGRAM SUPPORT
THE KRISTA FOUNDATION FOR GLOBAL CITIZENSHIP 6827 OSWEGO PL NE STE A SEATTLE, WA 98115	91-1995569	501(C)(3)	10,008	0			CHARITABLE, GENERAL OPERATING SUPPORT

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LAKE PEND OREILLE WATERKEEPER PO BOX 732 SANDPOINT, ID 83864	26-4219188	501(C)(3)	10,000	0			CHARITABLE, EDUCATIONAL PROGRAMMING FOR BONNER COUNTY
LILAC SERVICES FOR THE BLIND 1212 N HOWARD ST SPOKANE, WA 99201	23-7121726	501(C)(3)	6,213	0			CHARITABLE, GENERAL OPERATING SUPPORT

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LUTHER SEMINARY 2481 COMO AVE ST PAUL, MN 55108	41-1425961	501(C)(3)	7,765	0			CHARITABLE, GENERAL OPERATING SUPPORT
LUTERHAVEN MINISTRIES 3258 W LUTERHAVEN RD COEUR DALENE, ID 83814	91-6000231	501(C)(3)	5,500	0			CHARITABLE, GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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MAKE-A-WISH FOUNDATION 104 S FREYA ST GREEN FLAG BLDG NO 210 SPOKANE, WA 99202	91-1329433	501(C)(3)	6,000	0			CHARITABLE, GENERAL OPERATING SUPPORT
MARSHALL CEMETERY ASSOCIATION 12011 S AUSTIN RD SPOKANE, WA 99224	36-4503101	501(C)(3)	13,838	0			CHARITABLE, GENERAL OPERATING SUPPORT

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MEALS ON WHEELS - SPOKANE COUNTY PO BOX 14278 SPOKANE, WA 99214	91-1042546	501(C)(3)	7,788	0			CHARITABLE, GENERAL OPERATING SUPPORT
MID-CITY CONCERNS 1222 W 2ND AVE SPOKANE, WA 99201	91-0833015	501(C)(3)	19,559	0			CHARITABLE, GENERAL OPERATING SUPPORT

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MERCY SHIPS PO BOX 1930 LINDALE, TX 75771	26-2414132	501(C)(3)	10,000	0			CHARITABLE, FULL STEAM AHEAD PROGRAM
MILLWOOD COMMUNITY PRESBYTERIAN CHURCH 3223 N MARGUERITE RD SPOKANE, WA 99212		501(C)(3)	32,457	0			CHARITABLE, VARIOUS PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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MOBIUS SPOKANE 808 W MAIN AVE LL015 SPOKANE, WA 99201	91-1694299	501(C)(3)	13,974	0			CHARITABLE, VARIOUS PROGRAM SUPPORT
MORNING STAR FOUNDATION PO BOX 31330 SPOKANE, WA 99223	20-4830357	501(C)(3)	6,333	0			CHARITABLE, GENERAL OPERATING SUPPORT

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MOSCOW AFFORDABLE HOUSING TRUST 510 W PALOUSE RIVER DR MOSCOW, WA 83843	27-0306873	501(C)(3)	9,450	0			CHARITABLE, CONSTRUCT 3 UNIT TOWNHOUSE
NAMI FAR NORTH PO BOX 2415 SANDPOINT, ID 83864	26-0283018	501(C)(3)	20,000	0			CHARITABLE, NORTH IDAHO CRISIS SERVICES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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NATIONAL FOREST FOUNDATION BUILDING 27 STE 3 FORT MISSOULA RD MISSOULA, MT 59804	52-1786332	501(C)(3)	7,000	0			CHARITABLE, PANHANDLE FOREST COLLABORATIVE
NATIONAL MULTIPLE SCLEROSIS SOCIETY GREATER NORTHWEST 192 NICKERSON STREET STE 100 SEATTLE, WA 98109	13-5661935	501(C)(3)	10,000	0			CHARITABLE, WALK TEAM

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NATIONAL RIGHT TO WORK LEGAL DEFENSE & EDUCATION FOUNDATION 8001 BRADDOCK RD SPRINGFIELD, VA 22160	59-1588825	501(C)(3)	5,000	0			CHARITABLE, GENERAL OPERATING SUPPORT
NELS VENERUS HOCKEY SCHOLARSHIP FOUNDATION PO BOX 48073 SPOKANE, WA 99228	38-3840390	501(C)(3)	7,655	0			CHARITABLE, GENERAL OPERATING SUPPORT

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NETWORK FOR GOOD 1140 CONNECTICUT AVE NW STE 700 WASHINGTON, DC 20036	68-0480736	501(C)(3)	29,480	0			CHARITABLE, JUMPSTART CAPACITY BUILDING PROGRAM
NEZPERCE SCHOOL DISTRICT 302 PO BOX 279 NEZ PERCE, ID 83543		GOVERNMENT	14,000	0			CHARITABLE, SPLASH PAD

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NORTH BENCH VOLUNTEER FIRE DISTRICT 64464 HIGHWAY 2 BONNERS FERRY, ID 83805	82-0432903	501(C)(3)	22,452	0			CARDIAC ARREST AND CPR PROGRAM
NORTH IDAHO COLLEGE FOUNDATION 1000 W GARDEN AVE COEUR DALENE, ID 83814	82-0337334	501(C)(3)	9,201	0			CHARITABLE, VARIOUS PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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NORTHEAST COMMUNITY CENTER ASSOCIATION 4001 N COOK ST SPOKANE, WA 99207	91-1196071	501(C)(3)	25,000	0			CHARITABLE, VARIOUS PROGRAM SUPPORT
NORTHWEST CONNECT 4520 N CRESTLINE SPOKANE, WA 99207	90-0724290	501(C)(3)	10,500	0			CHARITABLE, FREEZER UPGRADE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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NORTHWEST MUSEUM OF ARTS & CULTURE 2316 W FIRST AVE SPOKANE, WA 99201	91-6000186	501(C)(3)	41,900	0			CHARITABLE, WEBSITE REDESIGN AND GENERAL OPERATING SUPPORT
OPEN ARMS PREGNANCY CARE CENTER 1800 LINCOLN WAY STE 201 COEUR DALENE, ID 83814	82-0505797	501(C)(3)	13,000	0			CHARITABLE, GENERAL OPERATING SUPPORT

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OTHELLO CHURCH OF THE NAZARENE 835 S 10TH AVE OTHELLO, WA 99344	91-0950822	501(C)(3)	44,000	0			CHARITABLE, GENERAL OPERATING SUPPORT
PALOUSE CARE NETWORK 1515 W A ST MOSCOW, ID 83843	45-3719771	501(C)(3)	5,000	0			CHARITABLE, NEW PULLMAN CENTER

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PALOUSE-CLEARWATER ENVIRONMENTAL INSTITUTE PO BOX 8596 MOSCOW, ID 83843	94-3038182	501(C)(3)	8,300	0			CHARITABLE, NATURE CENTER
PANHANDLE ALLIANCE FOR EDUCATION PO BOX 1675 SANDPOINT, ID 83864	61-1416176	501(C)(3)	51,183	0			CHARITABLE, SMARTLABS AND GENERAL OPERATING SUPPORT

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PANHANDLE ANIMAL SHELTER 870 KOOTENAI CUT-OFF RD PONDERAY, ID 83852	94-3071245	501(C)(3)	10,000	0			CHARITABLE, SAFETY NET PROGRAM
PARTNERS IN HEALTH PO BOX 996 FREDERICK, MD 21705	04-3567502	501(C)(3)	8,660	0			CHARITABLE, GENERAL OPERATING SUPPORT

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PARTNERS WITH FAMILIES & CHILDREN SPOKANE 1321 W BROADWAY SPOKANE, WA 99201	68-0576560	501(C)(3)	27,700	0			CHARITABLE, VARIOUS PROGRAM SUPPORT
PAWSITIVE OUTREACH SPAYNEUTER ALLIANCE PO BOX 1241 NEWPORT, WA 99156	45-3062989	501(C)(3)	16,000	0			CHARITABLE, COMMUNITY SPAY/NEUTER PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PEACE LUTHERAN CHURCH 309 N LAKE COLFAX, WA 99133		501(C)(3)	7,334	0			CHARITABLE, GENERAL OPERATING SUPPORT
PEND OREILLE PLAYERS ASSOCIATION 240 N UNION AVE NEWPORT, WA 99156	51-0516930	501(C)(3)	12,000	0			CHARITABLE, EXTERIOR BUILDING RENOVATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PENINSULA BIBLE CHURCH CUPERTINO 10601 N BLANEY AVE CUPERTINO, CA 95014	77-0269849	501(C)(3)	6,250	0			CHARITABLE, ROMANIAN MINISTRY
PHILANTHROPY NORTHWEST 2101 FOURTH AVE STE 650 SEATTLE, WA 98121	91-1110995	501(C)(3)	10,000	0			CHARITABLE, STATEWIDE CENSUS POOLED FUND

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PLANNED PARENTHOOD OF GREATER WASHINGTON AND NORTH IDAHO 1117 TIETON DR YAKIMA, WA 98902	91-6071384	501(C)(3)	20,391	0			CHARITABLE, GENERAL OPERATING SUPPORT
PLUS DELTA AFTER SCHOOL STUDIOS PO BOX 14 DAYTON, WA 99328	82-1340967	501(C)(3)	24,000	0			CHARITABLE, CLUB DAYTON SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PEND OREILLE ARTS COUNCIL PO BOX 1694 SANDPOINT, ID 83864	82-0350688	501(C)(3)	10,400	0			CHARITABLE, VARIOUS PROGRAM SUPPORT
POST FALLS FOOD BANK 415 E THIRD AVE POST FALLS, ID 83854	82-0424551	501(C)(3)	10,900	0			CHARITABLE, GROCERY RESCUE PROGRAM

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POTLATCH FUND 801 SECOND AVE STE 304 SEATTLE, WA 98104	73-1712905	501(C)(3)	15,000	0			CHARITABLE, NATIVE ARTS COHORT
PREVENT HOMELESS PETS 1000 IRMA LANE BENTON CITY, WA 99320	01-0919961	501(C)(3)	15,000	0			CHARITABLE, SPAY/NEUTER ASSISTANCE

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PRIEST LAKE COMMUNITY EDUCATION FOUNDATION 799 HAGMAN RD NORDMAN, ID 83848	45-4775779	501(C)(3)	6,000	0			CHARITABLE, GENERAL OPERATING SUPPORT
PRIEST RIVER LAMANNA HIGH SCHOOL 1103 9TH ST PRIEST RIVER, ID 83856	82-0508740	GOVERNMENT	5,040	0			CHARITABLE, INTRODUCTION TO ORCHESTRA PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PRIEST RIVER MINISTRIES PO BOX 334 PRIEST RIVER, ID 83856	51-0582172	501(C)(3)	16,850	0			CHARITABLE, CRISIS LINE ADVOCATES
PROJECT BEAUTY SHARE 2718 E SPRAGUE AVE SPOKANE, WA 99202	27-1822098	501(C)(3)	35,000	0			CHARITABLE, CAPACITY BUILDING AND LEADERSHIP

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PROVIDENCE HEALTH CARE FOUNDATION 101 W EIGHTH AVE SPOKANE, WA 99204	32-0014330	501(C)(3)	7,800	0			CHARITABLE, VARIOUS PROGRAM SUPPORT
RAPTORS OF THE ROCKIES PO BOX 250 FLORENCE, MT 59833	81-0522082	501(C)(3)	7,500	0			CHARITABLE, GENERAL OPERATING SUPPORT

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ROCKWOOD RESIDENTS' FOUNDATION 2903 E 25TH AVE SPOKANE, WA 99223	91-1472275	501(C)(3)	15,775	0			CHARITABLE, VARIOUS PROGRAM SUPPORT
ROGERS HIGH SCHOOL 1622 E WELLESLEY AVE SPOKANE, WA 99207	91-6001582	501(C)(3)	9,718	0			CHARITABLE, STEM PROGRAM

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RONALD MCDONALD HOUSE 1015 W 5TH AVE SPOKANE, WA 99204	91-1176115	501(C)(3)	164,717	0			CHARITABLE, CAPITAL CAMPAIGN AND GENERAL OPERATING SUPPORT
RURAL DEVELOPMENT INITIATIVES 150 SHELTON-MCMURPHEY BLVD STE 201 EUGENE, OR 97401	93-1073746	501(C)(3)	20,000	0			CHARITABLE, RURAL COMMUNITY LEADERSHIP

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SAFE PASSAGE 850 N 4TH ST COEUR DALENE, ID 83814	82-0341451	501(C)(3)	26,000	0			CHARITABLE, COMMUNITY OUTREACH AND TEED EDUCATION
SALISH SCHOOL OF SPOKANE PO BOX 10271 SPOKANE, WA 99209	27-1126478	501(C)(3)	19,244	0			CHARITABLE, SALISH LANGUAGE AND CULTURE PROJECT

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SALVATION ARMY RAY & JOAN KROC CORPS COMMUNITY CENTER 1765 W GOLF COURSE RD COEUR DALENE, ID 83815	94-1156347	501(C)(3)	11,118	0			CHARITABLE, VARIOUS PROGRAM SUPPORT
SALVATION ARMY OF SPOKANE 222 E INDIANA AVE SPOKANE, WA 99207	94-1156347	501(C)(3)	44,639	0			CHARITABLE, GENERAL OPERATING SUPPORT

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SAMARITAN'S PURSE PO BOX 3000 BOONE, NC 28607	58-1437002	501(C)(3)	8,516	0			CHARITABLE, GENERAL OPERATING SUPPORT
SANDPOINT AREA SENIORS INC 820 MAIN ST SANDPOINT, ID 83864	82-0418894	501(C)(3)	15,500	0			CHARITABLE, GENERAL OPERATING SUPPORT

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SANDPOINT COMMUNITY RESOURCE CENTER 231 N 3RD AVE STE 101 SANDPOINT, ID 83864	27-1833740	501(C)(3)	58,600	0			CHARITABLE, GENERAL OPERATING SUPPORT
SANDPOINT HIGH SCHOOL 410 S DIVISION ST SANDPOINT, ID 83864	82-0411808	GOVERNMENT	10,000	0			SCHOLARSHIPS AND MODEL UN PROGRAM SUPPORT

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SANDPOINT NORDIC CLUB INC 2222 HIDDEN VALLEY RD SANDPOINT, ID 83864	27-1782211	501(C)(3)	16,000	0			CHARITABLE, PINE STREET WOODS RECREATION CENTER
SANDPOINT TEEN CENTER PO BOX 1066 SANDPOINT, ID 83864	61-1510591	501(C)(3)	16,000	0			CHARITABLE, GENERAL OPERATING SUPPORT

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SCHOOL'S OUT WASHINGTON 801 23RD AVE S STE A SEATTLE, WA 98144	46-0809713	501(C)(3)	12,500	0			CHARITABLE, SUPPORT OF SUMMER LEARNING
SECOND HARVEST INLAND NORTHWEST 1234 E FRONT AVE SPOKANE, WA 99202	23-7173826	501(C)(3)	129,355	0			CHARITABLE, VARIOUS PROGRAM AND GENERAL OPERATING SUPPORT

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THE SEED COMPANY 220 WESTWAY PLACE STE 100 ARLINGTON, TX 76018	33-0838929	501(C)(3)	20,000	0			CHARITABLE, BIBLE TRANSLATION
SEEDS IN HIS GARDEN PO BOX 12583 FRESNO, CA 93778	81-1055200	501(C)(3)	8,000	0			CHARITABLE, GENERAL OPERATING SUPPORT

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SELKIRK CONSERVATION ALLIANCE INC PO BOX 1809 PRIEST RIVER, ID 83856	82-0418651	501(C)(3)	5,250	0			CHARITABLE, WATER QUALITY MONITORING
SHOSHONE COUNTY HORSEMEN'S ASSOCIATION PO BOX 268 SILVERTON, ID 83867	82-0412815	501(C)(3)	9,750	0			CHARITABLE, GENERAL OPERATING SUPPORT

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SHOSHONE COUNTY CRISIS AND RESOURCE CENTER 415 7TH ST STE 1 WALLACE, ID 83873	82-0374610	501(C)(3)	17,776	0			CHARITABLE, CRISIS AND RESOURCE CENTER
SHRINERS HOSPITALS FOR CHILDREN 2900 ROCKY POINT DR TAMPA, FL 33607	36-2193608	501(C)(3)	14,824	0			CHARITABLE, GENERAL OPERATING SUPPORT

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SNAKE RIVER COMMUNITY CLINIC 215 10TH ST LEWISTON, ID 83501	31-1726460	501(C)(3)	9,631	0			CHARITABLE, SCREENING MAMMOGRAMS
SNAP FINANCIAL ACCESS 3102 W FORT GEORGE WRIGHT DR SPOKANE, WA 99224	37-1502691	501(C)(3)	5,000	0			CHARITABLE, GENERAL OPERATING SUPPORT

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SOROPTIMIST FOUNDATION PO BOX 1892 NEWPORT, WA 99156	91-6076932	501(C)(3)	5,000	0			CHARITABLE, GENERAL OPERATING SUPPORT
SOUTH ASIA CULTURAL ASSOCIATION 410 E SHILOH HILLS DR SPOKANE, WA 99208	91-1679144	501(C)(3)	5,000	0			CHARITABLE, GENERAL OPERATING SUPPORT

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SOUTHEAST SPOKANE COUNTY FAIR ASSOCIATION PO BOX 112 ROCKFORD, WA 99030	30-0845724	501(C)(3)	15,000	0			CHARITABLE, PLAYGROUND EQUIPMENT UPGRADE
SOUTHSIDE CHRISTIAN CHURCH 2934 E 27TH AVE SPOKANE, WA 99223	91-2153486	501(C)(3)	121,000	0			CHARITABLE, GENERAL OPERATING SUPPORT

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SPARK CENTRAL 1214 W SUMMIT PKWY SPOKANE, WA 99201	46-5367850	501(C)(3)	50,500	0			CHARITABLE, NEIGHBORHOOD PROGRAMS
SPECIAL OLYMPICS WASHINGTON 2815 2ND AVE STE 370 SEATTLE, WA 98121	91-0962383	501(C)(3)	8,500	0			CHARITABLE, VARIOUS PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SPOKANE ART SCHOOL 811 W GARLAND AVE SPOKANE, WA 99205	45-4610507	501(C)(3)	46,500	0			CHARITABLE, GENERAL OPERATING SUPPORT
SPOKANE COUNTY UNITED WAY 920 N WASHINGTON ST STE 100 SPOKANE, WA 99201	91-0606058	501(C)(3)	120,158	0			CHARITABLE, GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SPOKANE HISTORIC CONCERTS ASSOCIATION 1530 E 14TH AVE SPOKANE, WA 99202	47-2045480	501(C)(3)	13,744	0			CHARITABLE, ROYAL FIREWORKS CONCERT
SPOKANE HUMANE SOCIETY PO BOX 6247 SPOKANE, WA 99217	91-0565011	501(C)(3)	35,394	0			CHARITABLE, GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SPOKANE PARKS FOUNDATION 222 W MISSION AVE STE 10 SPOKANE, WA 99201	91-6033504	501(C)(3)	13,877	0			CHARITABLE, GENERAL OPERATING SUPPORT
SPOKANE PUBLIC LIBRARY FOUNDATION 906 W MAIN AVE SPOKANE, WA 99201	91-1917727	501(C)(3)	7,910	0			CHARITABLE, GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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SPOKANE PUBLIC RADIO - KPBX 1229 N MONROE ST SPOKANE, WA 99201	23-7097524	501(C)(3)	7,550	0			CHARITABLE, GENERAL OPERATING SUPPORT
SPOKANE PUBLIC SCHOOLS 200 N BERNARD ST SPOKANE, WA 99201	91-6001582	501(C)(3)	11,144	0			CHARITABLE, HILLYARD YOUTH COLLABORATIVE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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SPOKANE RIVER FORUM 2206 S SHERMAN ST SPOKANE, WA 99203	61-1566039	501(C)(3)	8,000	0			CHARITABLE, REDBAND ART SCULPTURE AND GENERAL OPERATING SUPPORT
SISTERS CITIES ASSOCIATION OF SPOKANE 800 W SPOKANE FALLS BLVD SPOKANE, WA 99202	94-3101734	501(C)(3)	11,000	0			CHARITABLE, SISTER CITIES CONNECTIONS GARDEN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SPOKANE SYMPHONY SOCIETY PO BOX 365 SPOKANE, WA 99210	91-0730435	501(C)(3)	64,134	0			CHARITABLE, GENERAL OPERATING SUPPORT
SPOKESMAN REVIEWCATHOLIC CHARITIES CHRISTMAS BUREAU FUND PO BOX 516 SPOKANE, WA 99210	53-0196617	501(C)(3)	32,872	0			CHRISTMAS BUREAU SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST ANTHONY'S CATHOLIC CHURCH PO BOX C NEWPORT, WA 99156		501(C)(3)	5,000	0			CHARITABLE, GENERAL OPERATING SUPPORT
CATHEDRAL OF ST JOHN THE EVANGELIST 127 E 12TH AVENUE SPOKANE, WA 99202		501(C)(3)	6,636	0			CHARITABLE, GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST JOHN-ENDICOTT SCHOOLS' FOUNDATION PO BOX 411 ST JOHN, WA 99171	91-1639628	501(C)(3)	39,683	0			CHARITABLE, GENERAL OPERATING SUPPORT
ST JOSEPH CARE CENTER 17 E 8TH AVE SPOKANE, WA 99202	91-0564989	501(C)(3)	6,375	0			CHARITABLE, GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ST PIUS X CATHOLIC CHURCH 625 E HAYCRAFT AVE COEUR DALENE, ID 83814		501(C)(3)	10,000	0			CHARITABLE, GENERAL OPERATING SUPPORT
ST VINCENT DE PAUL NORTH IDAHO 201 E HARRISON AVE COEUR DALENE, ID 83814	82-0250389	501(C)(3)	20,000	0			CHARITABLE, FAMILY-CENTERED NURTURING PARENTING PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STAGE LEFT THEATER ASSOCIATION 9408 E HOLMAN RD SPOKANE VALLEY, WA 99206	45-4059365	501(C)(3)	6,470	0			CHARITABLE, GENERAL OPERATING SUPPORT
STEVENS COUNTY FIRE DISTRICT #2 PO BOX 86 HUNTERS, WA 99137	91-1537836	501(C)(3)	15,000	0			CHARITABLE, SAFETY EQUIPMENT REPLACEMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FRIENDS OF STONEROSE FOSSIL PO BOX 987 REPUBLIC, WA 99166	31-1274608	501(C)(3)	12,000	0			CHARITABLE, GENERAL OPERATING SUPPORT
TESH INC 3327 W INDUSTRIAL LOOP COEUR DALENE, ID 83815	82-0297105	501(C)(3)	18,000	0			CHARITABLE, GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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THACHER SCHOOL 5025 THACHER RD OJAI, CA 93023	95-1642398	501(C)(3)	14,000	0			CHARITABLE, GENERAL OPERATING SUPPORT
TIMBERLINE SCHOOL 22869 HWY 11 WEIPPE, ID 83553	82-6000734	501(C)(3)	19,579	0			CHARITABLE, GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TOWN OF WAVERLY PO BOX 35 WAVERLY, WA 99039	91-0903193	GOVERNMENT	20,900	0			CHARITABLE, RESTORATION OF PRAIRIE VIEW SCHOOLHOUSE COMMUNITY CENTER
TRANSITIONAL PROGRAMS FOR WOMEN 3128 N HEMLOCK ST SPOKANE, WA 99205	91-1307272	501(C)(3)	51,473	0			CHARITABLE, VARIOUS PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRINITY LUTHERAN CHURCH 6784 CODY ST BONNERS FERRY, ID 83805	82-0226150	501(C)(3)	15,000	0			CHARITABLE, WEEKEND FOOD FOR SCHOOL-AGE CHILDREN
TRINITY LUTHERAN SEMINARY - CAPITAL UNIVERSITY 1 COLLEGE AND MAIN COLUMBUS, OH 43209	31-0943182	501(C)(3)	7,765	0			CHARITABLE, GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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TVW 1058 CAPITAL WAY S OLYMPIA, WA 98501	91-1597601	501(C)(3)	10,000	0			CHARITABLE, PROGRAM SUPPORT
U DISTRICT PHYSICAL THERAPY FOUNDATION 730 N HAMILTON SPOKANE, WA 99202	30-0391912	501(C)(3)	6,644	0			CHARITABLE, GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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UNION GOSPEL MISSION PO BOX 4066 SPOKANE, WA 99220	91-0613587	501(C)(3)	33,015	0			CHARITABLE, GENERAL OPERATING SUPPORT
UNITED WAY OF NORTH IDAHO 501 E LAKESIDE AVE STE 3 COEUR DALENE, ID 83814	82-0232729	501(C)(3)	20,000	0			CHARITABLE, READY FOR KINDERGARTEN PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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UNIVERSITY OF IDAHO PO BOX 443151 MOSCOW, ID 83844	82-6000945	501(C)(3)	57,348	0			CHARITABLE, EARLY READING PROJECT AND SCHOLARSHIPS
UNIVERSITY OF MONTANA FOUNDATION PO BOX 7159 MISSOULA, MT 59807	81-0362989	501(C)(3)	32,500	0			CHARITABLE, GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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UNIVERSITY OF REDLANDS PO BOX 3080 REDLANDS, CA 92373	95-1643389	501(C)(3)	5,000	0			CHARITABLE, GENERAL OPERATING SUPPORT
UNIVERSITY OF WISCONSIN FOUNDATION US BANK LOCKBOX BOX 78807 MILWAUKEE, WI 53278	39-0743975	501(C)(3)	7,475	0			CHARITABLE, SCHOOL OF EDUCATION AND MEDICINE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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VANESSA BEHAN CRISIS NURSERY 1004 E 8TH AVE SPOKANE, WA 99202	91-1196575	501(C)(3)	213,840	0			CHARITABLE, CAPITAL CAMPAIGN AND GENERAL OPERATING SUPPORT
VDARE FOUNDATION PO BOX 211 LITCHFIELD, CT 06759	22-3691487	501(C)(3)	22,000	0			CHARITABLE, GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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VILLAGE GREEN PROJECT PO BOX 383 SAGLE, ID 83860	46-5268891	501(C)(3)	5,000	0			CHARITABLE, BOOK TRUST LITERACY PROGRAM
VIOLA COMMUNITY CLUB PO BOX 34 VIOLA, ID 83872	81-0131890	501(C)(3)	10,000	0			CHARITABLE, KITCHEN CONSTRUCTION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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VOLUNTEERS OF AMERICA 525 W 2ND AVE SPOKANE, WA 99201	91-0577131	501(C)(3)	43,066	0			CHARITABLE, VARIOUS PROGRAM SUPPORT
VOLUNTEER FOOD & RESOURCE CENTER 210 S WYNEE ST COLVILLE, WA 99114	91-1192094	501(C)(3)	8,000	0			CHARITABLE, VARIOUS PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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WALLACE DISTRICT MINING MUSEUM PO BOX 469 WALLACE, ID 83873	82-6009559	501(C)(3)	5,000	0			CHARITABLE, ARCHIVING
WARTBURG THEOLOGICAL SEMINARY 333 WARTBURG PLACE DUBUQUE, IA 52003	42-0681105	501(C)(3)	7,765	0			CHARITABLE, GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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WASHINGTON IDAHO SYMPHONY ASSOCIATION PO BOX 9185 MOSCOW, ID 83843	82-0308694	501(C)(3)	7,975	0			CHARITABLE, GENERAL OPERATING SUPPORT
WASHINGTON POLICY CENTER 801 W RIVESIDE STE 100 SPOKANE, WA 99201	91-1752769	501(C)(3)	22,500	0			CHARITABLE, GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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WHITMAN COUNTY HUMANE SOCIETY PO BOX 453 PULLMAN, WA 99163	91-2054548	501(C)(3)	5,000	0			CHARITABLE, CAT BUILDING EXPANSION PROJECT
WHITMAN HOSPITAL & MEDICAL CENTER FOUNDATION 1200 W FAIRVIEW ST COLFAX, WA 99111	91-1460475	501(C)(3)	7,334	0			CHARITABLE, GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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WHITWORTH COMMUNITY PRESBYTERIAN CHURCH 312 W HAWTHORNE RD SPOKANE, WA 99218	91-0625510	501(C)(3)	20,000	0			CHARITABLE, GENERAL OPERATING SUPPORT
WHITWORTH UNIVERSITY 300 W HAWTHORNE RD SPOKANE, WA 99218	91-0473310	501(C)(3)	27,388	0			CHARITABLE, GENERAL OPERATING SUPPORT AND SCHOLARSHIPS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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WILBUR CEMETERY ASSOCIATION PO BOX 168 WILBUR, WA 99185	91-1383048	501(C)(3)	7,262	0			CHARITABLE, GENERAL OPERATING SUPPORT
WIRED2LEARN FOUNDATION PO BOX 806 POST FALLS, ID 83877	83-0568152	501(C)(3)	13,500	0			CHARITABLE, GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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WOMEN HELPING WOMEN FUND 1325 W 1ST AVE STE 318 SPOKANE, WA 99201	91-1561874	501(C)(3)	61,236	0			CHARITABLE, GENERAL OPERATING SUPPORT
WOMEN'S & CHILDREN'S FREE RESTAURANT 1408 N WASHINGTON ST SPOKANE, WA 99201	91-1399742	501(C)(3)	31,311	0			CHARITABLE, GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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WORLD RELIEF SPOKANE 1522 N WASHINGTON ST SUITE 200 SPOKANE, WA 99201		501(C)(3)	15,000	0			CHARITABLE, REFUGEE YOUTH PROGRAM
WOUNDED WARRIOR PROJECT 4899 BELFORT RD STE 300 JACKSONVILLE, FL 32256	20-2370934	501(C)(3)	5,500	0			CHARITABLE, GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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WASHINGTON STATE UNIVERSITY COLLEGE OF NURSING P O BOX 1495 SPOKANE, WA 99210	91-6001108	501(C)(3)	6,429	0			SCHOLARSHIPS
WASHINGTON STATE UNIVERSITY FOUNDATION PO BOX 641927 PULLMAN, WA 99164	91-1075542	501(C)(3)	41,750	0			CHARITABLE, VARIOUS PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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WSU OFFICE OF SCHOLARSHIP SERVICES PO BOX 641068 PULLMAN, WA 99164	91-6001108	501(C)(3)	6,250	0			SCHOLARSHIPS
YAKIMA FAMILY YMCA 5 N NACHES AVE YAKIMA, WA 98901	91-0568717	501(C)(3)	250,000	0			CHARITABLE, CAPITAL CAMPAIGN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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YMCA OF THE INLAND NORTHWEST 1126 N MONROE ST SPOKANE, WA 99201	91-0827958	501(C)(3)	81,645	0			CHARITABLE, VARIOUS PROGRAM SUPPORT
YOUNG LIFE PO BOX 70065 PRESCOTT, AZ 86304	84-0385934	501(C)(3)	22,925	0			CHARITABLE, GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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YOUTH EMERGENCY SERVICES 316 W 2ND ST NEWPORT, WA 99156	80-0886113	501(C)(3)	30,000	0			CHARITABLE, YOUNG ADULT INDEPENDENCE PROJECT
YOUTH FOR CHRIST SPOKANE AREA 421 W RIVERSIDE AVE STE 335 SPOKANE, WA 99201	91-0880433	501(C)(3)	5,500	0			CHARITABLE, VARIOUS PROGRAM SUPPORT

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
INNOVIA FOUNDATION

Employer identification number
91-0941053

Part I Questions Regarding Compensation

	Yes	No								
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items</p> <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax indemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use									
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
<p>b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</p>	1b									
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?</p>	2									
<p>3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> Compensation committee</td> <td><input type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input checked="" type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract	<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study	<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract									
<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study									
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
<p>4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization</p> <p>a Receive a severance payment or change-of-control payment?</p> <p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III</p>	4a	No								
	4b	No								
	4c	No								
<p>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</p> <p>5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 5a or 5b, describe in Part III</p>	5a	No								
	5b	No								
<p>6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 6a or 6b, describe in Part III</p>	6a	No								
	6b	No								
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III</p>	7	No								
<p>8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III</p>	8	No								
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	9									

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 SHELLY O'QUINN CHIEF EXECUTIVE OFFICER	(i)	177,230	0	1,200	17,729	7,834	203,993	0
	(ii)	0	0	0	0	0	0	0

Part III **Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No 1545-0047

2018

▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
 ▶ **Attach to Form 990.**
 ▶ **Go to www.irs.gov/Form990 for the latest information.**

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
INNOVIA FOUNDATION

Employer identification number
91-0941053

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	4	1,574,519	FAIR MARKET VALUE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (_____)				
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29	
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30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

	Yes	No
30a		No

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

31	Yes	
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32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a	Yes	
------------	-----	--

b If "Yes," describe in Part II

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

Part II Supplemental Information.

Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
PART I, LINE 32B	BROKERAGE HOUSE INVESTMENT MANAGERS PROCESS DONATED SECURITIES AND HAVE STANDING ORDERS TO SELL SECURITIES WITHIN 24 HOURS OF RECEIPT

SCHEDULE O
(Form 990 or 990-EZ)**Supplemental Information to Form 990 or 990-EZ**

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

2018
Open to Public Inspection

Department of the Treasury

Name of the organization
INNOVIA FOUNDATION

Employer identification number

91-0941053

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	A BUSINESS RELATIONSHIP EXISTS AMONGST THE INDIVIDUALS REPORTED IN PART VII AS THEY SERVE AS OFFICERS AND DIRECTORS OF A RELATED TAX-EXEMPT ORGANIZATION

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE FORM 990 IS PREPARED BY AN OUTSIDE ACCOUNTING FIRM BASED ON INFORMATION PROVIDED BY THE CFO. A COPY OF THE DRAFT 990 AND SCHEDULES ARE SUPPLIED TO THE CFO AND CEO PRIOR TO THE REVIEW AND APPROVAL BY THE FINANCE COMMITTEE. ANY COMMENTS ARE CONSIDERED AND A COPY IS PROVIDED TO THE WHOLE GOVERNING BOARD PRIOR TO FILING FORM 990 WITH THE IRS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	EACH FISCAL YEAR A CONFLICT OF INTEREST QUESTIONNAIRE IS COMPLETED BY BOARD MEMBERS AND MANAGEMENT RESPONSES ARE REVIEWED BY THE BOARD FOR POSSIBLE CONFLICTS ANY POTENTIAL CONFLICT OF INTEREST IS RECORDED IN THE MINUTES OF THE BOARD MEETING IF IT IS DEMONSTRATED THAT A BOARD OR COMMITTEE MEMBER HAS A CONFLICT, THEY ARE EXCUSED FROM VOTING ON A MOTION WHERE IT IS PERCEIVED A CONFLICT EXISTS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15A	A COMPENSATION COMMITTEE COMPRISED OF MEMBERS OF THE BOARD OF DIRECTORS SET THE CEO'S COMPENSATION ANNUALLY USING COMPARATIVE DATA FROM SALARY SURVEYS AND FORM 990 DATA FROM OTHER ORGANIZATIONS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	INNOVIA FOUNDATION POSTS THEIR RETURNS AND POLICIES ON THEIR WEBSITE FOR PUBLIC INSPECTION

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	CORRECTION OF ACCOUNTING TREATMENT FOR AGENCY FUNDS HELD -14,693,529 FOR OTHERS TO MATCH THE REPORTING ON THE AUDITED FINANCIAL STATEMENTS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XII, LINE 2C	THE FINANCE COMMITTEE HAS OVERSIGHT OVER THE ANNUAL AUDIT

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2018

**Open to Public
Inspection**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization
INNOVIA FOUNDATION

Employer identification number

91-0941053

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) HENRY TREEDE SUPPORTING ORGANIZATION 421 W RIVERSIDE SUITE 606 SPOKANE, WA 99201 33-0995489	SUPPORTING ORGANIZATION	WA	501(C)(3)	509(A)(3) TYPE I	INNOVIA FOUNDATION	Yes	
(2) TAD SUPPORTING ORGANIZATION 421 W RIVERSIDE SUITE 606 SPOKANE, WA 99201 45-3028624	SUPPORTING ORGANIZATION	WA	501(C)(3)	509(A)(3) TYPE I	INNOVIA FOUNDATION	Yes	
(3) BOYS AND GIRLS CLUB SUPPORTING ORGANIZATION 421 W RIVERSIDE SUITE 606 SPOKANE, WA 99201 81-0768196	SUPPORTING ORGANIZATION	WA	501(C)(3)	509(A)(3) TYPE I	INNOVIA FOUNDATION	Yes	

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No
(1) CHARITABLE REMAINDER TRUST (18)	INVESTMENTS	WA	N/A						No

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		No
b	Gift, grant, or capital contribution to related organization(s)		No
c	Gift, grant, or capital contribution from related organization(s)	Yes	
d	Loans or loan guarantees to or for related organization(s)		No
e	Loans or loan guarantees by related organization(s)		No
f	Dividends from related organization(s)		No
g	Sale of assets to related organization(s)		No
h	Purchase of assets from related organization(s)		No
i	Exchange of assets with related organization(s)		No
j	Lease of facilities, equipment, or other assets to related organization(s)		No
k	Lease of facilities, equipment, or other assets from related organization(s)		No
l	Performance of services or membership or fundraising solicitations for related organization(s)	Yes	
m	Performance of services or membership or fundraising solicitations by related organization(s)		No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		No
o	Sharing of paid employees with related organization(s)		No
p	Reimbursement paid to related organization(s) for expenses		No
q	Reimbursement paid by related organization(s) for expenses	Yes	
r	Other transfer of cash or property to related organization(s)		No
s	Other transfer of cash or property from related organization(s)		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) TAD SUPPORTING ORGANIZATION	C	288,000	CASH
(2) HENRY TREEDE SUPPORTING ORGANIZATION	C	85,000	CASH

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation