

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

2024

Open to Public Inspection

A For the 2024 calendar year, or tax year beginning , and ending

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization
COMMUNITY FOUNDATION OF NORTHEAST IOWA

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
3117 GREENHILL CIRCLE

City or town, state or province, country, and ZIP or foreign postal code
CEDAR FALLS IA 50613

F Name and address of principal officer:
**KAYE M. ENGLIN
3117 GREENHILL CIRCLE
CEDAR FALLS IA 50613**

D Employer identification number
42-6060414

E Telephone number
319-287-9106

G Gross receipts \$ **27,404,739**

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

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: **WWW.CFNEIA.ORG**

H(c) Group exemption number

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation: **1956**

M State of legal domicile: **IA**

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
SEE SCHEDULE 0

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) **16**

4 Number of independent voting members of the governing body (Part VI, line 1b) **15**

5 Total number of individuals employed in calendar year 2024 (Part V, line 2a) **19**

6 Total number of volunteers (estimate if necessary) **450**

7a Total unrelated business revenue from Part VIII, column (C), line 12 **0**

7b Net unrelated business taxable income from Form 990-T, Part I, line 11 **0**

Revenue

8 Contributions and grants (Part VIII, line 1h) **6,935,811**

9 Program service revenue (Part VIII, line 2g) **0**

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) **9,665,197**

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) **17,750**

12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) **16,618,758**

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) **8,943,240**

14 Benefits paid to or for members (Part IX, column (A), line 4) **0**

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) **1,360,358**

16a Professional fundraising fees (Part IX, column (A), line 11e) **0**

b Total fundraising expenses (Part IX, column (D), line 25) **346,421**

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) **748,288**

18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) **11,051,886**

19 Revenue less expenses. Subtract line 18 from line 12 **5,566,872**

Net Assets or Fund Balances

20 Total assets (Part X, line 16) **163,398,434**

21 Total liabilities (Part X, line 26) **7,250,996**

22 Net assets or fund balances. Subtract line 21 from line 20 **156,147,438**

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
KAYE M. ENGLIN
Type or print name and title
PRESIDENT & CEO

Date

Paid Preparer Use Only

Preparer's name
STEVEN K. DUGGAN, CPA

Preparer's signature
STEVEN K. DUGGAN, CPA

Date
09/18/25

Check ☐ if self-employed PTIN
P00424293

Firm's name
HOGAN - HANSEN, P.C.

Firm's EIN
42-0991212

Firm's address
**3128 BROCKWAY ROAD
WATERLOO, IA 50701-5103**

Phone no.
319-233-5225

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2024)

DAA

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:**SEE SCHEDULE O****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 \$ **9,271,891** including grants of \$ **8,850,242**) (Revenue \$)

THE FOUNDATION RESPONDS BY SUPPORTING NONPROFITS DOING GOOD IN THEIR COMMUNITIES THROUGH GRANTMAKING AND BY HELPING INDIVIDUALS, FAMILIES AND BUSINESSES ESTABLISH ENDOWMENT FUNDS TO CREATE LONG-TERM POSITIVE IMPACT ON THEIR COMMUNITIES AND THE CAUSES THEY ARE PASSIONATE ABOUT. GRANTS ARE DISTRIBUTED TO NONPROFITS AND GOVERNMENT ENTITIES ACROSS OUR REGION, ARE RATIFIED BY THE FOUNDATION'S BOARD OF DIRECTORS AND ARE MADE IN THE FOLLOWING AREAS: ART AND CULTURE, COMMUNITY BETTERMENT, EDUCATION AND YOUTH BETTERMENT, ENVIRONMENT AND ANIMAL WELFARE, HEALTH, AND HUMAN SERVICE.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)**N/A****4c** (Code:) (Expenses \$ including grants of \$) (Revenue \$)**N/A****4d** Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses **9,271,891**

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	X	
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	X	
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If "Yes," complete Schedule D, Part V	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
b Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		X
c Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	X	
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	X	

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22 X	
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 X	
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	X
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	X
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	X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26	X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	X
28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>	29 X	
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 X	
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
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	X
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	X
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 X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
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	
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	X
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	X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38 X	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck 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 27	
b Enter the number of Forms W-2G included on 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 X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
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	2a	19
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	
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)?	4a	X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
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?	6a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
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?	7a	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	X
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	X
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
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.	13a	
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	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
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.	15	X
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.	16	X
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	17	

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on 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

	1a	16	1b	15	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.						
b Enter the number of voting members included on 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?						X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?						X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?						X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?						X
6 Did the organization have members or stockholders?						X
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?						X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?						X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:						
a The governing body?					X	
b Each committee with authority to act on behalf of the governing body?					X	
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 on Schedule O						X

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

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?		X
b 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?	X	
b Describe on 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	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
13 Did the organization have a written whistleblower policy?	X	
14 Did the organization have a written document retention and destruction policy?	X	
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?		
a The organization's CEO, Executive Director, or top management official	X	
b Other officers or key employees of the organization	X	
If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
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?		X
b 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

17 List the states with which a copy of this Form 990 is required to be filed **NONE**

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 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 on Schedule O)

19 Describe on 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.

LIZ A. KURTT
CEDAR FALLS

3117 GREENHILL CIRCLE

IA 50613

319-287-9106

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and 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.
- See the instructions for the order in which to list the persons above.

☐ 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/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(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) KAYE M. ENGLIN	40.00									
PRESIDENT & CEO	0.00	X		X				244,294	0	7,238
(2) LIZ A. KURTT	40.00									
VP OF FIN & OPER	0.00			X				113,746	0	23,006
(3) ANGELA WIDNER	40.00									
VP COMMUNITY IMPACT	0.00			X				110,628	0	14,917
(4) JAKE BYERS	40.00									
VP OF MKTG. & COMMS.	0.00			X				98,512	0	16,396
(5) RESHONDA YOUNG	0.50									
CHAIR	0.00	X		X				0	0	0
(6) SUSAN SIMS	0.50									
VICE CHAIR	0.00	X		X				0	0	0
(7) MICHELLE JUNGERS	0.50									
SECRETARY	0.00	X		X				0	0	0
(8) MIKE HULME	0.50									
TREASURER	0.00	X		X				0	0	0
(9) TODD HENNINGSEN	0.50									
PAST CHAIR	0.00	X		X				0	0	0
(10) JOY BRISCOE	0.50									
BOARD MEMBER	0.00	X						0	0	0
(11) LAUREN FINKE	0.50									
BOARD MEMBER	0.00	X						0	0	0

Part VII

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

(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/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(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			
(12) MATTHEW GILBERT										
(12) BOARD MEMBER	0.50 0.00	X						0	0	0
(13) ASHLYN JUNGWIRTH										
(13) BOARD MEMBER	0.50 0.00	X						0	0	0
(14) CHAWNE PAIGE										
(14) BOARD MEMBER	0.50 0.00	X						0	0	0
(15) KALOLA ROBY										
(15) BOARD MEMBER	0.50 0.00	X						0	0	0
(16) SCOTT SOIFER										
(16) BOARD MEMBER	0.50 0.00	X						0	0	0
(17) SCOTT THOMSON										
(17) BOARD MEMBER	0.50 0.00	X						0	0	0
(18) MATT WALLER										
(18) BOARD MEMBER	0.50 0.00	X						0	0	0
(19) YOLANDA WILLIAMS										
(19) BOARD MEMBER	0.50 0.00	X						0	0	0
1b Subtotal								567,180		61,557
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								567,180		61,557

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 3

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

0

Part VIII Statement of RevenueCheck 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	12,900					
	c Fundraising events	1c						
	d Related organizations	1d						
	e Government grants (contributions)	1e	2,672,134					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	6,270,207					
	g Noncash contributions included in lines 1a-1f	1g	\$ 260,252					
	h Total. Add lines 1a-1f							8,955,241
	Program Service Revenue			Business Code				
2a								
b								
c								
d								
e								
f All other program service revenue								
g Total. Add lines 2a-2f								
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			2,633,241			2,633,241	
	4 Income from investment of tax-exempt bond proceeds							
	5 Royalties							
	6a Gross rents	6a	(i) Real	(ii) Personal				
	b Less: rental expenses	6b						
	c Rental inc. or (loss)	6c						
	d Net rental income or (loss)							
	7a Gross amount from sales of assets other than inventory	7a	(i) Securities	(ii) Other				
			15,829,186					
	b Less: cost or other basis and sales exps.	7b	12,953,610					
	c Gain or (loss)	7c	2,875,576					
	d Net gain or (loss)			2,875,576			2,875,576	
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a						
	b Less: direct expenses	8b						
	c Net income or (loss) from fundraising events							
	9a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b							
c Net income or (loss) from gaming activities								
10a Gross sales of inventory, less returns and allowances	10a							
b Less: cost of goods sold	10b							
c Net income or (loss) from sales of inventory								
Miscellaneous Revenue			Business Code					
	11a ADMIN FEES - AGENCY FUND		900099	15,703	15,703			
	b MISCELLANEOUS REVENUE		900099	60	60			
	c LOSS ON UNCOLLECTIBLE PROMISE		900099	-28,692	-28,692			
	d All other revenue							
	e Total. Add lines 11a-11d				-12,929			
12 Total revenue. See instructions			14,451,129	-12,929	0	5,508,817		

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 ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	8,198,742	8,198,742		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	651,500	651,500		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	628,737	171,941	388,830	67,966
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	707,359	156,926	395,333	155,100
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	7,498	4,684	2,150	664
9 Other employee benefits	70,941	15,389	41,267	14,285
10 Payroll taxes	95,110	23,885	54,933	16,292
11 Fees for services (nonemployees):				
a Management				
b Legal	22		22	
c Accounting	22,445		22,445	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	182,842		182,842	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	75,357		75,357	
12 Advertising and promotion	104,097		55,518	48,579
13 Office expenses	5,696		5,696	
14 Information technology	68,685		68,685	
15 Royalties				
16 Occupancy	63,222	9,578	47,110	6,534
17 Travel	61,868	10,816	32,826	18,226
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	11,168	2,963	7,408	797
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	77,682	19,554	44,790	13,338
23 Insurance	57,632	4,225	50,525	2,882
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a DUES/MEMBERSHIP FEES	17,435	384	16,249	802
b CREDIT CARD SERVICE FEES	13,446		13,446	
c MISCELLANEOUS	12,247	35	12,121	91
d STATE UNEMPLOYMENT EXP	5,041	1,269	2,907	865
e All other expenses	2,648		2,648	
25 Total functional expenses. Add lines 1 through 24e	11,141,420	9,271,891	1,523,108	346,421
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 ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	498,870	1	99,066
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	450,725	3	162,533
	4 Accounts receivable, net		4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net	665,743	7	634,378
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	22,860	9	34,021
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 2,240,847		
	b Less: accumulated depreciation	10b 662,866		
	11 Investments—publicly traded securities	1,649,754	10c	1,577,981
	12 Investments—other securities. See Part IV, line 11	152,127,599	11	159,850,469
	13 Investments—program-related. See Part IV, line 11		12	
	14 Intangible assets		13	
	15 Other assets. See Part IV, line 11	7,982,883	14	8,670,862
16 Total assets. Add lines 1 through 15 (must equal line 33)	163,398,434	15	171,029,310	
Liabilities	17 Accounts payable and accrued expenses	145,878	17	149,586
	18 Grants payable	1,106,612	18	11,845
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	4,916,176	21	5,211,574
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		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	1,082,330	25	1,121,766
	26 Total liabilities. Add lines 17 through 25	7,250,996	26	6,494,771
	Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here ☒ and complete lines 27, 28, 32, and 33.		
27 Net assets without donor restrictions		29,367,171	27	29,510,748
28 Net assets with donor restrictions		126,780,267	28	135,023,791
Organizations that do not follow FASB ASC 958, check here ☐ and complete lines 29 through 33.				
29 Capital stock or trust principal, or current funds			29	
30 Paid-in or capital surplus, or land, building, or equipment fund			30	
31 Retained earnings, endowment, accumulated income, or other funds			31	
32 Total net assets or fund balances		156,147,438	32	164,534,539
33 Total liabilities and net assets/fund balances		163,398,434	33	171,029,310

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	14,451,129
2	Total expenses (must equal Part IX, column (A), line 25)	2	11,141,420
3	Revenue less expenses. Subtract line 2 from line 1	3	3,309,709
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	156,147,438
5	Net unrealized gains (losses) on investments	5	4,762,973
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 on Schedule O)	9	314,419
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	164,534,539

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: ☐ Cash ☒ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," explain on 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. ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		X
2b	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. ☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis	X	
2c	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 on Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

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 instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public
Inspection

Name of the organization

COMMUNITY FOUNDATION OF NORTHEAST
IOWA

Employer identification number

42-6060414

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).)
- 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 **section 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 on 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		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 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) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	8,544,163	14,439,963	7,850,684	6,935,811	8,955,241	46,725,862
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	8,544,163	14,439,963	7,850,684	6,935,811	8,955,241	46,725,862
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)						2,945,646
6 Public support. Subtract line 5 from line 4						43,780,216

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4	8,544,163	14,439,963	7,850,684	6,935,811	8,955,241	46,725,862
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	3,908,859	1,796,379	1,970,653	2,529,551	2,633,241	12,838,683
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						59,564,545
12 Gross receipts from related activities, etc. (see instructions)					12	71,012

13 First 5 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 2024 (line 6, column (f), divided by line 11, column (f))	14	73.50 %
15 Public support percentage from 2023 Schedule A, Part II, line 14	15	73.09 %
16a 33 1/3% support test — 2024. 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 — 2023. 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 — 2024. 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 — 2023. 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) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(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) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(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 on 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 5 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 2024 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2023 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2023 Schedule A, Part III, line 17	18	%
19a 33 1/3% support tests — 2024. 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 — 2023. 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 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c 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).</i>		
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?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
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? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

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 on lines 11b and 11c below, the governing body of a supported organization?		
11a		
b A family member of a person described on line 11a above?		
11b		
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? 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 officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
1		
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? 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.		
2		

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)? 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).		
1		

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?		
1		
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? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
2		
3 By reason of the relationship described on line 2, above, 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? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
3		

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 ☐ The organization satisfied the Activities Test. Complete line 2 below.			
b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
c ☐ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
2 Activities Test. Answer lines 2a and 2b 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? 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 each of its supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
2a			
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? 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.			
2b			
3 Parent of Supported Organizations. Answer lines 3a and 3b 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? If "Yes" or "No," provide details in Part VI.			
3a			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			
3b			

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

- 1 ☐ 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):		
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 (<i>explain in detail in Part VI</i>):		
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 0.015 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 0.035.	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 0.85 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	☐ 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	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2024 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1 Distributable amount for 2024 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2024 (reasonable cause required—explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2024			
a From 2019			
b From 2020			
c From 2021			
d From 2022			
e From 2023			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2024 distributable amount			
i Carryover from 2019 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2024 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2024 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2025. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2020			
b Excess from 2021			
c Excess from 2022			
d Excess from 2023			
e Excess from 2024			

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.)

Name of the organization COMMUNITY FOUNDATION OF NORTHEAST IOWA	Employer identification number 42-6060414
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Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	☒ 501(c)(3) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	☐ 527 political organization
Form 990-PF	☐ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- ☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☒ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization COMMUNITY FOUNDATION OF NORTHEAST	Employer identification number 42-6060414
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Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 400,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
2		\$ 1,903,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
3		\$ 663,246	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
4		\$ 400,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
5		\$ 2,672,134	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

SCHEDULE C
(Form 990)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2024

Open to Public
Inspection

If the organization answered "Yes" on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then:

- Section 501(c)(3) organizations: Complete Parts I-A and I-B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and I-C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then:

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions), or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization COMMUNITY FOUNDATION OF NORTHEAST IOWA	Employer identification number (EIN) 42-6060414
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for definition of "political campaign activities."
- Political campaign activity expenditures. See instructions \$
- Volunteer hours for political campaign activities. See instructions

Part I-B Complete if the organization is exempt under section 501(c)(3).

- Enter the amount of any excise tax incurred by the organization under section 4955 \$
- Enter the amount of any excise tax incurred by organization managers under section 4955 \$
- If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a Was a correction made? ☐ Yes ☐ No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- Enter the amount directly expended by the filing organization for section 527 exempt function activities \$
- Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$
- Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b \$
- Did the filing organization file Form 1120-POL for this year? ☐ Yes ☐ No
- Enter the names, addresses, and EINs of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990) 2024

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)															
c Total lobbying expenditures (add lines 1a and 1b)															
d Other exempt purpose expenditures															
e Total exempt purpose expenditures (add lines 1c and 1d)															
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.															
<table><thead><tr><th>IF the amount on line 1e, column (a) or (b), is:</th><th>THEN the lobbying nontaxable amount is:</th></tr></thead><tbody><tr><td>not over \$500,000</td><td>20% of the amount on line 1e.</td></tr><tr><td>over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000.</td></tr><tr><td>over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000.</td></tr><tr><td>over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000.</td></tr><tr><td>over \$17,000,000</td><td>\$1,000,000.</td></tr></tbody></table>		IF the amount on line 1e, column (a) or (b), is:	THEN the lobbying nontaxable amount is:	not over \$500,000	20% of the amount on line 1e.	over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	over \$17,000,000	\$1,000,000.		
IF the amount on line 1e, column (a) or (b), is:	THEN the lobbying nontaxable amount is:														
not over \$500,000	20% of the amount on line 1e.														
over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
over \$17,000,000	\$1,000,000.														
g Grassroots nontaxable amount (enter 25% of line 1f)															
h Subtract line 1g from line 1a. If zero or less, enter -0-															
i Subtract line 1f from line 1c. If zero or less, enter -0-															
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?															

☐ Yes ☐ No

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?	X		3,302
j Total. Add lines 1c through 1i			3,302
2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No;" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments, and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?	4	
5 Taxable amount of lobbying and political expenditures. See instructions	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SCHEDULE C, PART II-B, LINE 1

TO HELP EDUCATE LEGISLATORS ON THE IMPORTANCE OF THE ENDOW IOWA PROGRAM IN ORDER TO ENCOURAGE CONTINUATION OF THIS PROGRAM TO HELP BENEFIT THE CHARITABLE NEEDS ALL ACROSS IOWA.

Part IV

Supplemental Information (continued)

Name of the organization COMMUNITY FOUNDATION OF NORTHEAST IOWA	Employer identification number 42-6060414
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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	181	880
2 Aggregate value of contributions to (during year)	1,294,361	7,136,302
3 Aggregate value of grants from (during year)	1,860,078	7,034,011
4 Aggregate value at end of year	31,064,483	124,038,329
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 (for example, recreation or education)	☐ Preservation of a 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 Tax 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 on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, 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 conversation 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 2d 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 FASB 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 FASB 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	\$ 159,705
(ii) Assets included in Form 990, Part X	\$ 6,993,288

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 FASB 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 make significant use of its collection items (check all that apply).

- a** ☒ Public exhibition **d** ☒ Loan or exchange program
b ☒ Scholarly research **e** ☐ Other

c ☒ Preservation for future generations

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.

- c** Beginning balance
d Additions during the year
e Distributions during the year
f Ending balance

	Amount
1c	
1d	
1e	
1f	

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	125,496,584	115,853,639	126,801,570	102,144,415	92,029,800
b Contributions	5,715,842	3,369,691	3,912,053	9,085,402	3,444,605
c Net investment earnings, gains, and losses	8,720,996	8,332,225	-9,180,022	18,069,847	10,583,694
d Grants or scholarships	2,863,166	2,568,392	2,296,172	1,897,279	1,785,558
e Other expenditures for facilities and programs					
f Administrative expenses	3,649,806	-509,421	3,383,790	600,815	2,128,126
g End of year balance	133,420,450	125,496,584	115,853,639	126,801,570	102,144,415

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment %
b Permanent endowment %
c Term endowment **100.00** %

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:

- (i)** Unrelated organizations?
(ii) Related organizations?

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" on line 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		140,349		140,349
b Buildings		1,792,348	423,573	1,368,775
c Leasehold improvements				
d Equipment		287,187	226,715	60,472
e Other		20,963	12,578	8,385
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				1,577,981

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)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, line 12, col. (B))		

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, line 13, col. (B))		

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)	ART COLLECTIONS	6,993,288
(2)	CHARITABLE REMAINDER TRUSTS	1,493,970
(3)	CASH VALUE LIFE INSURANCE	173,252
(4)	ACCRUED INVESTMENT INCOME	10,352
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))		8,670,862

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	
(2)	NOTES PAYABLE	634,378
(3)	SCHOLARSHIP PAYABLE	487,388
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))		1,121,766

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 FASB 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	19,345,612
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	5,077,325
e	Add lines 2a through 2d	2e	5,077,325
3	Subtract line 2e from line 1	3	14,268,287
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	182,842
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	182,842
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	14,451,129

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	10,958,578
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	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	10,958,578
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	182,842
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	182,842
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	11,141,420

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.

PART IV, LINE 2B - ESCROW LIABILITY ARRANGEMENT EXPLANATION

THE FOUNDATION INVESTS FUNDS FOR OTHER ORGANIZATIONS WHICH MAINTAIN COMPLETE DISCRETION OVER THE USE OF ALL OF THESE AGENCY QUASI-ENDOWMENT FUNDS AND AGENCY EXPENDABLE FUNDS HELD AT THE FOUNDATION BY NAMING THEIR ORGANIZATION AS THE SPECIFIED BENEFICIARY OF THOSE FUNDS. ALL FINANCIAL ACTIVITY AND CHARITABLE DISTRIBUTIONS RELATED TO THESE FUNDS ARE RECORDED AS ADJUSTMENTS TO THE LIABILITY AND ARE NOT RECORDED IN REVENUE AND EXPENSES. THE LIABILITY DOES NOT INCLUDE ENDOWMENT FUNDS OF THESE ORGANIZATIONS SINCE DISTRIBUTION OF THOSE FUNDS IS LIMITED BY THE FOUNDATION'S SPENDING POLICY AND THOSE DISTRIBUTIONS MAY NOT INVADE THE ORIGINAL CONTRIBUTION AMOUNT.

PART V, LINE 4 - INTENDED USES FOR ENDOWMENT FUNDS

THE FOUNDATION HAS ADOPTED INVESTMENT AND SPENDING POLICIES FOR ENDOWMENT ASSETS. THOSE POLICIES ATTEMPT TO PROVIDE A PREDICTABLE STREAM OF FUNDING TO PROGRAMS SUPPORTED BY ITS ENDOWMENT FUNDS WHILE ALSO MAINTAINING THE PURCHASING POWER OF THOSE ENDOWMENT ASSETS OVER THE LONG TERM. ACCORDINGLY, THE INVESTMENT PROCESS SEEKS TO ACHIEVE AN AFTER-COST TOTAL REAL RATE OF RETURN, INCLUDING INVESTMENT INCOME, WHICH EXCEEDS THE ANNUAL DISTRIBUTION WITH ACCEPTABLE LEVELS OF RISK. ENDOWMENT ASSETS ARE INVESTED IN A WELL DIVERSIFIED ASSET MIX. INVESTMENT RISK IS MEASURED IN TERMS OF THE TOTAL ENDOWMENT FUND WITH AN ALLOCATION AMONG ASSET CLASSES AND STRATEGIES MANAGED TO PREVENT EXPOSING THE FUNDS TO UNACCEPTABLE LEVELS OF RISK. THE

Part XIII Supplemental Information (continued)

FOUNDATION'S WRITTEN INVESTMENT POLICY IS REQUIRED TO BE FOLLOWED BY ITS INVESTMENT ADVISORS AND CUSTODIANS. THE FOUNDATION HAS A POLICY OF APPROPRIATING FOR DISTRIBUTION EACH YEAR 4% OF ITS ENDOWMENT FUND'S AVERAGE FAIR VALUE BASED UPON AN EIGHT-QUARTER BACK-ROLLING AVERAGE. ENDOWMENT FUNDS MUST BE INVESTED FOR AT LEAST ONE YEAR BEFORE DISTRIBUTIONS ARE AVAILABLE TO BE MADE. ALL DISTRIBUTIONS ARE SUBJECT TO COMPLIANCE WITH THE UNIFORM PRUDENT MANAGEMENT OF INSTITUTIONAL FUNDS ACT (UPMIFA). THE FOUNDATION PARTICIPATES IN THE ENDOW IOWA PROGRAM, WHICH IS ADMINISTERED BY THE IOWA ECONOMIC DEVELOPMENT AUTHORITY THROUGH QUALIFIED COMMUNITY FOUNDATIONS. THE PROGRAM'S PURPOSE IS TO CREATE SUSTAINABLE PHILANTHROPIC OPPORTUNITIES FOR CHARITABLE IMPACT IN IOWA COMMUNITIES. THE LEGISLATION GOVERNING THE PROGRAM MANDATES THAT THE SPENDING POLICY MAY NOT EXCEED 5% OF THE FUND. THE FOUNDATION INTERPRETS THIS AS A RESTRICTION TO ENDOWMENT FUNDS AND HAS CLASSIFIED THESE ENDOWMENT FUNDS AS CONTRIBUTIONS WITH DONOR RESTRICTIONS.

PART X - FIN 48 FOOTNOTE
MANAGEMENT ANNUALLY MAKES AN APPROPRIATE EVALUATION OF ANY UNCERTAIN INCOME TAX POSITIONS BASED UPON CURRENT STATUTES IN COMPLETING THESE CONSOLIDATED FINANCIAL STATEMENTS AND THE NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS. AS OF DECEMBER 31, 2024, MANAGEMENT BELIEVES THAT THERE WERE NO UNCERTAIN INCOME TAX POSITIONS FOR WHICH A MATERIAL CHANGE IN THE UNRECOGNIZED EFFECT WOULD BE REASONABLY POSSIBLE WITHIN THE NEXT 12 MONTHS.

PART XI, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER	
UNREALIZED GAIN ON INVESTMENTS	\$ 4,762,973
UNREALIZED GAIN ON BENEFICIAL INTEREST	\$ 314,352

SCHEDULE I
(Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States
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 instructions and the latest information.

OMB No. 1545-0047

Open to Public
Inspection

Name of the organization

COMMUNITY FOUNDATION OF NORTHEAST
IOWA

Employer identification number

42-6060414

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.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	SEE ATTACHED SCHEDULE			8,198,742				
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 301
- 3 Enter total number of other organizations listed in the line 1 table 113

(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 INDIVIDUAL GRANTS	151	651,500			
2					
3					
4					
5					
6					
7					

**PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS
SEE ATTACHED GRANTMAKING DUE DILIGENCE POLICY.**

SCHEDULE J**(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Name of the organization

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

**Open to Public
Inspection****COMMUNITY FOUNDATION OF NORTHEAST
IOWA**

Employer identification number

42-6060414**Part I Questions Regarding Compensation****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.

- | | |
|--|--|
| ☐ First-class or charter travel | ☐ Housing allowance or residence for personal use |
| ☐ Travel for companions | ☐ Payments for business use of personal residence |
| ☐ Tax indemnification and gross-up payments | ☐ Health or social club dues or initiation fees |
| ☐ Discretionary spending account | ☐ Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on 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**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?**3** Indicate which, if any, of the following the 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.

- | | |
|---|---|
| ☐ Compensation committee | ☐ Written employment contract |
| ☐ Independent compensation consultant | ☒ Compensation survey or study |
| ☒ Form 990 of other organizations | ☒ Approval by the board or compensation committee |

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:**a** Receive a severance payment or change-of-control payment?**b** Participate in or receive payment from a supplemental nonqualified retirement plan?**c** Participate in or receive payment from an equity-based compensation arrangement?

If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.**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:**a** The organization?**b** Any related organization?

If "Yes" on line 5a or 5b, describe in Part III.

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:**a** The organization?**b** Any related organization?

If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III**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**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

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 aren't 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 and/or 1099-NEC 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	KAYE M. ENGLIN PRESIDENT & CEO	(i) 222,144	(ii) 0	(iii) 22,150	6,647	591	251,532	0
		(ii) 0	(ii) 0	(iii) 0	0	0	0	0
2		(i)	(ii)					
3		(i)	(ii)					
4		(i)	(ii)					
5		(i)	(ii)					
6		(i)	(ii)					
7		(i)	(ii)					
8		(i)	(ii)					
9		(i)	(ii)					
10		(i)	(ii)					
11		(i)	(ii)					
12		(i)	(ii)					
13		(i)	(ii)					
14		(i)	(ii)					
15		(i)	(ii)					
16		(i)	(ii)					

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)Department of the Treasury
Internal Revenue Service

Name of the organization

Noncash Contributions

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 instructions and the latest information.

OMB No. 1545-0047

2024**Open To Public
Inspection**

Employer identification number

42-6060414**IOWA****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	X	21	159,705	APPRAISAL
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	7	68,055	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 (LIFE INSURANCE)	X	4	32,492	MARKET VALUE
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 V, Donee Acknowledgement

29

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 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?

	Yes	No
30a		X
31	X	
32a	X	
33		

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?

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

b If "Yes," describe in Part II.

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

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2024

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.

PART I, LINE 32B - THIRD PARTY USED TO PROCESS NONCASH CONTRIBUTIONS
THE FOUNDATION USES BROKERS TO SELL PUBLICLY TRADED SECURITIES AND WATERLOO
CENTER FOR THE ARTS FOR APPRAISAL OF ART ADDITIONS.

SCHEDULE O
(Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

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 Form 990-EZ.

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

OMB No. 1545-0047

Open to Public
Inspection

Name of the organization	COMMUNITY FOUNDATION OF NORTHEAST IOWA	Employer identification number	42-6060414
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FORM 990 - ORGANIZATION'S MISSION
TO INSPIRE PEOPLE AND CONNECT RESOURCES TO ENRICH OUR COMMUNITIES. THE
COMMUNITY FOUNDATION CARRIES OUT THIS MISSION ACROSS ITS 20 COUNTY REGION
BY RESPONDING TO CURRENT AND FUTURE CHARITABLE NEEDS OF THE COMMUNITIES IT
SERVES. THE FOUNDATION RESPONDS BY SUPPORTING NONPROFITS DOING GOOD IN
THEIR COMMUNITIES THROUGH GRANTMAKING AND BY HELPING INDIVIDUALS, FAMILIES
AND BUSINESSES ESTABLISH ENDOWMENT FUNDS TO CREATE LONG-TERM POSITIVE
IMPACT ON THEIR COMMUNITIES AND THE CAUSES THEY ARE PASSIONATE ABOUT. THE
COMMUNITY FOUNDATION ALSO ACTS AS PARTNER AND CONVENER THROUGH
COLLABORATION WITH COMMUNITY AND PHILANTHROPIC LEADERS TO ADDRESS THE
CHALLENGES IN OUR REGION.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
THE FOUNDATION'S BOARD REVIEWS THE FORM 990 BEFORE IT IS FILED.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
CONFLICT OF INTEREST STATEMENTS ARE REQUIRED ANNUALLY. THE PRESIDENT & CEO
REVIEWS THE STATEMENTS AND REPORTS THE RESULTS TO THE BOARD OF DIRECTORS.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL
THE PRESIDENT & CEO'S SALARY IS VOTED BY THE BOARD OF DIRECTORS ANNUALLY.
THE BOARD DOES NOT RECEIVE COMPENSATION.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS
OTHER WAGES ARE DETERMINED PERIODICALLY AND ARE APPROVED BY THE
PRESIDENT & CEO.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
THE FOUNDATION MAKES THESE DOCUMENTS AVAILABLE TO THE PUBLIC UPON
REQUEST.

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION	
UNREALIZED LOSS IN BENEFICIAL INTEREST	\$ 314,352
DECREASE IN ASSETS BY AGENCY	\$ 67
TOTAL	\$ 314,419

SCHEDULE R
(Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Name of the organization

Related Organizations and Unrelated Partnerships

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.

OMB No. 1545-0047

Open to Public
Inspection

COMMUNITY FOUNDATION OF NORTHEAST
IOWA

Employer identification number
42-6060414

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
(1)					
(2)					
(3)					
(4)					
(5)					

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) COMMUNITY FOUNDATION REALTY HOLDING 3117 GREENHILL CIRCLE 42-1444029 CEDAR FALLS IA 50613	SEE PT VII	IA	501C3	12B	SEE PT VII		X
(2)							
(3)							
(4)							
(5)							

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) Dispro- portionate alloc.?		(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	
(1)												
(2)												
(3)												
(4)												

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)									
(2)									
(3)									
(4)									

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.

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

b

Gift, grant, or capital contribution to related organization(s)

c

Gift, grant, or capital contribution from related organization(s)

d

Loans or loan guarantees to or for related organization(s)

e

Loans or loan guarantees by related organization(s)

f

Dividends from related organization(s)

g

Sale of assets to related organization(s)

h

Purchase of assets from related organization(s)

i

Exchange of assets with related organization(s)

j

Lease of facilities, equipment, or other assets to related organization(s)

k

Lease of facilities, equipment, or other assets from related organization(s)

l

Performance of services or membership or fundraising solicitations for related organization(s)

m

Performance of services or membership or fundraising solicitations by related organization(s)

n

Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o

Sharing of paid employees with related organization(s)

p

Reimbursement paid to related organization(s) for expenses

q

Reimbursement paid by related organization(s) for expenses

r

Other transfer of cash or property to related organization(s)

s

Other transfer of cash or property from related organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

1s

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

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)			
(2)			
(3)			
(4)			
(5)			
(6)			

DAA

Schedule R (Form 990) (Rev. 12-2024)

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	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													

Part VII

Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

SCHEDULE R - ADDITIONAL INFORMATION

**PART II, LINE (1)(B) PRIMARY ACTIVITY: COMMUNITY FOUNDATION REALTY HOLDINGS
PRIMARY ACTIVITY IS TO SUPPORT CIVIC AND CHARITABLE ACTIVITIES.**

**PART II, LINE (1)(F) DIRECT CONTROLLING ENTITY: COMMUNITY FOUNDATION OF
NORTHEAST IOWA**

Form **4562**Department of the Treasury
Internal Revenue Service

Name(s) shown on return

Depreciation and Amortization
(Including Information on Listed Property)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

2024Attachment
Sequence No. **179****COMMUNITY FOUNDATION OF NORTHEAST
IOWA**Identifying number
42-6060414

Business or activity to which this form relates

INDIRECT DEPRECIATION**Part I Election To Expense Certain Property Under Section 179****Note:** If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,220,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	3,050,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2023 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2025. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.**Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	77,682

Part III MACRS Depreciation (Don't include listed property. See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2024	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B—Assets Placed in Service During 2024 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2024 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year			30 yrs.	MM	S/L	
d 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	77,682
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

DAA

THERE ARE NO AMOUNTS FOR PAGE 2 Form **4562** (2024)

-*0414

Book Asset Detail 1/01/24 - 12/31/24

Page 1

FYE: 12/31/2024

Asset	d t	Property Description	Date In Service	Book Cost	Book Sec 179 Exp c	Book Sal Value	Book Prior Depreciation	Book Current Depreciation	Book End Depr	Book Net Book Value	Book Method	Book Period
Group: Building												
71		Bertch Cabinets (In-Kind)	1/15/16	63,226.00	0.00	0.00	25,290.40	3,161.30	28,451.70	34,774.30	S/L	20.00
87		Building	1/15/16	1,703,822.58	0.00	0.00	340,764.48	42,595.56	383,360.04	1,320,462.54	S/L	40.00
88		Sign (Nagle)	1/15/16	17,839.90	0.00	0.00	9,514.64	1,189.33	10,703.97	7,135.93	S/L	15.00
110		HVAC Controls Re-Installation	4/30/19	7,460.00	0.00	0.00	870.33	186.50	1,056.83	6,403.17	S/L	40.00
		Building		1,792,348.48	0.00c	0.00	376,439.85	47,132.69	423,572.54	1,368,775.94		
Group: Furniture and Equipment												
37		Printer	2/07/07	2,406.43	0.00	0.00	2,406.43	0.00	2,406.43	0.00	S/L	5.00
39		Fire-wall Box	1/07/07	369.00	0.00	0.00	369.00	0.00	369.00	0.00	S/L	3.00
41		(2) Fireproof 4 Drawer Filing Cabin	1/07/08	2,418.18	0.00	0.00	2,418.18	0.00	2,418.18	0.00	S/L	10.00
44		Cannon Copier/Printer/Scanner IR 3	5/02/08	6,409.30	0.00	0.00	6,409.30	0.00	6,409.30	0.00	S/L	5.00
46		(2) Fire Proof 4 Drawer Verticle Ca	10/03/08	2,522.47	0.00	0.00	2,522.47	0.00	2,522.47	0.00	S/L	10.00
59		Server	3/11/11	3,249.00	0.00	0.00	3,249.00	0.00	3,249.00	0.00	S/L	5.00
60		4 Drawer Fire Proff Filing Cabinet	2/17/12	1,149.20	0.00	0.00	1,149.20	0.00	1,149.20	0.00	S/L	10.00
67		21.5 Inch iMac Computer	12/19/13	1,892.10	0.00	0.00	1,892.10	0.00	1,892.10	0.00	S/L	5.00
73		QNAP TS-870 4LAN	5/14/14	1,299.00	0.00	0.00	1,299.00	0.00	1,299.00	0.00	S/L	5.00
74		13.3" MacBook Pro	6/20/14	2,099.00	0.00	0.00	2,099.00	0.00	2,099.00	0.00	S/L	5.00
75		Newegg Server	11/17/14	4,996.24	0.00	0.00	4,996.24	0.00	4,996.24	0.00	S/L	5.00
77		HP 200 GB 2.5" Internal Solid	1/15/15	1,480.20	0.00	0.00	1,480.20	0.00	1,480.20	0.00	S/L	5.00
78		HP-600GB 1500RPM SAS - 12GPS	1/15/15	2,285.13	0.00	0.00	2,285.13	0.00	2,285.13	0.00	S/L	5.00
79		Apple MCBK 13" 3.0G	1/15/15	2,229.00	0.00	0.00	2,229.00	0.00	2,229.00	0.00	S/L	5.00
80		Apple IMAC 27" 5K 4.0G 16GB 3T	1/15/15	3,128.99	0.00	0.00	3,128.99	0.00	3,128.99	0.00	S/L	5.00
81		Maytag Refrigerator	1/15/16	1,579.95	0.00	0.00	1,264.00	158.00	1,422.00	157.95	S/L	10.00
82		Maytag Electric Wall Oven	1/15/16	1,259.95	0.00	0.00	1,008.00	126.00	1,134.00	125.95	S/L	10.00
84		Patio Furniture (In-Kind)	1/15/16	5,419.00	0.00	0.00	4,335.20	541.90	4,877.10	541.90	S/L	10.00
90		Server Battery Backup	12/21/16	1,283.47	0.00	0.00	898.45	128.35	1,026.80	256.67	S/L	10.00
91		Mac Mini	1/20/16	1,620.77	0.00	0.00	1,283.13	162.08	1,445.21	175.56	S/L	10.00
93		Mac Book Pro	12/21/16	2,824.00	0.00	0.00	2,824.00	0.00	2,824.00	0.00	S/L	5.00
97		Office Furniture	1/15/16	131,736.52	0.00	0.00	105,389.20	13,173.65	118,562.85	13,173.67	S/L	10.00
99		Apple 21.5" iMac Retina 4K Displa	12/08/17	2,129.00	0.00	0.00	2,129.00	0.00	2,129.00	0.00	S/L	5.00
100		Apple 21.5" iMac Retina 4K Displa	12/08/17	2,129.00	0.00	0.00	2,129.00	0.00	2,129.00	0.00	S/L	5.00
101		Apple 21.5" iMac Retina 4K Displa	12/08/17	2,129.00	0.00	0.00	2,129.00	0.00	2,129.00	0.00	S/L	5.00
102		Sonicwall NSA 2650 Wireless	12/28/17	4,354.18	0.00	0.00	4,354.18	0.00	4,354.18	0.00	S/L	5.00
103		Sony A6300 Digital Camera	10/19/18	1,264.55	0.00	0.00	1,264.55	0.00	1,264.55	0.00	S/L	5.00
104		Apple 15.4" MacBook Pro with Tou	12/13/18	2,699.00	0.00	0.00	2,699.00	0.00	2,699.00	0.00	S/L	5.00
106		Apple 21.5" iMac Retina 4K Displa	12/17/18	2,129.00	0.00	0.00	2,129.00	0.00	2,129.00	0.00	S/L	5.00
108		Apple Mac Mini 3.6 GHz Quad-Cor	12/31/18	1,249.00	0.00	0.00	1,249.00	0.00	1,249.00	0.00	S/L	5.00
109		Apple MacBook Laptop 16"	12/31/19	2,412.85	0.00	0.00	1,930.28	482.57	2,412.85	0.00	S/L	5.00
111		Phone System	12/20/19	7,170.59	0.00	0.00	2,868.24	717.06	3,585.30	3,585.29	S/L	10.00
112		Surface Laptop 3 i7	12/30/20	2,463.67	0.00	0.00	1,478.19	492.73	1,970.92	492.75	S/L	5.00
113		Surface Laptop 3 i7	12/30/20	2,463.67	0.00	0.00	1,478.19	492.73	1,970.92	492.75	S/L	5.00
114		SonicWall NSA 2700	12/07/21	4,935.91	0.00	0.00	2,056.63	987.18	3,043.81	1,892.10	S/L	5.00
115		Microsoft Surface 4 - 15" - Core i7	11/30/21	2,400.70	0.00	0.00	1,000.29	480.14	1,480.43	920.28	S/L	5.00
116		Microsoft Surface 4 - 15" - Core i7	11/30/21	2,400.70	0.00	0.00	1,000.29	480.14	1,480.43	920.27	S/L	5.00
117		Conference Room Cabling	9/24/21	3,097.65	0.00	0.00	696.98	309.77	1,006.75	2,090.90	S/L	10.00
118		MacBook Pro 16" Laptop	12/22/22	3,032.25	0.00	0.00	606.45	606.45	1,212.90	1,819.35	S/L	5.00
119		Surface Laptop 5	12/27/22	2,512.65	0.00	0.00	502.53	502.53	1,005.06	1,507.59	S/L	5.00

-*0414

Book Asset Detail 1/01/24 - 12/31/24

Page 2

FYE: 12/31/2024

Asset	d t	Property Description	Date In Service	Book Cost	Book Sec 179 Exp c	Book Sal Value	Book Prior Depreciation	Book Current Depreciation	Book End Depr	Book Net Book Value	Book Method	Book Period
Group: Furniture and Equipment (continued)												
120		Surface Laptop 5	12/27/22	2,512.65	0.00	0.00	502.53	502.53	1,005.06	1,507.59	S/L	5.00
121		Surface Laptop 5	12/27/22	2,512.65	0.00	0.00	502.53	502.53	1,005.06	1,507.59	S/L	5.00
122		Surface Laptop 4	3/24/22	2,657.08	0.00	0.00	929.98	531.42	1,461.40	1,195.68	S/L	5.00
123		Surface Laptop 4	3/24/22	2,657.07	0.00	0.00	929.97	531.41	1,461.38	1,195.69	S/L	5.00
124		Surface Laptop 4	3/24/22	2,657.07	0.00	0.00	929.97	531.41	1,461.38	1,195.69	S/L	5.00
125		Microsoft Teams Rooms System - M	1/01/22	5,091.72	0.00	0.00	2,036.68	1,018.34	3,055.02	2,036.70	S/L	5.00
126		Microsoft Teams Rooms System - X	1/01/22	6,841.72	0.00	0.00	2,736.68	1,368.34	4,105.02	2,736.70	S/L	5.00
127		Ceiling Microphone	1/01/22	3,911.73	0.00	0.00	1,564.70	782.35	2,347.05	1,564.68	S/L	5.00
128		FireKing 4 Drawer Firefile	9/15/22	2,938.90	0.00	0.00	391.85	293.89	685.74	2,253.16	S/L	10.00
129		Interior network cabling for security	2/09/23	1,184.33	0.00	0.00	108.56	118.43	226.99	957.34	S/L	10.00
130		Surface Laptop 5 for Business	4/21/23	2,203.12	0.00	0.00	293.75	440.62	734.37	1,468.75	S/L	5.00
131		Surface Laptop 5 for Business w/ A	12/31/23	2,869.63	0.00	0.00	0.00	573.93	573.93	2,295.70	S/L	5.00
132		Surface Laptop 5 for Business w/ A	12/31/23	2,869.63	0.00	0.00	0.00	573.93	573.93	2,295.70	S/L	5.00
133		Surface Laptop 5 for Business w/ A	12/31/23	2,869.63	0.00	0.00	0.00	573.93	573.93	2,295.70	S/L	5.00
134		Surface Laptop 5 for Business w/ A	12/31/23	2,869.64	0.00	0.00	0.00	573.93	573.93	2,295.71	S/L	5.00
135		Sony VPLHZ61 Projector W/ Scree	8/21/24	5,909.98	0.00c	0.00	0.00	394.00	394.00	5,515.98	S/L	5.00
Furniture and Equipment				<u>287,186.83</u>	<u>0.00c</u>	<u>0.00</u>	<u>197,563.22</u>	<u>29,152.27</u>	<u>226,715.49</u>	<u>60,471.34</u>		
Group: Land												
89		Land	12/31/15	<u>140,349.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>140,349.00</u>	Land	0.00
Land				<u>140,349.00</u>	<u>0.00c</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>140,349.00</u>		
Group: Land Improvements												
98		Landscaping - Irrigation	1/15/16	<u>20,962.64</u>	<u>0.00</u>	<u>0.00</u>	<u>11,180.08</u>	<u>1,397.51</u>	<u>12,577.59</u>	<u>8,385.05</u>	S/L	15.00
Land Improvements				<u>20,962.64</u>	<u>0.00c</u>	<u>0.00</u>	<u>11,180.08</u>	<u>1,397.51</u>	<u>12,577.59</u>	<u>8,385.05</u>		
Grand Total				<u>2,240,846.95</u>	<u>0.00c</u>	<u>0.00</u>	<u>585,183.15</u>	<u>77,682.47</u>	<u>662,865.62</u>	<u>1,577,981.33</u>		

-*0414

Book Future Depreciation FYE: 12/31/25

Page 1

FYE: 12/31/2024

Asset	Property Description	Date In Service	Book Cost	Book Sec 179 Exp	Book Sal Value	Book Prior Depreciation	Book Current Depreciation	Book End Depr	Book Net Book Value	Book Method	Book Period
Group: Building											
71	Bertch Cabinets (In-Kind)	1/15/16	63,226.00	0.00	0.00	28,451.70	3,161.30	31,613.00	31,613.00	S/L	20.00
87	Building	1/15/16	1,703,822.58	0.00	0.00	383,360.04	42,595.56	425,955.60	1,277,866.98	S/L	40.00
88	Sign (Nagle)	1/15/16	17,839.90	0.00	0.00	10,703.97	1,189.33	11,893.30	5,946.60	S/L	15.00
110	HVAC Controls Re-Installation	4/30/19	7,460.00	0.00	0.00	1,056.83	186.50	1,243.33	6,216.67	S/L	40.00
	Building		<u>1,792,348.48</u>	<u>0.00</u>	<u>0.00</u>	<u>423,572.54</u>	<u>47,132.69</u>	<u>470,705.23</u>	<u>1,321,643.25</u>		
Group: Furniture and Equipment											
37	Printer	2/07/07	2,406.43	0.00	0.00	2,406.43	0.00	2,406.43	0.00	S/L	5.00
39	Fire-wall Box	1/07/07	369.00	0.00	0.00	369.00	0.00	369.00	0.00	S/L	3.00
41	(2) Fireproof 4 Drawer Filing Cabin	1/07/08	2,418.18	0.00	0.00	2,418.18	0.00	2,418.18	0.00	S/L	10.00
44	Cannon Copier/Printer/Scanner IR 3	5/02/08	6,409.30	0.00	0.00	6,409.30	0.00	6,409.30	0.00	S/L	5.00
46	(2) Fire Proof 4 Drawer Verticle Ca	10/03/08	2,522.47	0.00	0.00	2,522.47	0.00	2,522.47	0.00	S/L	10.00
59	Server	3/11/11	3,249.00	0.00	0.00	3,249.00	0.00	3,249.00	0.00	S/L	5.00
60	4 Drawer Fire Proff Filing Cabinet	2/17/12	1,149.20	0.00	0.00	1,149.20	0.00	1,149.20	0.00	S/L	10.00
67	21.5 Inch iMac Computer	12/19/13	1,892.10	0.00	0.00	1,892.10	0.00	1,892.10	0.00	S/L	5.00
73	QNAP TS-870 4LAN	5/14/14	1,299.00	0.00	0.00	1,299.00	0.00	1,299.00	0.00	S/L	5.00
74	13.3" MacBook Pro	6/20/14	2,099.00	0.00	0.00	2,099.00	0.00	2,099.00	0.00	S/L	5.00
75	Newegg Server	11/17/14	4,996.24	0.00	0.00	4,996.24	0.00	4,996.24	0.00	S/L	5.00
77	HP 200 GB 2.5" Internal Solid	1/15/15	1,480.20	0.00	0.00	1,480.20	0.00	1,480.20	0.00	S/L	5.00
78	HP-600GB 1500RPM SAS - 12GPS	1/15/15	2,285.13	0.00	0.00	2,285.13	0.00	2,285.13	0.00	S/L	5.00
79	Apple MCBK 13" 3.0G	1/15/15	2,229.00	0.00	0.00	2,229.00	0.00	2,229.00	0.00	S/L	5.00
80	Apple IMAC 27" 5K 4.0G 16GB 3T	1/15/15	3,128.99	0.00	0.00	3,128.99	0.00	3,128.99	0.00	S/L	5.00
81	Maytag Refrigerator	1/15/16	1,579.95	0.00	0.00	1,422.00	157.95	1,579.95	0.00	S/L	10.00
82	Maytag Electric Wall Oven	1/15/16	1,259.95	0.00	0.00	1,134.00	125.95	1,259.95	0.00	S/L	10.00
84	Patio Furniture (In-Kind)	1/15/16	5,419.00	0.00	0.00	4,877.10	541.90	5,419.00	0.00	S/L	10.00
90	Server Battery Backup	12/21/16	1,283.47	0.00	0.00	1,026.80	128.35	1,155.15	128.32	S/L	10.00
91	Mac Mini	1/20/16	1,620.77	0.00	0.00	1,445.21	162.08	1,607.29	13.48	S/L	10.00
93	Mac Book Pro	12/21/16	2,824.00	0.00	0.00	2,824.00	0.00	2,824.00	0.00	S/L	5.00
97	Office Furniture	1/15/16	131,736.52	0.00	0.00	118,562.85	13,173.67	131,736.52	0.00	S/L	10.00
99	Apple 21.5" iMac Retina 4K Displa	12/08/17	2,129.00	0.00	0.00	2,129.00	0.00	2,129.00	0.00	S/L	5.00
100	Apple 21.5" iMac Retina 4K Displa	12/08/17	2,129.00	0.00	0.00	2,129.00	0.00	2,129.00	0.00	S/L	5.00
101	Apple 21.5" iMac Retina 4K Displa	12/08/17	2,129.00	0.00	0.00	2,129.00	0.00	2,129.00	0.00	S/L	5.00
102	Sonicwall NSA 2650 Wireless	12/28/17	4,354.18	0.00	0.00	4,354.18	0.00	4,354.18	0.00	S/L	5.00
103	Sony A6300 Digital Camera	10/19/18	1,264.55	0.00	0.00	1,264.55	0.00	1,264.55	0.00	S/L	5.00
104	Apple 15.4" MacBook Pro with Tou	12/13/18	2,699.00	0.00	0.00	2,699.00	0.00	2,699.00	0.00	S/L	5.00
106	Apple 21.5" iMac Retina 4K Displa	12/17/18	2,129.00	0.00	0.00	2,129.00	0.00	2,129.00	0.00	S/L	5.00
108	Apple Mac Mini 3.6 GHz Quad-Cor	12/31/18	1,249.00	0.00	0.00	1,249.00	0.00	1,249.00	0.00	S/L	5.00
109	Apple MacBook Laptop 16"	12/31/19	2,412.85	0.00	0.00	2,412.85	0.00	2,412.85	0.00	S/L	5.00
111	Phone System	12/20/19	7,170.59	0.00	0.00	3,585.30	717.06	4,302.36	2,868.23	S/L	10.00
112	Surface Laptop 3 i7	12/30/20	2,463.67	0.00	0.00	1,970.92	492.75	2,463.67	0.00	S/L	5.00
113	Surface Laptop 3 i7	12/30/20	2,463.67	0.00	0.00	1,970.92	492.75	2,463.67	0.00	S/L	5.00
114	SonicWall NSA 2700	12/07/21	4,935.91	0.00	0.00	3,043.81	987.18	4,030.99	904.92	S/L	5.00
115	Microsoft Surface 4 - 15" - Core i7	11/30/21	2,400.71	0.00	0.00	1,480.43	480.14	1,960.57	440.14	S/L	5.00
116	Microsoft Surface 4 - 15" - Core i7	11/30/21	2,400.70	0.00	0.00	1,480.43	480.14	1,960.57	440.13	S/L	5.00
117	Conference Room Cabling	9/24/21	3,097.65	0.00	0.00	1,006.75	309.77	1,316.52	1,781.13	S/L	10.00
118	MacBook Pro 16" Laptop	12/22/22	3,032.25	0.00	0.00	1,212.90	606.45	1,819.35	1,212.90	S/L	5.00
119	Surface Laptop 5	12/27/22	2,512.65	0.00	0.00	1,005.06	502.53	1,507.59	1,005.06	S/L	5.00

FYE: 12/31/2024

Asset	Property Description	Date In Service	Book Cost	Book Sec 179 Exp	Book Sal Value	Book Prior Depreciation	Book Current Depreciation	Book End Depr	Book Net Book Value	Book Method	Book Period
Group: Furniture and Equipment (continued)											
120	Surface Laptop 5	12/27/22	2,512.65	0.00	0.00	1,005.06	502.53	1,507.59	1,005.06	S/L	5.00
121	Surface Laptop 5	12/27/22	2,512.65	0.00	0.00	1,005.06	502.53	1,507.59	1,005.06	S/L	5.00
122	Surface Laptop 4	3/24/22	2,657.08	0.00	0.00	1,461.40	531.42	1,992.82	664.26	S/L	5.00
123	Surface Laptop 4	3/24/22	2,657.07	0.00	0.00	1,461.38	531.41	1,992.79	664.28	S/L	5.00
124	Surface Laptop 4	3/24/22	2,657.07	0.00	0.00	1,461.38	531.41	1,992.79	664.28	S/L	5.00
125	Microsoft Teams Rooms System - M	1/01/22	5,091.72	0.00	0.00	3,055.02	1,018.34	4,073.36	1,018.36	S/L	5.00
126	Microsoft Teams Rooms System - X	1/01/22	6,841.72	0.00	0.00	4,105.02	1,368.34	5,473.36	1,368.36	S/L	5.00
127	Ceiling Microphone	1/01/22	3,911.73	0.00	0.00	2,347.05	782.35	3,129.40	782.33	S/L	5.00
128	FireKing 4 Drawer Firefile	9/15/22	2,938.90	0.00	0.00	685.74	293.89	979.63	1,959.27	S/L	10.00
129	Interior network cabling for security	2/09/23	1,184.33	0.00	0.00	226.99	118.43	345.42	838.91	S/L	10.00
130	Surface Laptop 5 for Business	4/21/23	2,203.12	0.00	0.00	734.37	440.62	1,174.99	1,028.13	S/L	5.00
131	Surface Laptop 5 for Business w/ A	12/31/23	2,869.63	0.00	0.00	573.93	573.93	1,147.86	1,721.77	S/L	5.00
132	Surface Laptop 5 for Business w/ A	12/31/23	2,869.63	0.00	0.00	573.93	573.93	1,147.86	1,721.77	S/L	5.00
133	Surface Laptop 5 for Business w/ A	12/31/23	2,869.63	0.00	0.00	573.93	573.93	1,147.86	1,721.77	S/L	5.00
134	Surface Laptop 5 for Business w/ A	12/31/23	2,869.64	0.00	0.00	573.93	573.93	1,147.86	1,721.78	S/L	5.00
135	Sony VPLHZ61 Projector W/ Scree	8/21/24	5,909.98	0.00	0.00	394.00	1,182.00	1,576.00	4,333.98	S/L	5.00
Furniture and Equipment			287,186.83	0.00	0.00	226,715.49	29,457.66	256,173.15	31,013.68		
Group: Land											
89	Land	12/31/15	140,349.00	0.00	0.00	0.00	0.00	0.00	140,349.00	Land	0.00
Land			140,349.00	0.00	0.00	0.00	0.00	0.00	140,349.00		
Group: Land Improvements											
98	Landscaping - Irrigation	1/15/16	20,962.64	0.00	0.00	12,577.59	1,397.51	13,975.10	6,987.54	S/L	15.00
Land Improvements			20,962.64	0.00	0.00	12,577.59	1,397.51	13,975.10	6,987.54		
Grand Total			2,240,846.95	0.00	0.00	662,865.62	77,987.86	740,853.48	1,499,993.47		

Form 990/990-PF	Electronic Filing - PDF Attachment Report	2024
For calendar year 2024, or tax year beginning , and ending		

Name COMMUNITY FOUNDATION OF NORTHEAST IOWA	Taxpayer Identification Number 42-6060414
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Title	Attachment Source	Proforma
MANUALLY ATTACHED TO RETURN COMMUNITY FOUNDATION OF NE IOWA SCHEDULE I DETAIL	G:\DATA\TAX__2024 ELECTRONIC FILING ATTACHMENTS\11642CFW COMMUNITY FOUNDATION OF NORTHEAST IOWA_2024 SCH I.PDF	NO

Form 990		Two Year Comparison Report		2023 & 2024	
		For calendar year 2024, or tax year beginning		, ending	
Name COMMUNITY FOUNDATION OF NORTHEAST IOWA				Taxpayer Identification Number 42-6060414	
			2023	2024	Differences
Revenue	1. Contributions, gifts, grants	1.	4,215,080	6,270,207	2,055,127
	2. Membership dues and assessments	2.	19,200	12,900	-6,300
	3. Government contributions and grants	3.	2,701,531	2,672,134	-29,397
	4. Program service revenue	4.			
	5. Investment income	5.	2,529,551	2,633,241	103,690
	6. Proceeds from tax exempt bonds	6.			
	7. Net gain or (loss) from sale of assets other than inventory	7.	7,135,646	2,875,576	-4,260,070
	8. Net income or (loss) from fundraising events	8.			
	9. Net income or (loss) from gaming	9.			
	10. Net gain or (loss) on sales of inventory	10.			
	11. Other revenue	11.	17,750	-12,929	-30,679
	12. Total revenue. Add lines 1 through 11	12.	16,618,758	14,451,129	-2,167,629
Expenses	13. Grants and similar amounts paid	13.	8,943,240	8,850,242	-92,998
	14. Benefits paid to or for members	14.			
	15. Compensation of officers, directors, trustees, etc.	15.	476,966	628,737	151,771
	16. Salaries, other compensation, and employee benefits	16.	883,392	880,908	-2,484
	17. Professional fundraising fees	17.			
	18. Other professional fees	18.	258,539	280,666	22,127
	19. Occupancy, rent, utilities, and maintenance	19.	66,679	63,222	-3,457
	20. Depreciation and Depletion	20.	76,217	77,682	1,465
	21. Other expenses	21.	346,853	359,963	13,110
	22. Total expenses. Add lines 13 through 21	22.	11,051,886	11,141,420	89,534
	23. Excess or (Deficit). Subtract line 22 from line 12	23.	5,566,872	3,309,709	-2,257,163
Other Information	24. Total exempt revenue	24.	16,618,758	14,451,129	-2,167,629
	25. Total unrelated revenue	25.			
	26. Total excludable revenue	26.	9,682,947	5,495,888	-4,187,059
	27. Total assets	27.	163,398,434	171,029,310	7,630,876
	28. Total liabilities	28.	7,250,996	6,494,771	-756,225
	29. Retained earnings	29.	156,147,438	164,534,539	8,387,101
	30. Number of voting members of governing body	30.	17	16	
	31. Number of independent voting members of governing body	31.	16	15	
32. Number of employees	32.	20	19		
33. Number of volunteers	33.	450	450		

Form 990	Tax Return History	2024
Name COMMUNITY FOUNDATION OF NORTHEAST IOWA		Employer Identification Number 42-6060414

	2020	2021	2022	2023	2024	2025
Contributions, gifts, grants	8,523,863	14,420,588	7,833,633	6,916,611	8,942,341	
Membership dues	20,300	19,375	17,051	19,200	12,900	
Program service revenue						
Capital gain or loss	2,404,619	7,965,078	1,490,046	7,135,646	2,875,576	
Investment income	3,908,859	1,796,379	1,970,653	2,529,551	2,633,241	
Fundraising revenue (income/loss)						
Gaming revenue (income/loss)						
Other revenue	33,589	40,126	-7,524	17,750	-12,929	
Total revenue	14,891,230	24,241,546	11,303,859	16,618,758	14,451,129	
Grants and similar amounts paid	5,902,500	6,784,684	7,615,196	8,943,240	8,850,242	
Benefits paid to or for members						
Compensation of officers, etc.	286,513	305,073	412,326	476,966	628,737	
Other compensation	724,350	772,411	802,287	883,392	880,908	
Professional fees	206,444	278,796	343,455	258,539	280,666	
Occupancy costs	39,257	46,925	80,426	66,679	63,222	
Depreciation and depletion	72,185	73,002	76,511	76,217	77,682	
Other expenses	211,443	282,707	331,533	346,853	359,963	
Total expenses	7,442,692	8,543,598	9,661,734	11,051,886	11,141,420	
Excess or (Deficit)	7,448,538	15,697,948	1,642,125	5,566,872	3,309,709	
Total exempt revenue	14,891,230	24,241,546	11,303,859	16,618,758	14,451,129	
Total unrelated revenue						
Total excludable revenue	6,347,067	9,801,583	3,453,175	9,682,947	5,495,888	
Total Assets	134,942,312	163,015,524	156,432,405	163,398,434	171,029,310	
Total Liabilities	4,204,909	5,327,093	6,079,788	7,250,996	6,494,771	
Net Fund Balances	130,737,403	157,688,431	150,352,617	156,147,438	164,534,539	