

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	<div>*****</div> <div>Signature of officer</div> <div>2019-06-03</div> <div>Date</div>
	<div>MATT VARILEK PRESIDENT</div> <div>Type or print name and title</div>
Paid Preparer Use Only	<div>Print/Type preparer's name</div> <div>Preparer's signature</div> <div>Date 2019-06-03</div> <div>Check <input type="checkbox"/> if self-employed</div> <div>PTIN P00066049</div>
	<div>Firm's name ▶ SCHLENNER WENNER & CO CPA'S PA</div> <div>Firm's EIN ▶ 41-1656121</div>
	<div>Firm's address ▶ 630 ROOSEVELT RD STE 201</div> <div>ST CLOUD, MN 56301</div> <div>Phone no (320) 251-0286</div>

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission

TO EMPOWER PEOPLE TO BUILD THRIVING COMMUNITIES AND A VIBRANT REGION ACROSS CENTRAL MINNESOTA

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 \$	1,628,267	including grants of \$	749,777	(Revenue \$	58,533)
See Additional Data							

4b	(Code)	(Expenses \$	624,279	including grants of \$	192,129	(Revenue \$	675,722)
See Additional Data							

4c	(Code)	(Expenses \$	434,323	including grants of \$		(Revenue \$)
See Additional Data							

	(Code)	(Expenses \$	1,597,421	including grants of \$	1,233,194	(Revenue \$	6,010)
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ADMINISTRATIVE THE FOUNDATION'S FINANCIAL POSITION IS STRONG. THE ORGANIZATION'S ENDOWMENT TOTALLED \$48.7 MILLION THIS YEAR WHILE THE LENDING PORTFOLIO ENDED THE YEAR AT \$13.9 MILLION. NET ASSETS EQUAL \$64.2 MILLION. ENDOWED ASSETS INCLUDE \$10.4 MILLION ASSOCIATED WITH DESIGNATED COMPONENT FUNDS AND \$38.3 MILLION OF GENERAL ASSET ENDOWMENT ASSETS. THE FOUNDATION'S SPENDING POLICY GUIDES ENDOWMENT USE. AN ALLOCATION OF 5 PERCENT IS DRAWN FROM GENERAL ENDOWMENT EACH YEAR TO SUPPORT PROGRAMS AND OPERATIONS. CURRENTLY, THIS AMOUNT IS NEARLY \$2.0 MILLION OF THE \$6.1 MILLION ANNUAL BUDGET (WHICH EXCLUDES LOAN ACTIVITY). OTHER SIGNIFICANT FUNDING SOURCES ARE PROVIDED BY MCKNIGHT FOUNDATION (\$1.1 MILLION) AND OTHER FOUNDATION, STATE AND FEDERAL GRANTS, ALONG WITH A SMALL AMOUNT OF EARNED INCOME. THE FOUNDATION ENDED 2018 AT 96 PERCENT OF BUDGET FOR TOTAL SOURCES OF FUNDS AND 92 PERCENT FOR TOTAL USES OF FUNDS. LOSSES ASSOCIATED WITH THE FOUNDATION'S INVESTMENTS IN PUBLICLY TRADED SECURITIES DURING THE 4TH QUARTER OF 2018 RESULTED IN AN ANNUAL RETURN OF -6.72%, ALTHOUGH MUCH OF THIS WAS RECOVERED IN EARLY 2019. THE INITIATIVE FOUNDATION CONTINUES TO SEEK GRANT FUNDING RESOURCES FROM A VARIETY OF PUBLIC AND PRIVATE ENTITIES FOR PROGRAM SUPPORT AND OPERATIONS.

4d	Other program services (Describe in Schedule O)						
	(Expenses \$	1,597,421	including grants of \$	1,233,194	(Revenue \$	6,010)

4e	Total program service expenses	1,597,421	including grants of \$	1,233,194	(Revenue \$	6,010)
		4,284,290					

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	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2 Yes	
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	3	No
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	4	No
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 Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	No
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	6 Yes	
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	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	No
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	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10 Yes	
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	11a Yes	
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	11b Yes	
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	11c	No
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	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	No
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	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a Yes	
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	12b	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
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	14b	No
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	15	No
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	16	No
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)	17	No
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	18 Yes	
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	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
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	21 Yes	
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? If "Yes," complete Schedule I, Parts I and III	22 Yes	

Part IV Checklist of Required Schedules (continued)

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

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		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	

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	33			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				2b	Yes	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?				3a	Yes	
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O				3b	Yes	
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		No
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		No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?				5b		No
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		No
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	Yes	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?				7b	Yes	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?				7c		No
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		No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?				7f		No
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?				7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?				7h		
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		
9a Did the sponsoring organization make any taxable distributions under section 4966?				9a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?				9b		
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?						
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		No
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in 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		No
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		No

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

Section A. Governing Body and Management

		Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	1a 14		
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 in Schedule O			
b Enter the number of voting members included in line 1a, above, who are independent	1b 14		
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?	2	Yes	
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6 Did the organization have members or stockholders?	6		No
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?	7a		No
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a The governing body?	8a	Yes	
b Each committee with authority to act on behalf of the governing body?	8b	Yes	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

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?	10a	No
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?	10b	
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a Yes	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a Yes	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b Yes	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c Yes	
13 Did the organization have a written whistleblower policy?	13 Yes	
14 Did the organization have a written document retention and destruction policy?	14 Yes	
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	15a Yes	
b Other officers or key employees of the organization	15b Yes	
If "Yes" to line 15a or 15b, describe the process in 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?	16a	No
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?	16b	

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed: MN

18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records
 ▶ LYNN BUSHINGER 405 FIRST STREET SE LITTLE FALLS, MN 56345 (320) 632-9255

Part VII**Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Check if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) BRETT ANDERSON TRUSTEE	1 00	X						0	0	0
(2) CHARLES BLACK LANCE TRUSTEE	1 00	X						0	0	0
(3) DAVID MONROY TRUSTEE	1 00	X						0	0	0
(4) JESSICA BITZ TRUSTEE	1 00	X						0	0	0
(5) JOE NAYQUONABE JR TRUSTEE	1 00	X						0	0	0
(6) JOHN E BABCOCK TRUSTEE/CHAIR	2 00	X		X				0	0	0
(7) JULIE NELSON TRUSTEE	1 00	X						0	0	0
(8) KIM ELLINGSON TRUSTEE	1 00	X						0	0	0
(9) KRISTI WESTBROCK TRUSTEE	1 00	X						0	0	0
(10) RICK BAUERLY TRUSTEE	1 00	X						0	0	0
(11) ROBBYN WACKER TRUSTEE	1 00	X						0	0	0
(12) SANTO CRUZ TRUSTEE	1 00	X						0	0	0
(13) STEVE SHURTS TRUSTEE	1 00	X						0	0	0
(14) TRACI TAPANI TRUSTEE/VICE-CHAIR	2 00	X		X				0	0	0
(15) MATT VARILEK PRESIDENT	40 00			X				176,738	0	27,548
(16) LYNN BUSHINGER COO/CFO/TREASURER	40 00			X				108,301	0	21,127

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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								285,039	0	48,675

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 **▶ 5**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
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>	Yes	
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>		No

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 Revenue

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

	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
<div>Contributions, Gifts, Grants and Other Similar Amounts</div> <div><div>1a</div>Federated campaigns<div>1a</div></div> <div><div>b</div>Membership dues<div>1b</div></div> <div><div>c</div>Fundraising events<div>1c</div>86,411</div> <div><div>d</div>Related organizations<div>1d</div></div> <div><div>e</div>Government grants (contributions)<div>1e</div>1,875,332</div> <div><div>f</div>All other contributions, gifts, grants, and similar amounts not included above<div>1f</div>4,087,816</div> <div><div>g</div>Noncash contributions included in lines 1a - 1f \$5,037</div> <div><div>h</div>Total. Add lines 1a-1f▶6,049,559</div>				

Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)▶	1,319,699			1,319,699	
	4	Income from investment of tax-exempt bond proceeds▶					
	5	Royalties▶					
	6a	Gross rents	(i) Real	(ii) Personal			
			6,010				
		b Less rental expenses	0				
		c Rental income or (loss)	6,010				
	d	Net rental income or (loss)▶	6,010	6,010			
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
			22,816,842				
		b Less cost or other basis and sales expenses	21,785,602				
		c Gain or (loss)	1,031,240				
	d	Net gain or (loss)▶	1,031,240			1,031,240	
	8a	Gross income from fundraising events (not including \$ 86,411 of contributions reported on line 1c) See Part IV, line 18a	130,646				
		b Less direct expensesb	57,567				
		c Net income or (loss) from fundraising events▶	73,079			73,079	
	9a	Gross income from gaming activities See Part IV, line 19a					
b Less direct expensesb							
c Net income or (loss) from gaming activities▶							
10a	Gross sales of inventory, less returns and allowancesa						
	b Less cost of goods soldb						
	c Net income or (loss) from sales of inventory▶						
	Miscellaneous Revenue	Business Code					
11a	ADVERTISING	541860	50,634		50,634		
b	OTHER INCOME	900099	8,143			8,143	
c							
d	All other revenue						
e	Total. Add lines 11a-11d▶		58,777				
12	Total revenue. See Instructions▶		9,272,619	740,265	50,634	2,432,161	

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.	1,803,554	1,803,554		
2 Grants and other assistance to domestic individuals. See Part IV, line 22.	371,546	371,546		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	341,908	80,321	199,160	62,427
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.	1,606,364	899,419	446,579	260,366
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	66,166	37,554	18,679	9,933
9 Other employee benefits.	250,338	127,252	88,235	34,851
10 Payroll taxes.	131,228	68,549	41,213	21,466
11 Fees for services (non-employees):				
a Management.				
b Legal.	9,651	5,489	4,162	
c Accounting.	25,189		25,189	
d Lobbying.				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.	95,838		95,838	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	271,861	247,418	22,502	1,941
12 Advertising and promotion.	38,489	27,103	7,225	4,161
13 Office expenses.	70,371	38,295	18,190	13,886
14 Information technology.	193,319	101,721	64,820	26,778
15 Royalties.				
16 Occupancy.	81,616	41,869	27,415	12,332
17 Travel.	44,550	27,862	11,475	5,213
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	21,754	12,868	7,794	1,092
20 Interest.	37,750	37,750		
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	76,343	41,643	23,934	10,766
23 Insurance.	12,294	6,307	4,129	1,858
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
a ALL OTHER EXPENSES	258,365	203,278	51,940	3,147
b BAD DEBTS	67,506	67,038	19	449
c VOLUNTEER TRAVEL & TRAI	26,984	26,984		
d MEMBERSHIPS/SPONSORSHIP	19,217	10,470	5,451	3,296
e All other expenses	2,025		2,025	
25 Total functional expenses. Add lines 1 through 24e.	5,924,226	4,284,290	1,165,974	473,962
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	2,206,169	1	2,255,464
	2 Savings and temporary cash investments	1,109,229	2	725,702
	3 Pledges and grants receivable, net	1,086,081	3	1,607,756
	4 Accounts receivable, net	68,566	4	45,583
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net	8,556,234	7	9,239,986
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	78,934	9	77,407
	10a Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D	10a 3,005,414		
	b Less: accumulated depreciation	10b 1,280,326		
		1,801,542	10c	1,725,088
	11 Investments—publicly traded securities	54,806,354	11	51,072,608
	12 Investments—other securities. See Part IV, line 11	4,287,704	12	4,845,508
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets. See Part IV, line 11		15		
16 Total assets. Add lines 1 through 15 (must equal line 34)	74,000,813	16	71,595,102	
Liabilities	17 Accounts payable and accrued expenses	397,008	17	399,066
	18 Grants payable	1,549,922	18	985,313
	19 Deferred revenue	1,060,614	19	1,566,734
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	599,498	21	1,076,581
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	1,356,755	23	1,237,075
	24 Unsecured notes and loans payable to unrelated third parties	2,476,648	24	2,097,131
	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		25	
	26 Total liabilities. Add lines 17 through 25	7,440,445	26	7,361,900
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	36,475,135	27	33,341,962
	28 Temporarily restricted net assets	8,849,536	28	8,870,687
	29 Permanently restricted net assets	21,235,697	29	22,020,553
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	66,560,368	33	64,233,202	
34 Total liabilities and net assets/fund balances	74,000,813	34	71,595,102	

Part XI Reconciliation of Net AssetsCheck 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	9,272,619
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,924,226
3	Revenue less expenses Subtract line 2 from line 1	3	3,348,393
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	66,560,368
5	Net unrealized gains (losses) on investments	5	-5,675,559
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	64,233,202

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

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

Additional Data

Software ID:**Software Version:**

EIN: 36-3451562

Name: INITIATIVE FOUNDATION

Form 990 (2018)

Form 990, Part III, Line 4a:

COMMUNITY AND NONPROFIT DEVELOPMENT EARLY CHILDHOOD INITIATIVE IN 2018, THE INITIATIVE FOUNDATION SUPPORTED 12 EARLY CHILDHOOD COALITIONS WITHIN ITS REGION. A LARGE NUMBER OF COMMUNITIES CONTINUE TO FACE SIGNIFICANT ECONOMIC CHALLENGES WITH HIGHER-THAN-AVERAGE NUMBERS OF CHILDREN AND FAMILIES LIVING IN POVERTY. AFFECTED AREAS INCLUDE BENTON, CASS, CROW WING, KANABEC, MILLE LACS, PINE, TODD AND WADENA COUNTIES. COALITIONS ARE OFFERED A VARIETY OF OPPORTUNITIES TO PARTICIPATE IN STRATEGIC PLANNING SESSIONS, LEADERSHIP TRAINING AND EARLY CHILDHOOD TOPIC-SPECIFIC TRAINING. COALITIONS DRAW FROM DIFFERENT SECTORS OF THE COMMUNITY AND INCLUDE PARTICIPATION FROM PARENTS, BUSINESS LEADERS, EDUCATORS, ELECTED OFFICIALS, EARLY CARE AND EDUCATION PROVIDERS, NONPROFIT ORGANIZATIONS AND HEALTH CARE PROVIDERS. PRIMARY ACTIVITIES FOCUS ON EARLY CHILDHOOD LITERACY, SOCIAL EMOTIONAL ADJUSTMENT AND SCHOOL READINESS. GREATER ST. CLOUD AREA THRIVE COALITION IS ONE OF THE SUPPORTED COMMUNITY COALITIONS. THE COLLABORATIVE WAS DEVELOPED TO PROMOTE THE HEALTHY SOCIAL AND EMOTIONAL DEVELOPMENT OF CHILDREN FROM BIRTH TO AGE 5, WITH AN EMPHASIS ON BIRTH TO AGE 3. THRIVE CURRENTLY OFFERS CO-LEARNING OPPORTUNITIES BETWEEN EARLY CHILDHOOD STAFF AND IMMIGRANT AND REFUGEE PARENTS TO EXPLORE PARENTING CONCERNS. AN EXPANDED WEBSITE INCLUDES RESOURCES ON HEALTHY SOCIAL AND EMOTIONAL DEVELOPMENT AND RESOURCES SPECIFIC TO IMMIGRANT AND REFUGEE FAMILIES. FOUNDATION STAFF PROVIDED TRAINING TO REGIONAL EARLY CHILDHOOD INITIATIVE COORDINATORS ON FUNDRAISING IDEAS TO SUPPORT COALITION GOALS, ADVERSE CHILDHOOD EXPERIENCES (ACES) PROGRAMMING, AMERICORPS VISTA OPPORTUNITIES, SCHOLASTIC BOOKS PURCHASING OPPORTUNITIES AND UPDATES ON THE EARLY CHILDHOOD DENTAL NETWORK. IN 2018, THE INITIATIVE FOUNDATION MADE EARLY CHILDHOOD GRANT AWARDS TOTALING \$119,500. OUR EARLY CHILDHOOD DENTAL NETWORK (ECDN) CAVITY FREE BIRTH TO AGE 5 PROGRAM SUPPORTED LOCAL PROJECTS THAT PROVIDE DENTAL HYGIENE, CAVITY PREVENTION AND DENTAL TREATMENT FOR CHILDREN IN POVERTY IN MILLE LACS COUNTY. THE FOUNDATION ALSO IS WORKING WITH CENTRAL LAKES COMMUNITY COLLEGE IN BRAINERD AND ST. CLOUD TECHNICAL AND COMMUNITY COLLEGE TO SUPPORT RECRUITMENT, RETENTION, GRADUATION AND PLACEMENT OF DIVERSE STUDENTS IN DENTAL HYGIENE CAREERS. IN 2018, THE INITIATIVE FOUNDATION MADE EARLY CHILDHOOD DENTAL GRANT AWARDS TOTALING \$20,000. THRIVING COMMUNITIES INITIATIVE (TCI) INITIATIVE FOUNDATION STAFF CONTINUED THEIR SUPPORT OF TCI COMMUNITIES OF MENAHA, HACKENSACK, EDEN VALLEY, MILACA, AVON, AND COLD SPRING. FOUNDATION STAFF PROVIDED TECHNICAL ASSISTANCE TO COMMUNITIES ON ISSUES RANGING FROM WORKFORCE DEVELOPMENT, FINANCING FOR COMMUNITY FACILITIES, TRAILS DEVELOPMENT AND LOCAL FOODS. STAFF CONTINUED WORK ON HELPING THE CITY OF BECKER/SHERBURNE COUNTY PREPARE FOR THE DECOMMISSIONING OF THE SHERBURNE COUNTY COAL GENERATION FACILITY, THE LARGEST COAL PLANT IN THE MIDWEST. EFFECTS TO DIVERSIFY THE BECKER ECONOMY HAVE RESULTED IN GROUND BREAKING FOR A NEW NORTHERN METALS RECYCLING FACILITY (PROJECTED WORKFORCE OF 150) AND EXPLORATION OF THE OPPORTUNITY TO HOST A GOOGLE DATA CENTER TO SERVE THE UPPER MIDWEST. IN 2018, THE INITIATIVE FOUNDATION MADE COMMUNITY DEVELOPMENT GRANT AWARDS TOTALING \$29,500. WE CONTINUE TO PARTICIPATE IN THE PHILANTHROPIC PREPAREDNESS, RESILIENCY, AND EMERGENCY PARTNERSHIP (PPREP) COLLABORATION THAT HELPS TO BUILD THE CAPACITY OF COMMUNITY FOUNDATIONS TO SUPPORT HOMETOWNS IN TIMES OF CRISIS. HEALTHY LAKES AND RIVERS PARTNERSHIP (HLRP) THE FOUNDATION CONTINUES TO ADMINISTER \$4.0 MILLION IN FUNDING FROM THE LESSARD-SAMS OUTDOOR HERITAGE COUNCIL TO SUPPORT INNOVATIVE PILOT PROJECTS THAT PREVENT THE SPREAD OF AQUATIC INVASIVE SPECIES (AIS). FIFTEEN OF SIXTEEN FUNDED PROJECTS REMAIN ACTIVE. PROJECTS RANGE FROM DEPLOYING AN INTEGRATED PEST MANAGEMENT (IPM) STRATEGY FOR TREATMENT OF EURASIAN WATERMILFOIL IN WASHINGTON COUNTY TO DEPLOYING A COMBINATION OF MECHANICAL AND CHEMICAL TREATMENT OF STARRY STONEWORT (A RAPIDLY SPREADING ALGAE) AT LAKE KORONIS IN STEARNS COUNTY. IN CASS COUNTY, INSPECTORS ARE TRAINED TO "DE-ESCALATE" CONFRONTATIONS WITH RECREATIONISTS AND TO ENCOURAGE GOOD STEWARDSHIP WITHOUT INCITING RESISTANCE OR RESENTMENT. VOYAGEURS NATIONAL PARK IS WORKING WITH NATIVE AMERICAN COMMUNITIES TO RESTORE NATIVE CATTAILS WHILE CURTAILING AN INVASIVE HYBRID. THESE EXAMPLES REFLECT THE DIVERSITY OF EFFORTS THAT LOCAL PARTNERS ARE LEADING, AND WHICH HAVE RECEIVED COMMITMENTS OF UP TO \$3.5 MILLION FROM THE FOUNDATION THROUGH JUNE 2019. GRANTMAKING AND SPECIAL INITIATIVES THE INITIATIVE FOUNDATION AWARDED \$2.0 MILLION IN GRANTS, SCHOLARSHIPS AND FELLOWSHIPS TO 250 ORGANIZATIONS FOR ALL PROGRAMS IN AGGREGATE. THE FOUNDATION IS IN ITS NINTH YEAR OF CO-FACILITATING THE GREATER ST. CLOUD COMMUNITY PILARS PROCESS IN PARTNERSHIP WITH THE CENTRAL MINNESOTA COMMUNITY FOUNDATION, ST. CLOUD STATE UNIVERSITY, TIMES MEDIA (ST. CLOUD TIMES), MORGAN FAMILY FOUNDATION, UNITED WAY OF CENTRAL MINNESOTA AND CENTRACARE FOUNDATION. THE INITIATIVE HAS ELEVATED ISSUES SUCH AS DEVELOPING PATHWAYS OUT OF POVERTY, WELCOMING IMMIGRANTS AND REFUGEES, SUPPORTING CRADLE-TO-CAREER WORKFORCE TRAINING AND EDUCATION, LAUNCHING A REGIONAL AQUATIC CENTER AND RECOGNIZING THE MISSISSIPPI RIVER AS A KEY ECOLOGICAL, RECREATIONAL AND CULTURAL ASSET FOR THE REGION. NONPROFIT DEVELOPMENT INITIATIVE FOUNDATION STAFF PILOTED ITS FIRST COHORT OF NONPROFITS PARTICIPATING IN THE FOUNDATION'S FINANCIAL RESILIENCY PROGRAM THAT OFFERED TWO TRACKS OF PROGRAMMING, ONE FOCUSED ON CLARIFYING AND REFINING YOUR NONPROFIT BUSINESS MODEL AND THE SECOND FOCUSED EXCLUSIVELY ON DONOR DEVELOPMENT. WITH GUIDANCE AND SUPPORT FROM FOUNDATION STAFF, VARIOUS OTHER NONPROFIT TRAINING PARTNERS AND BUSINESS AND MARKETING CONSULTANTS, A TOTAL OF 19 ORGANIZATIONS (INVOLVING 58 INDIVIDUALS) PARTICIPATED IN THESE TWO YEAR-LONG PROGRAMS ADVANCING THEIR FUNDRAISING, FINANCIAL MANAGEMENT, LEADERSHIP, MARKETING, AND PROGRAMMING CAPACITY. FOUNDATION STAFF AND CONSULTANTS FACILITATED FOUR LEADERS CIRCLES FOR NONPROFITS. ONE OF THE GROUPS MET IN BRAINERD AND THE OTHER THREE MET IN ST. CLOUD WITH FIFTEEN EXECUTIVE DIRECTORS AND FOUR PROGRAM MANAGERS, REPRESENTING 19 ORGANIZATIONS, PARTICIPATING IN THESE PEER-COACHING CIRCLES BUILD LEADERSHIP SKILLS/ABILITIES, HELP MEMBERS IDENTIFY CONSTRUCTIVE STEPS FOR RESOLVING WORK CHALLENGES, AND DECREASE PROFESSIONAL ISOLATION. MOST LEADERS CIRCLE MEMBERS REPORTED GAINING NEW SKILLS IN THE AREAS OF PROBLEM-SOLVING, LISTENING, SPEAKING, AND TAKING ACTION. FOUR QUARTERLY NONPROFIT LUNCH-AND-LEARN SESSIONS, COORDINATED BY THE INITIATIVE FOUNDATION IN CONJUNCTION WITH LOCAL PARTNERS, WERE HELD IN ST. CLOUD AND BRAINERD. EIGHTY-EIGHT NONPROFIT PROFESSIONALS PARTICIPATED IN ONE OR MORE LUNCH-AND-LEARN SESSIONS IN ST. CLOUD AND 47 LEADERS PARTICIPATED IN BRAINERD.

Form 990, Part III, Line 4b:

ECONOMIC DEVELOPMENT/BUSINESS LENDING THE INITIATIVE FOUNDATION ORIGINATED LOANS TOTALING \$2.1 MILLION DURING 2018. THE EFFORT LEVERAGED \$12.1 MILLION FROM PRIVATE SOURCES. WE ESTIMATE THAT THIS VOLUME OF LOANS CONTRIBUTED SIGNIFICANTLY TO THE CREATION OF 101 JOBS AND THE RETENTION OF 135 JOBS. WE CONTINUED TO PROVIDE SUPPORT TO ENSURE THAT OUR ENTIRE REGION HAS ACCESS TO MICRO-LENDING PROGRAMS THROUGH PARTNERS THAT INCLUDE REGION 5 DEVELOPMENT COMMISSION, SOUTHWEST INITIATIVE FOUNDATION AND ST. CLOUD STATE UNIVERSITY. WE MAINTAIN FUNDING AND REFERRAL RELATIONSHIPS WITH THE SMALL BUSINESS DEVELOPMENT CENTERS LOCATED IN OUR REGION. ATTRACTION, DEVELOPMENT AND RETENTION OF SKILLED WORKFORCE HAS BECOME AN INCREASING INTEREST TO EMPLOYERS THROUGHOUT OUR REGION. THE INITIATIVE FOUNDATION HOSTED OR PARTNERED WITH OTHER ORGANIZATIONS TO HOST A SERIES OF WORKSHOPS TO DRAW ATTENTION TO THE PROJECTED SHORTFALL OF NEARLY 200,000 WORKERS BETWEEN NOW AND 2030 (STATEWIDE), AND HIGHLIGHT STRATEGIES FOR INTERESTING YOUTH IN LOCALLY SIGNIFICANT CAREERS IN DEMAND, DEVELOPMENT OF APPRENTICESHIP AND INTERN PROGRAMS, SHARING RESOURCES FOR UPSKILLING INCUMBENT WORKERS, AND ENGAGING VETERANS, WOMEN, INDIVIDUALS WITH DISABILITIES, NEW AMERICANS, AND SENIORS. THE ECONOMIC DEVELOPMENT TEAM WRAPPED UP THE TWO-YEAR PILOT COHORT OF THE INITIATORS FELLOWSHIP, A TWO-YEAR PROGRAM SOCIAL ENTREPRENEURSHIP PROGRAM THAT PROVIDES MENTORSHIP, TRAINING AND SUPPORT FOR FOUR FELLOWS AS THEY WORK TO STRENGTHEN CENTRAL MINNESOTA THROUGH THEIR BUSINESS ENTERPRISE AND THEIR LEADERSHIP IN OUR COMMUNITIES, REGION AND BEYOND. PLANNING IS UNDERWAY TO EXPAND THE FELLOWSHIP IN 2020. THE ECONOMIC DEVELOPMENT TEAM ALSO STARTED OUR NEW ENTERPRISE ACADEMY PROGRAM IN 2018, PROVIDING BUSINESS TRAINING, ONE-ON-ONE TECHNICAL ASSISTANCE AND DIRECT LENDING TO LOWER-INCOME ENTREPRENEURS. THE INITIAL FOCUS OF THE ENTERPRISE ACADEMY PROGRAM IS TO SERVE NEW AMERICANS FROM THE EAST AFRICAN COMMUNITY IN ST. CLOUD. FOCUSED OUTREACH WITH COMMUNITY BANKS, CHAMBERS OF COMMERCE AND VOLUNTEER BUSINESS GROUPS COMBINED WITH TARGETED ECONOMIC DEVELOPMENT GRANTMAKING REMAINS A PRIORITY TO INCREASE LOANS AND TECHNICAL ASSISTANCE OPPORTUNITIES IN ALL COMMUNITIES. SUPPORT INCLUDED STRATEGIC PLANNING, LINKING TO OTHER FUNDERS AND JOB CREATION OPPORTUNITIES, CHALLENGE GRANTS TO SPUR MEMBERSHIP GROWTH, AND DEVELOPMENT OF TECHNOLOGY TOOLS AND/OR PROGRAMS TO ATTRACT AND RETAIN SKILLED WORKERS.

Form 990, Part III, Line 4c:

MARKETING, COMMUNICATIONS & IQ MAGAZINE THE INITIATIVE FOUNDATION IN 2018 PUBLISHED TWO EDITIONS OF IQ MAGAZINE THE SHIFT FROM FOUR TO TWO EDITIONS ANNUALLY (SPRING/FALL) STARTING IN 2018 WAS AN INTENTIONAL EFFORT THAT ENABLED MARKETING AND COMMUNICATIONS STAFF TO INCREASE THE ORGANIZATION'S DIGITAL OUTREACH THE REGIONALLY POPULAR MAGAZINE IS DISTRIBUTED TO AN AVERAGE OF 13,500 SUBSCRIBERS AND ENJOYS PASS-ALONG VIEWS FROM UP TO 60,000 READERS IT SERVES AS THE CONTENT ENGINE FOR MUCH OF THE ORGANIZATION'S MARKETING AND COMMUNICATIONS MESSAGING, PROVIDING EDITORIAL AND PHOTOGRAPHY TO PROMOTE PROGRAMS, OUTREACH EFFORTS AND REGIONAL INITIATIVES THAT FOCUS ON ECONOMIC DEVELOPMENT, COMMUNITY DEVELOPMENT AND GENEROSITY STORIES PUBLISHED IN 2018 HELPED TO DRIVE AWARENESS OF THE FOUNDATION'S MANY PARTNERSHIPS, BOTH WITHIN AND OUTSIDE THE REGION, AND THE WAYS IN WHICH THEY BENEFIT THE PEOPLE OF CENTRAL MINNESOTA ALL OF THESE PROGRAM-BASED STORIES WERE PARLAYED IN OTHER INITIATIVE FOUNDATION MEDIUMS-WEBSITES, EMAIL MARKETING, SOCIAL MEDIA-TO COMMUNICATE TO OUR AUDIENCES THE CONTINUED NEED TO SUPPORT THE FOUNDATION, ITS PROGRAMS AND ITS WORK

SCHEDULE A (Form 990 or 990-EZ)	Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ▶ Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for the latest information.	OMB No 1545-0047
		2018
		Open to Public Inspection

Department of the Treasury Internal Revenue Service	Name of the organization INITIATIVE FOUNDATION	Employer identification number 36-3451562
--	--	---

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

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

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ))
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university _____
- 10

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 11

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 12

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
- a

☐

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
- b

☐

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
- c

☐

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
- d

☐

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
- e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
- f

Enter the number of supported organizations _____
- g

Provide the following information about the supported organization(s)

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

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv), 170(b)(1)(A)(vi), and 170(b)(1)(A)(ix)
(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support							
	Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")	3,206,357	3,982,955	4,208,565	5,977,516	6,049,559	23,424,952
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	3,206,357	3,982,955	4,208,565	5,977,516	6,049,559	23,424,952
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)						8,237,086
6	Public support. Subtract line 5 from line 4						15,187,866

Section B. Total Support							
Calendar year (or fiscal year beginning in) ►		(a)2014	(b)2015	(c)2016	(d)2017	(e)2018	(f)Total
7	Amounts from line 4	3,206,357	3,982,955	4,208,565	5,977,516	6,049,559	23,424,952
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	912,370	970,388	982,684	1,091,586	1,325,709	5,282,737
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)	124,428	51,227	27,982	5,244	8,143	217,024
11	Total support. Add lines 7 through 10						28,924,713
12	Gross receipts from related activities, etc (see instructions)					12	3,082,814
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage		
14	Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14 52.510 %
15	Public support percentage for 2017 Schedule A, Part II, line 14	15 56.970 %
16a	33 1/3% support test—2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/>	
b	33 1/3% support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>	
17a	10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>	
b	10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>	
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 ▶ <input type="checkbox"/>	

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

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

Section A. Public Support

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

Section B. Total Support

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

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

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

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

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

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

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
	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? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		
	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)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
	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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
	2	
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
	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 <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
	2a	
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
	2b	
3 Parent of Supported Organizations Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
	3a	
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
	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)	1		
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI)			
2 Acquisition indebtedness applicable to non-exempt use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

- 7** ☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

Part V

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

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

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

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

Facts And Circumstances Test

990 Schedule A, Supplemental Information

Return Reference	Explanation
PART II, LINE 10, EXPLANATION OF OTHER INCOME	BAD DEBT RECOVERIES - 2014 AMOUNT \$ 116,029 2015 AMOUNT \$ 31,106 OTHER INCOME - 2014 AMOUNT \$ 8,399 2015 AMOUNT \$ 20,121 2016 AMOUNT \$ 27,982 2017 AMOUNT \$ 5,244 2018 AMOUNT \$ 8,143

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<div>SCHEDULE D (Form 990)</div> <div>Department of the Treasury Internal Revenue Service</div>		<div>Supplemental Financial Statements</div> <div>► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► Go to www.irs.gov/Form990 for the latest information.</div>			<div>OMB No 1545-0047</div> <div>2018</div> <div>Open to Public Inspection</div>
Name of the organization INITIATIVE FOUNDATION				Employer identification number 36-3451562	
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		22	
2		Aggregate value of contributions to (during year)		796,515	
3		Aggregate value of grants from (during year)		330,462	
4		Aggregate value at end of year		3,127,091	
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?	
				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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?	
				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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)					
<input type="checkbox"/> Preservation of land for public use (e g , recreation or education) <input type="checkbox"/> Preservation of an historically important land area					
<input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of a certified historic structure					
<input type="checkbox"/> Preservation of open space					
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year					
				Held at the End of the Year	
a Total number of conservation easements				2a	
b Total acreage restricted by conservation easements				2b	
c Number of conservation easements on a certified historic structure included in (a)				2c	
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register				2d	
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►					
4 Number of states where property subject to conservation easement is located ►					
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?					
<input type="checkbox"/> Yes <input type="checkbox"/> No					
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►					
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$					
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?					
<input type="checkbox"/> Yes <input type="checkbox"/> No					
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements					
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.					
1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items					
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items					
(i) Revenue included on Form 990, Part VIII, line 1 ► \$					
(ii) Assets included in Form 990, Part X ► \$					
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items					
a Revenue included on Form 990, Part VIII, line 1 ► \$					
b Assets included in Form 990, Part X ► \$					
For Paperwork Reduction Act Notice, see the Instructions for Form 990.					
Cat No 52283D		Schedule D (Form 990) 2018			

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a** ☐ Public exhibition
- b** ☐ Scholarly research
- c** ☐ Preservation for future generations
- d** ☐ Loan or exchange programs
- e** ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements.

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes ☒ No

b If "Yes," explain the arrangement in Part XIII and complete the following table

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	52,827,997	47,521,361	45,268,612	47,230,663	45,523,288
b Contributions	1,072,154	840,759	930,575	1,433,411	1,076,855
c Net investment earnings, gains, and losses	-3,389,553	7,512,426	3,421,606	-1,081,691	2,265,355
d Grants or scholarships					
e Other expenditures for facilities and programs	1,699,568	3,046,549	2,099,432	2,313,771	1,634,835
f Administrative expenses					
g End of year balance	48,811,030	52,827,997	47,521,361	45,268,612	47,230,663

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

a Board designated or quasi-endowment ▶ 48 560 %

b Permanent endowment ▶ 45 120 %

c Temporarily restricted endowment ▶ 6 320 %

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

b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

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

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		768,200		768,200
b Buildings		1,776,893	838,285	938,608
c Leasehold improvements				
d Equipment		460,321	442,041	18,280
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				1,725,088

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) SEED EQUITY INVESTMENTS	4,845,508	F
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) ▶	4,845,508	

Part VIII

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

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

Part IX

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

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

Part X

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

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

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

☒

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

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

1	Total revenue, gains, and other support per audited financial statements	1	3,530,106
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	-5,675,559
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	-5,675,559
3	Subtract line 2e from line 1	3	9,205,665
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	66,954
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	66,954
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	9,272,619

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	5,857,272
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	0
3	Subtract line 2e from line 1	3	5,857,272
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	66,954
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	66,954
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	5,924,226

Part XIII Supplemental Information

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

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 36-3451562
Name: INITIATIVE FOUNDATION

Supplemental Information

Return Reference	Explanation
PART IV, LINE 2B	THE FOUNDATION HOLDS FUNDS TRANSFERRED TO THEM FROM OTHER ORGANIZATIONS FOR INVESTMENT MAN AGEMENT PURPOSES THE FUNDS ARE TO BE DISTRIBUTED BACK TO THESE ORGANIZATIONS AS THEY REQU EST THEM THE FOUNDATION HAS NO VARIANCE POWER OVER THE FUNDS

Supplemental Information

Return Reference	Explanation
PART V, LINE 4	<p>BOARD DESIGNATED ENDOWMENT FUNDS PROVIDE PROGRAM AND OPERATING SUPPORT FOR THE INITIATIVE FOUNDATION'S MISSION. SPECIFIC WORK DONOR DESIGNATED ENDOWMENT FUNDS DEVELOP COMMUNITY RESOURCES TO ENHANCE THE QUALITY OF LIFE OF INDIVIDUALS AND FAMILIES THROUGH VARIOUS COMMUNITIES IN MINNESOTA. SOME DONOR DESIGNATED ENDOWMENT FUNDS ARE ALSO USED TO PROVIDE SCHOLARSHIPS FOR HIGH SCHOOL STUDENTS PURSUING POST SECONDARY EDUCATION, TO AWARD GRANTS THAT PROMOTE VARIOUS INITIATIVES PURSUED BY THE DONOR, AND TO SUPPORT ORGANIZATIONS CONDUCTING VARIOUS CHARITABLE ACTIVITIES.</p>

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	U S GAAP REQUIRES MANAGEMENT TO EVALUATE TAX POSITIONS TAKEN BY THE ORGANIZATION AND RECOGNIZE A TAX LIABILITY IF THE ORGANIZATION HAS TAKEN AN UNCERTAIN POSITION THAT MORE LIKELY THAN NOT WOULD NOT BE SUSTAINED UPON EXAMINATION BY THE INTERNAL REVENUE SERVICE MANAGEMENT HAS ANALYZED THE TAX POSITIONS TAKEN BY THE ORGANIZATION, AND HAS CONCLUDED THAT AS OF DECEMBER 31, 2018, THERE ARE NO UNCERTAIN POSITIONS TAKEN OR EXPECTED TO BE TAKEN THAT WOULD REQUIRE RECOGNITION OF A LIABILITY OR DISCLOSURE IN THE FINANCIAL STATEMENTS THE ORGANIZATION IS SUBJECT TO ROUTINE AUDITS BY TAXING JURISDICTIONS, HOWEVER, THERE ARE CURRENTLY NO AUDITS FOR ANY TAX PERIODS IN PROGRESS THE ORGANIZATION BELIEVES IT IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS FOR YEARS PRIOR TO 2015

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
INITIATIVE FOUNDATION

Employer identification number
36-3451562

Part I Fundraising Activities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a ☐ Mail solicitations

e ☐ Solicitation of non-government grants

b ☐ Internet and email solicitations

f ☐ Solicitation of government grants

c ☐ Phone solicitations

g ☐ Special fundraising events

d ☐ In-person solicitations
- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No
- b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total ▶						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue		(a) Event #1 <u>TRCF GOLF EVENT</u> (event type)	(b) Event #2 <u>BRAHAM AREA EDUCATION GALA</u> (event type)	(c) Other events <u>18</u> (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts	31,599	25,899	159,559	217,057
	2 Less Contributions	7,559	11,924	66,928	86,411
	3 Gross income (line 1 minus line 2)	24,040	13,975	92,631	130,646
Direct Expenses	4 Cash prizes				
	5 Noncash prizes	1,280	585	300	2,165
	6 Rent/facility costs	5,402	1,500	3,938	10,840
	7 Food and beverages	1,746	5,081	11,826	18,653
	8 Entertainment		250	5,795	6,045
	9 Other direct expenses	250	449	19,165	19,864
	10 Direct expense summary Add lines 4 through 9 in column (d) ►				57,567
	11 Net income summary Subtract line 10 from line 3, column (d) ►				73,079

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Direct Expenses	1 Gross revenue				
	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ►				
	8 Net gaming income summary Subtract line 7 from line 1, column (d) ►				

9 Enter the state(s) in which the organization conducts gaming activities _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain _____

11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity conducted in

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ►

Address ►

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

- b** If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____

- c** If "Yes," enter name and address of the third party

Name ►

Address ►

16 Gaming manager information

Name ►

Gaming manager compensation ► \$

Description of services provided ►

☐ Director/officer

☐ Employee

☐ Independent contractor

17 Mandatory distributions

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

- b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Return Reference

Explanation

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

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
INITIATIVE FOUNDATION

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 the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Employer identification number
36-3451562

Part I

General Information on Grants and Assistance

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

Part II

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

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

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 57

3 Enter total number of other organizations listed in the line 1 table 27

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

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) SPIPENDS	25	147,946			
(2) SCHOLARSHIPS	91	223,600			
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
PART I, LINE 2	GRANTS ARE MADE LOCALLY WITHIN OUR 14 COUNTY SERVICE AREA AS PART OF THE FINAL GRANT REPORT, THE GRANTEE MUST SUBMIT A FINANCIAL REPORT WITH ITEMIZATION OF GRANT EXPENSES
PART I, LINE 2	AS PART OF THE FINAL GRANT REPORT, THE GRANTEE SUBMITS A FINANCIAL REPORT WITH ITEMIZATION OF GRANT FUND EXPENDITURES AND ASSOCIATED DOCUMENTATION

Additional Data

Software ID:
Software Version:
EIN: 36-3451562
Name: INITIATIVE FOUNDATION

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
A GREAT DAY FARM FOUNDATION 5575 115TH ST E NORTHFIELD, MN 55057	46-4272037	501(C)(3)	10,000				TO SUPPORT THE SECOND PHASE OF A FACILITY UPGRADE
AITKIN COUNTY SOIL AND WATER CONSERVATION DISTRICT 130 SOUTHGATE DRIVE AITKIN, MN 56431	41-0857184	UNIT OF GOVERNMENT	36,000				TO WORK WITH 20 BAIT SHOPS AND RESORTS TO CREATE INCENTIVES FOR ANGLERS TO USE LOCAL BAIT WATER AS A STRATEGY TO PREVENT THE SPREAD OF INVASIVE SPECIES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANDERSON CENTER 122 12TH AVENUE NORTH SUITE 102 ST CLOUD, MN 56303	41-1911774	501(C)(3)	10,000				TO SUPPORT THE MISSION AND OPERATIONS OF THE ORGANIZATION
BERTHA-HEWITT SCHOOL DISTRICT PO BOX 8 BERTHA, MN 56437	41-6008395	SCHOOL DISTRICT	7,500				TO PROVIDE SUPPORT FOR INNOVATIVE SCHOOLS PROJECT FOR BERTHA-HEWITT SCHOOL DISTRICT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BICYCLE ALLIANCE OF MINNESOTA 3745 MINNEHAHA AVENUE MINNEAPOLIS, MN 55406	41-1719332	501(C)(3)	7,500				TO SUPPORT IMPROVED BIKE TRAILS AND ROUTES IN BRAINERD, NORTH BRANCH AND CHISAGO LAKES
BIG LAKE SCHOOL DISTRICT 501 MINNESOTA AVE BIG LAKE, MN 55309	41-6003819	SCHOOL DISTRICT	7,000				TO SUPPORT FAMILIES, CHILDCARE PROVIDERS AND OTHER EDUCATORS WITH ACTIVITIES TO FOSTER EARLY CHILDHOOD LITERACY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOYS & GIRLS CLUB OF THE LEECH LAKE AREA 208 CENTRAL AVE CASS LAKE, MN 56633	41-1929446	501(C)(3)	5,000				TO SUPPORT THE "WE ARE THE FUTURE - NATION BUILDING" PROGRAM THAT MATCHES 5TH GRADERS WITH COMMUNITY MENTORS
BOYS & GIRLS CLUB OF CENTRAL MN 345 30TH AVE N ST CLOUD, MN 56303	41-1245177	501(C)(3)	5,000				TO SUPPORT PROGRAMS THAT HELP AREA YOUTH GAIN THE NECESSARY SKILLS TO SEEK AND MAINTAIN EMPLOYMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRAINERD LAKES AREA CHAMBER OF COMMERCE EDUCATION ASSOCIATION 224 WEST WASHINGTON ST BRAINERD, MN 56401	41-1787694	501(C)(3)	5,000				TO SUPPORT A SECOND YEAR OF THE CHAMBER'S SUCCESSFUL DESTINATION DOWNTOWN CONTEST
BRAINERD LAKES AREA ECONOMIC DEVELOPMENT CORPORATION 224 WEST WASHINGTON ST BRAINERD, MN 56401	41-1543292	501(C)(3)	10,000				TO SUPPORT THE RIVER TO RAIL INITIATIVE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRAINERD PUBLIC SCHOOLS FOUNDATION 804 OAK STREET ROOM 209A BRAINERD, MN 56401	36-3542673	501(C)(3)	7,500				TO SUPPORT INNOVATIVE CLASSROOM GRANTS
BRAINERD PUBLIC SCHOOLS FOUNDATION 804 OAK STREET ROOM 209A BRAINERD, MN 56401	36-3542673	501(C)(3)	5,000				TO SUPPORT COORDINATION OF EARLY CHILDHOOD COALITION ACTIVITIES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRAINERD SCHOOL DISTRICT 804 OAK STREET BRAINERD, MN 56401	41-6000789	SCHOOL DISTRICT	8,000				TO SUPPORT THE EXPANSION OF LOVE AND LOGIC PARENTING CLASSES
BRIDGES OF HOPE PO BOX 742 BRAINERD, MN 56401	72-1538846	501(C)(3)	5,000				TO SUPPORT ACTIVE ENGAGEMENT BY RESIDENTS OF TWO EAST BRAINERD NEIGHBORHOODS IN THE SELF-HEALING COMMUNITIES PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRIDGES OF HOPE PO BOX 742 BRAINERD, MN 56401	72-1538846	501(C)(3)	5,000				TO IMPLEMENT A SELF-HEALING COMMUNITIES PROJECT TO MITIGATE ADVERSE CHILDHOOD EXPERIENCES, BUILD RESILIENCY, AND INCREASE POSITIVE HEALTH OUTCOMES
BROWERVILLE PUBLIC SCHOOLS 620 PARK AVE N BROWERVILLE, MN 56438	41-6004321	SCHOOL DISTRICT	5,000				TO SUPPORT THE PURCHASE OF SAFETY EQUIPMENT AND MATS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAMBRIDGE COMMUNITY COLLEGE CENTER FOUNDATION 300 SPIRIT RIVER DRIVE SOUTH CAMBRIDGE, MN 55008	41-1643037	501(C)(3)	25,000				TO SUPPORT HEALTHCARE SCHOLARSHIPS FOR NEW AND RETURNING STUDENTS, AND STUDENTS LOOKING FOR SHORT TERM TRAINING SUCH AS CNA TRAINING
CAMBRIDGE ISANTI SCHOOL DISTRICT 625A MAIN ST N CAMBRIDGE, MN 55008		SCHOOL DISTRICT	5,000				TO DISTRIBUTE BACKPACKS THAT HEALTHCARE PROVIDERS CAN DISTRIBUTE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CANVAS HEALTH 7066 STILLWATER BLVD N OAKDALE, MN 55128	41-0955577	501(C)(3)	5,000				TO HELP THE WORKFORCE OF EAST CENTRAL MINNESOTA WITH CHEMICAL AND/OR MENTAL HEALTH ISSUES PREVENTING THEM FROM WORKING
CARVER COUNTY WATER MANAGEMENT ORGANIZATION 600 EAST 4TH STREET CHASKA, MN 55318	41-6005768	UNIT OF GOVERNMENT	22,000				TO EVALUATE THE USE OF AQUATIC VEGETATION CONTROL AS A PREVENTION MEASURE TO REDUCE THE SPREAD OF ZEBRA MUSSELS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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CENTRACARE HEALTH FOUNDATION 1406 6TH AVE N ST CLOUD, MN 56303	41-1855173	501(C)(3)	5,000				TO SPONSOR THE COMMUNITY HEALTH EVENT ON APRIL 20-21 THAT INCLUDES FOUR SEPARATE RACES FOR ALL SKILL LEVELS AND AGES
CENTRAL LAKES COLLEGE FOUNDATION 501 WEST COLLEGE DRIVE BRAINERD, MN 56401	23-7007111	501(C)(3)	5,000				TO PROVIDE SMALL GRANTS TO STAFF AND FACULTY MEMBERS WITH INNOVATIVE IDEAS FOR REDUCE OR REMOVING BARRIERS TO STUDENT SUCCESS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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CENTRAL MN SUSTAINABILITY PROJECT PO BOX 7154 ST CLOUD, MN 56302	27-0698641	501(C)(3)	5,000				TO SUPPORT THIS PROGRAM WHICH DEVELOPS LEADERSHIP AND JOB SKILLS AMONG IMMIGRANT WOMEN
CITIZENS LEAGUE 400 NORTH ROBERT 1820 ST PAUL, MN 55101	41-0722696	501(C)(3)	53,000				TO SUPPORT A COLLABORATION WITH THE MINNESOTA LAKES AND RIVERS ALLIANCE TO PREVENT THE SPREAD OF AQUATIC INVASIVE SPECIES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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CITY OF HACKENSACK PO BOX 490 HACKENSACK, MN 56452	41-6005209	UNIT OF GOVERNMENT	5,000				TO SUPPORT COMMUNITY VOLUNTEERS OVERSEEING BEAUTIFICATION
CITY OF MENAHGA 115 2ND STREET NE MENAHGA, MN 56464	41-6005365	UNIT OF GOVERNMENT	5,000				TO DEVELOP AND IMPLEMENT TRAINING TO SUPPORT LOCAL PROJECTS

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

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CITY OF NORTH BRANCH 6408 ELM STREET PO BOX 910 NORTH BRANCH, MN 550567043	41-6005421	UNIT OF GOVERNMENT	5,000				TO SUPPORT A MINNESOTA DESIGN TEAM TO IDENTIFY KEY REDEVELOPMENT OPPORTUNITIES AND UTILIZE CURRENT INFRASTRUCTURE
CITY OF PINE CITY 315 MAIN STREET SOUTH PINE CITY, MN 55063	41-6005456	UNIT OF GOVERNMENT	5,000				TO DEVELOP A RESIDENTIAL PARK WITHIN THE CROSSLAKE PRESERVE DEVELOPMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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CITY OF WADENA 222 2ND ST SE PO BOX 30 WADENA, MN 56482		UNIT OF GOVERNMENT	29,649				TO SUPPORT THE DEVELOPMENT OF THE WADENA REGIONAL WELLNESS CENTER
COMMUNITY ACTION COUNCIL OF CROW WING COUNTY DBA BRAINERD COMMUNITY ACTION 213 SOUTH 5TH STREET BRAINERD, MN 55401	51-0186078	501(C)(3)	72,960				TO SUPPORT THE DEVELOPMENT AND MAINTENANCE OF A SPLASH PAD IN A CITY OF BRAINERD PARK

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

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COMMUNITY GRASSROOTS SOLUTIONS 110 2ND STREET S SUITE 202 WAITE PARK, MN 55387	27-2397534	501(C)(3)	5,000				TO SUPPORT COMMUNITY GRASSROOTS SOLUTIONS JOB PLACEMENT PROGRAM THAT ASSISTS ST CLOUD IMMIGRANT AND REFUGEE WOMEN AND GIRLS
COMMUNITY GIVING 101 7TH AVENUE SOUTH SUITE 100 ST CLOUD, MN 56301	36-3412544	501(C)(3)	5,000				TO SUPPORT LEADERSHIP TRAINING

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COMMUNITY GIVING 101 7TH AVENUE SOUTH SUITE 100 ST CLOUD, MN 56301	36-3412544	501(C)(3)	10,000				TO ENGAGE NEW AND EMERGING LEADERS OF COLOR
CROSBY-IRONTON PUBLIC SCHOOLS FOUNDATION DBA CUYUNA LAKES EDUCATION FOUNDAT PO BOX 355 DEERWOOD, MN 56444	41-1855418	501(C)(3)	15,200				TO SUPPORT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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CUYUNA RANGE YOUTH CENTER 15 3RD AVENUE SW PO BOX 263 CROSBY, MN 56441	06-1778801	501(C)(3)	5,000				TO SUPPORT ACTIVITIES THAT LEAD TO IMPROVED JOB SKILLS AND ACCESS TO EMPLOYMENT OPPORTUNITIES FOR CROSBY-AREA YOUTH
EAST CENTRAL REGIONAL DEVELOPMENT COMMISSION 100 PARK STREET SOUTH MORA, MN 55051	41-1240918	UNIT OF GOVERNMENT	5,000				TO SUPPORT PLANNING, PUBLIC ENGAGEMENT, AND PROMOTION OF THE MILLE LACS LAKE AREA SCENIC BYWAY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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EAST CENTRAL REGIONAL LIBRARY 244 BIRCH STREET SOUTH CAMBRIDGE, MN 55008	41-6008961	UNIT OF GOVERNMENT	5,000				TO SUPPORT EARLY CHILDHOOD LITERACY
ECONOMIC DEVELOPMENT AUTHORITY OF THE CITY OF ST CLOUD 400 2ND ST SOUTH ST CLOUD, MN 56301	45-5118363	UNIT OF GOVERNMENT	5,000				TO HELP ECONOMIC RECOVERY EFFORTS FROM THE PERMANENT CLOSURE OF A MANUFACTURING PLANT AND DISLOCATED WORKFORCE

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ELK RIVER SCHOOL DISTRICT 11500 193RD AVENUE NW ELK RIVER, MN 55330	41-6003818	SCHOOL DISTRICT	9,850				TO SUPPORT THE DEVELOPMENT OF A MULTI-USE WELCOME CENTER IN THE DISTRICT BUILDING
ELK RIVER SCHOOL DISTRICT 11500 193RD AVENUE NW ELK RIVER, MN 55330	41-6003818	SCHOOL DISTRICT	5,000				TO SUPPORT AN "ANGEL FUND" USED TO HELP THESE FAMILIES IN POVERTY ENSURE THEIR CHILDREN GET A WARM MEAL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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EMPLOYMENT ENTERPRISES INC PO BOX 303 LITTLE FALLS, MN 56345	41-0966032	501(C)(3)	5,000				TO RECRUIT AND PROVIDE WORK SKILLS TRAINING TO MEMBERS OF THE LITTLE FALLS AREA IMMIGRANT COMMUNITY
ENTERPRISE MINNESOTA INC 2100 SUMMER STREET NE MINNEAPOLIS, MN 55413	41-1595930	501(C)(3)	5,000				TO SUPPORT THE CONSULTING NEEDS OF A SMALL MANUFACTURING COMPANY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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FAMILY PATHWAYS 6413 OAK STREET NORTH BRANCH, MN 55056	41-1332828	501(C)(3)	5,000				TO PROVIDE FOOD TO WOMEN AND CHILDREN ESCAPING DOMESTIC VIOLENCE, AS WELL AS FAMILIES IN ISANTI COUNTY
FIRST AMERICAN FINANCIAL SERVICES 308 FRONTAGE ROAD SEBEKA, MN 56477	43-2078209	501(C)(3)	6,000				TO SUPPORT THE BUSINESS RETENTION AND EXPANSION PROJECT

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FIRST CHILDREN'S FINANCE 111 THIRD AVENUE S SUITE 220 MINNEAPOLIS, MN 55401	41-1694837	501(C)(3)	30,000				TO SUPPORT REGIONAL STAFF TO SERVE CENTRAL MINNESOTA IN DEVELOPING STRATEGIES TO ADDRESS THE GAP IN AFFORDABLE, QUALITY CHILD CARE
FRIENDS OF CAREER SOLUTIONS 1542 NORTHWAY DRIVE ST CLOUD, MN 56301	82-1354223	501(C)(3)	5,000				TO PROVIDE TRAINING AND APPRENTICESHIP OPPORTUNITIES TO SUPPORT YOUNG ADULTS TO COMPLETE THEIR GED, WHILE ALSO GAINING APPLIED WORKPLACE EXPERIENCE

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FRIENDS OF CAREER SOLUTIONS 1542 NORTHWAY DRIVE ST CLOUD, MN 56301	82-1354223	501(C)(3)	5,000				TO ASSIST YOUNG ADULT CLIENTS REFERRED BY THE PATHWAYS FOR YOUTH ORGANIZATION AND/OR PUBLIC THE SCHOOLS
GREATER ST CLOUD DEVELOPMENT CORPORATION 501 W ST GERMAIN ST SUITE 100 ST CLOUD, MN 56301	45-2050341	501(C)(3)	7,500				TO ENHANCE AND EXPAND ECONOMIC OPPORTUNITIES OF THE ST CLOUD REGION

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GREATER ST CLOUD DEVELOPMENT CORPORATION 501 W ST GERMAIN ST SUITE 100 ST CLOUD, MN 56301	45-2050341	501(C)(3)	15,000				TO SUPPORT THE MISSION AND OPERATIONS OF THE ORGANIZATION
GREATER ST CLOUD DEVELOPMENT CORPORATION 501 W ST GERMAIN ST SUITE 100 ST CLOUD, MN 56301	45-2050341	501(C)(3)	5,000				TO SUPPORT THE WORKPLACE WELL-BEING PROGRAM IN THE GREATER ST CLOUD AREA

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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HANDS ACROSS THE WORLD 1605 GOETTENS WAY SUITE 206 ST CLOUD, MN 56301	68-0576502	501(C)(3)	10,000				TO MORE CAREFULLY ALIGN EMPLOYER NEEDS WITH SKILL SET, TRAINING SUPPORT, AND PROFESSIONAL GOALS OF PROGRAM CLIENTS
INTERNATIONAL ASSOCIATION OF LIONS BROWERVILLE PO BOX 102 BROWERVILLE, MN 56438	41-6037462	501(C)(3)	7,500				TO PROMOTE INNOVATIVE CLASSROOM IDEAS

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

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ISANTI COUNTY 555 18TH AVE SW CAMBRIDGE, MN 55008	41-6005808	UNIT OF GOVERNMENT	5,000				TO IMPLEMENT THE BROADBAND FEASIBILITY STUDY BY FORMALIZING ORGANIZATIONAL PARTNERSHIPS AND REFINING TECHNOLOGY AND FINANCIAL PLANS
ISANTI COUNTY COMMISSION ON AGING 140 BUCHANAN ST N SUITE 164 CAMBRIDGE, MN 55008	41-1536740	501(C)(3)	5,000				TO SUPPORT THE SAC'S FRIENDSHIP CAFE AS A SUSTAINABLE SOCIAL ENTERPRISE

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ITASCA COUNTY SOIL AND WATER CONSERVATION DISTRICT 1889 E HIGHWAY 2 GRAND RAPIDS, MN 55744	41-1306389	UNIT OF GOVERNMENT	210,000				TO SUPPORT AIS PREVENTION MEASURES IN POPULAR RECREATION AND FISHING DESTINATIONS
LAKE REGION CHRISTIAN SCHOOL 7398 FAIRVIEW RD BAXTER, MN 56425		501(C)(3)	13,099				TO SUPPORT CLASSROOM ENHANCEMENTS AND STUDENT SCHOLARSHIPS

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LITTLE FALLS SCHOOL DISTRICT 1001 5TH AVE SE LITTLE FALLS, MN 56345	41-6002411	SCHOOL DISTRICT	5,400				TO PROVIDE ANNUAL SUPPORT TO THE MENTORSHIP PROGRAM IN LINDBERGH ELEMENTARY
LONGVILLE AREA COMMUNITY FOUNDATION PO BOX 92 LONGVILLE, MN 56655	41-1699500	501(C)(3)	6,150				TO SUPPORT THE GRANT MAKING AND OPERATIONS OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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LUTHERAN SOCIAL SERVICE OF MINNESOTA 1205 6TH AVE S 2 ST CLOUD, MN 56301	41-0872993	501(C)(3)	5,000				TO REDUCE THE INCIDENCE OF MALTREATMENT OF YOUNG CHILDREN AND PROVIDE RELIEF TO PARENTS IN CRISIS BY OFFERING EMERGENCY CHILD CARE
MILLE LACS COUNTY 525 SECOND STREET SOUTH EAST MILACA, MN 56353	41-6005845	UNIT OF GOVERNMENT	18,000				MILLE LACS COUNTY CAVITY FREE PROGRAM OF EARLY PREVENTATIVE DENTAL HEALTH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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MILLE LACS HEALTH SYSTEM PO BOX A 200 N ELM STREET ONAMIA, MN 56359	41-0785161	501(C)(3)	7,500				TO SUPPORT LITERACY BY PROVIDING OPPORTUNITIES FOR PRESCHOOLERS (AGES 0-5) AND THEIR PARENTS/CAREGIVERS TO READ TOGETHER
MILLE LACS HEALTH SYSTEM PO BOX A 200 N ELM STREET ONAMIA, MN 56359	41-0785161	501(C)(3)	5,000				TO ADVANCE EARLY CHILDHOOD INITIATIVES AND HELP SECURE LOCAL INVESTMENT FOR THESE EFFORTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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MINNESOTA COUNCIL ON FOUNDATIONS 800 WASHINGTON AVE N SUITE 703 MINNEAPOLIS, MN 55401	41-1269275	501(C)(3)	7,600				TO SUPPORT ADVOCACY FOR AND PROMOTION OF ETHICAL AND RESPONSIBLE CHARITABLE GIVING
MN STATE VETERANS CEMETERY ASSOCIATION 15550 HWY 115 LITTLE FALLS, MN 56345	41-1679519	501(C)(3)	48,300				TO SUPPORT THE HISTORIC EDUCATIONAL ART PROJECT AT THE MINNESOTA STATE VETERAN'S CEMETERY

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MN STATE VETERANS CEMETERY ASSOCIATION 15550 HWY 115 LITTLE FALLS, MN 56345	41-1679519	501(C)(3)	5,400				TO SUPPORT THE ADDITIONAL FIVE 8 X 10 PAINTINGS REPRESENTING ALL BRANCHES OF THE MILITARY AT THE COMMITAL HALL
MORRISON COUNTY 213 SOUTH EAST 1ST AVENUE LITTLE FALLS, MN 56345	41-6005846	UNIT OF GOVERNMENT	5,000				TO SUPPORT KINDERGARTEN READINESS

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NEW PATHWAYS INC PO BOX 366 CAMBRIDGE, MN 55008	41-1945426	501(C)(3)	5,000				TO SUPPORT EFFORTS TO REACH NEW DONORS WHO WILL CONTRIBUTE TO THEIR WORK OF PROVIDING EMERGENCY SHELTER TO HOMELESS FAMILIES
NEW PATHWAYS INC PO BOX 366 CAMBRIDGE, MN 55008	41-1945426	501(C)(3)	10,000				TO SUPPORT A DAY SHELTER FOR INDIVIDUALS AND FAMILIES EXPERIENCING HOMELESSNESS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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NORTHERN TECHNOLOGY INITIATIVE DBA GPS 4593 38871 17TH AVENUE PO BOX 815 NORTH BRANCH, MN 55056	31-1709954	501(C)(3)	10,000				TO SUPPORT EXPLORATION OF CAREER EXPLORATION PROGRAMS FOR SECONDARY STUDENTS, AND DEVELOPMENT AND IMPLEMENTATION OF ONE WHICH BEST FITS THE WORKFORCE NEEDS EAST CENTRAL MINNESOTA
NORTHERN WATERS LAND TRUST PO BOX 124 WALKER, MN 56484	41-1887906	501(C)(3)	67,486				TO SUPPORT THE MISSION OF THE ORGANIZATION

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NORTHFIELD AREA FAMILY YMCA 1501 HONEYLOCUST DR NORTHFIELD, MN 55057	59-3817686	501(C)(3)	5,000				TO SUPPORT THE CAPITAL EXPANSION PROJECT
PINE TECHNICAL & COMMUNITY COLLEGE 900 FOURTH ST SE PINE CITY, MN 55063	31-1666015	501(C)(3)	5,000				TO PROVIDE SCHOLARSHIPS FOR STUDENTS IN HEALTHCARE RELATED FIELDS

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PIONEER ELEMENTARY PARENT TEACHER ORGANIZATION (PTO) 66 KAMNIC STREET PIERZ, MN 56364	22-3950703	501(C)(3)	7,500				TO ENCOURAGE INNOVATION IN THE CLASSROOMS
PROMISE NEIGHBORHOOD OF CENTRAL MINNESOTA PO BOX 6082 ST CLOUD, MN 56302	45-3233276	501(C)(3)	5,000				TO SUPPORT THE DEVELOPMENT OF A STRATEGIC FUND DEVELOPMENT PLAN TO INCREASE FINANCIAL CAPACITY TO SUPPORT LOW-INCOME CHILDREN AND FAMILIES IN ST CLOUD'S TALAHI NEIGHBORHOOD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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REGION FIVE DEVELOPMENT COMMISSION 200 1ST STREET SUITE 2 STAPLES, MN 56479	41-1238886	501(C)(3)	5,000				TO SUPPORT NCEDA IN PROVIDING TECHNICAL ASSISTANCE TO SMALL MANUFACTURING COMPANIES
REGION FIVE DEVELOPMENT COMMISSION 200 1ST STREET SUITE 2 STAPLES, MN 56479	41-1238886	501(C)(3)	5,000				TO SUPPORT EVENTS, ACTIVITIES, AND MARKETING TO HELP SUPPORT BUSINESSES AND DOWNTOWN VITALITY DURING HIGHWAY RECONSTRUCTION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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RIVERS OF HOPE PO BOX 511 MONTICELLO, MN 55362	41-1670536	501(C)(3)	5,000				TO SUPPORT THE VIOLENCE PREVENTION AND INTERVENTION (VIP) PROGRAM THAT PROVIDES INDIVIDUAL SUPPORT, FACILITATED GROUP SUPPORT AND LEGAL ADVOCACY FOR YOUTH
ROYALTON SCHOOL DISTRICT PO BOX 138 ROYALTON, MN 55373		SCHOOL DISTRICT	5,724				TO SUPPORT INNOVATIVE CLASSROOM PROJECTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAINT CLOUD AREA FAMILY YMCA 2001 STOCKINGER DRIVE ST CLOUD, MN 56303	41-0952420	501(C)(3)	5,000				TO SUPPORT THE CAPITAL EXPANSION PROJECT
SAINT CLOUD ROTARY FOUNDATION 203 COOPER AVENUE SOUTH ST CLOUD, MN 56303	36-3396376	501(C)(3)	5,000				TO CONTRIBUTE TO STARTUP COSTS FOR THE YOUTH OPPORTUNITY CENTER (CALLED "PATHWAYS 4 YOUTH") TO HELP YOUTH EXPERIENCING HOMELESSNESS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAINT CLOUD STATE UNIVERSITY FOUNDATION 720 4TH AVE S ST CLOUD, MN 56301	41-6019040	501(C)(3)	5,000				TO SUPPORT THE MARTIN LUTHER KING, JR DAY EVENTS
SAINT CLOUD STATE UNIVERSITY FOUNDATION 720 4TH AVE S ST CLOUD, MN 56301	41-6019040	501(C)(3)	25,000				TO SUPPORT THE UNIVERSITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAINT CLOUD STATE UNIVERSITY FOUNDATION 720 4TH AVE S ST CLOUD, MN 56301	41-6019040	501(C)(3)	5,000				TO SUPPORT THE MARTIN LUTHER KING JR BREAKFAST AND DAY OF SERVICE EVENT AT ST CLOUD STATE UNIVERSITY
SAINT CLOUD TECHNICAL & COMMUNITY COLLEGE FOUNDATION 1540 NORTHWAY DR ST CLOUD, MN 56303	41-1791598	501(C)(3)	7,000				TO SUPPORT THE VEX ROBOTICS PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SALEM LUTHERAN CHURCH PO BOX 100 DEERWOOD, MN 56444	41-1463989	501(C)(3)	5,000				TO SUPPORT SALEM WEST STAFF EXPANSION IN RESPONSE TO LEADERSHIP SUCCESSION AND SIGNIFICANT GROWTH IN REQUESTS FOR ASSISTANCE
SAUK RAPIDS-RICE SCHOOL DISTRICT 1833 OSAUKA ROAD NORTHEAST SAUK RAPIDS, MN 56379	41-6000219	SCHOOL DISTRICT	11,500				TO SUPPORT THE PURCHASE OF SHOP TOOLS USED IN BUILDING PROJECTS, DESIGNED TO INCREASE STUDENT'S AWARENESS OF CAREER OPTIONS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAUK RAPIDS-RICE SCHOOL DISTRICT 1833 OSAUKA ROAD NORTHEAST SAUK RAPIDS, MN 56379	41-6000219	SCHOOL DISTRICT	111,413				TO SUPPORT THE COMPASS PROGRAM AT THE SAUK RAPIDS RICE SCHOOL DISTRICT
SAUK RAPIDS-RICE SCHOOL DISTRICT 1833 OSAUKA ROAD NORTHEAST SAUK RAPIDS, MN 56379	41-6000219	SCHOOL DISTRICT	9,750				TO SUPPORT THE PURCHASE OF TOOLS AND CNC MACHINE

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAUK RAPIDS-RICE SCHOOL DISTRICT 1833 OSAUKA ROAD NORTHEAST SAUK RAPIDS, MN 56379	41-6000219	SCHOOL DISTRICT	10,000				TO CREATE A FINANCIAL SUSTAINABILITY PLAN FOR ONGOING WORK AS THRIVE SUPPORTS HEALTHY SOCIAL AND EMOTIONAL DEVELOPMENT OF CHILDREN AGES BIRTH TO FIVE
SBDC - CLC (SMALL BUSINESS DEV CENTER AT CENTRAL LAKES COLLEGE) 501 WEST COLLEGE DRIVE BRainerd, MN 56401	41-1687554	UNIT OF GOVERNMENT	10,000				TO HELP SMALL BUSINESSES AND SOCIAL ENTERPRISE VENTURES GAIN ACCESS TO TECHNICAL ASSISTANCE, MENTORSHIP, AND SUCCESSION PLANNING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SPORTSMEN'S CLUB OF LAKE VERMILION INC DBA VERMILION LAKE ASSOCIATION PO BOX 696 TOWER, MN 55790	41-1311744	501(C)(3)	31,775				TO SIGNIFICANTLY INCREASE INSPECTION EFFICIENCY AND COVERAGE BY MORE ACCURATELY PREDICTING ARRIVALS AND EXITS AT EACH PUBLIC ACCESS
SPROUT MN LLC 609 13TH AVE NE SUITE 8 LITTLE FALLS, MN 56345	46-1953536	501(C)(3)	5,000				TO SUPPORT A FEASIBILITY ANALYSIS OF A CENTRAL MINNESOTA MEAT PROCESSING FACILITY TO SERVE OVER 20 FARMERS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STEARNS COUNTY HISTORICAL SOCIETY INC 235 SOUTH 33RD AVENUE ST CLOUD, MN 56301	41-1315033	501(C)(3)	5,000				TO SUPPORT THE MUSEUM'S FIRE CONTAINMENT PROJECT
THE LEECH LAKE BAND OF OJIBWE RESERVATION BUSINESS COMMITTEE 190 SAILSTAR DRIVE NW CASS LAKE, MN 56633	41-1242052	501(C)(3)	5,000				TO SUPPORT THE LAUNCH OF THIS HIGHLY SUCCESSFUL PROGRAM TO SERVE THE LEECH LAKE RESERVATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TUSEN TACK PO BOX 214 208 W CENTRAL DR BRAHAM, MN 55006	41-1647405	501(C)(3)	5,000				TO SUPPORT THE LONG-TERM SUSTAINABLE GROWTH OF THE ORGANIZATION THROUGH ADDITIONAL STAFF SUPPORT
UNITED WAY OF CENTRAL MINNESOTA 921 1ST STREET NORTH SUITE 200 ST CLOUD, MN 56303	41-0915124	501(C)(3)	12,000				TO PROVIDE PARENTS/CAREGIVERS TOOLKITS DESIGNED TO INCREASE EARLY LITERACY SKILLS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF CENTRAL MINNESOTA 921 1ST STREET NORTH SUITE 200 ST CLOUD, MN 56303	41-0915124	501(C)(3)	40,000				TO SUPPORT THE GENERAL OPERATIONS AND PROGRAMS OF THE ORGANIZATION
UNITED WAY OF CENTRAL MINNESOTA 921 1ST STREET NORTH SUITE 200 ST CLOUD, MN 56303	41-0915124	501(C)(3)	10,000				TO CULTIVATE FUTURE ENTREPRENEURS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VERNDALE SCHOOL DISTRICT 411 SW BROWN STREET VERNDALE, MN 56481	41-6008239	SCHOOL DISTRICT	7,500				TO SUPPORT CREATIVE CLASSROOM ACTIVITIES
WADENA-DEER CREEK SCHOOL DISTRICT 600 COLFAX AVENUE SW PO BOX 151 WADENA, MN 564820151		SCHOOL DISTRICT	5,000				TO SUPPORT INNOVATIVE CLASSROOM GRANTS IN THE WADENA-DEER CREEK PUBLIC SCHOOLS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WADENA-DEER CREEK SCHOOL DISTRICT 600 COLFAX AVENUE SW PO BOX 151 WADENA, MN 564820151		SCHOOL DISTRICT	7,500				TO SUPPORT INNOVATIVE CLASSROOM GRANTS
WRIGHT COUNTY COMMUNITY ACTION INC 130 WEST DIVISION STREET MAPLE LAKE, MN 55358	41-0904809	501(C)(3)	5,000				TO SUPPORT WRIGHT COUNTY COMMUNITY ACTION'S COMMUNITY ASSESSMENT PROJECT TO ASSESS AND UNDERSTAND NEEDS OF LOW-INCOME RESIDENTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YOUTH INVESTMENT FOUNDATION BOX 316 MEDINA, MN 55340	23-7058853	501(C)(3)	5,000				TO SUPPORT CAMPING OPPORTUNITIES AND WEEKLY AREA YOUTH GROUP FOR AT-RISK YOUTH

Schedule J (Form 990)	<div>Compensation Information</div> <div>For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees</div> <div>▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990.</div> <div>▶ Go to www.irs.gov/Form990 for instructions and the latest information.</div>	OMB No 1545-0047
		2018
		Open to Public Inspection

Department of the Treasury Internal Revenue Service	Name of the organization INITIATIVE FOUNDATION	Employer identification number 36-3451562
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Part I Questions Regarding Compensation		Yes	No
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.			
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use		
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence		
<input checked="" type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees		
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.	1b	Yes	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract		
<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study		
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee		
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?	4a		No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
Only 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?	5a		No
b Any related organization?	5b		No
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?	6a		No
b Any related organization?	6b		No
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 in lines 5 and 6? If "Yes," describe in Part III.	7		No
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.	8		No
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

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

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

[illegible]

Part III **Supplemental Information**

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

Return Reference	Explanation
PART I, LINE 1A	FOR PERSONAL USE OF COMPANY VEHICLE
PART I, LINE 1B	THERE ARE INTERNAL PROCEDURES TO ADDRESS TREATMENT OF THESE EXPENSES
PART I, LINE 4B	\$1,000 457(B) PLAN CONTRIBUTIONS WERE MADE TO ELIGIBLE EMPLOYEES

Schedule L

(Form 990 or 990-EZ)

Transactions with Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ.
▶Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
INITIATIVE FOUNDATION

Employer identification number
36-3451562

Part I

Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only)
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No

2

Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 ▶ \$

3

Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$

Part II

Loans to and/or From Interested Persons.
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
Total						▶ \$						

Part III

Grants or Assistance Benefiting Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) RICK BAUERLY	TRUSTEE	422,064	GIFT OF UNITS FOR FUND		No
(2) RICK BAUERLY	TRUSTEE	500,000	CONTRIBUTIONS FROM PARTNERSHIP TO PARTNER FUND		No
(3) PAT GORHAM	TRUSTEE	30,000	PARTICIPATING LENDER AT BANK WITH OWNERSHIP		No

Part V Supplemental Information

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

Return Reference	Explanation
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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization
INITIATIVE FOUNDATION

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2018

**Open to Public
Inspection**

Employer identification number

36-3451562

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	RICK BAUERLY IS AN INITIATIVE FOUNDATION TRUSTEE RICK BAUERLY IS A PRINCIPAL OWNER FOR GRANITE EQUITY LLC

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE FORM 990 IS PROVIDED TO THE FULL BOARD ELECTRONICALLY AS PART OF MONTHLY BOARD MEETING MATERIALS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	BOARD MEETINGS BEGIN WITH A QUESTION ASKING MEMBERS TO DISCLOSE ANY POTENTIAL CONFLICTS OF INTEREST GRANT TEAM MEMBERS ARE REQUIRED TO DISCLOSE POTENTIAL CONFLICTS OF INTEREST PRIOR TO DISCUSSING GRANT APPLICATIONS AND RECUSE THEMSELVES FINANCE APPROVES ALL PAYMENTS AND CONSIDERS POTENTIAL FOR CONFLICTS OF INTEREST ANNUALLY ALL DONATION AND PAYMENT TRANSACTIONS ARE REVIEWED BY FINANCE

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	A COMPENSATION STUDY WAS CONDUCTED BY AN EXTERNAL FIRM A REVIEW OF MARKET COMPENSATION FOR COMPARABLE FOUNDATIONS PLUS OTHER MINNESOTA INITIATIVE FOUNDATIONS IS CONDUCTED ANNUALLY A MARKET COMPENSATION STUDIES ARE REVIEWED FROM THE MINNESOTA COUNCIL ON FOUNDATIONS AND COUNCIL OF FOUNDATIONS SHRM RESOURCES ARE ALSO USED ALONG WITH TEMP AGENCY COMPENSATION WAGE REFERENCES

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 18	UPON REQUEST WE ALSO PRODUCE AN ANNUAL REPORT THAT IS AVAILABLE FOR THE PUBLIC

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S FINANCIAL STATEMENTS ARE MADE AVAILABLE WITHIN THE ANNUAL REPORT OR UPON REQUEST THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE NOT AVAILABLE TO THE PUBLIC