

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

Return of Organization Exempt From Income Tax

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

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

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

OMB No 1545-0047
2019
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 01-01-2019, and ending 12-31-2019

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

C Name of organization
INITIATIVE FOUNDATION

Doing business as

Number and street (or P O box if mail is not delivered to street address) Room/suite
405 FIRST STREET SE

City or town, state or province, country, and ZIP or foreign postal code
LITTLE FALLS, MN 56345

D Employer identification number
36-3451562

E Telephone number
(320) 632-9255

G Gross receipts \$ 26,385,549

F Name and address of principal officer
MATT VARILEK
405 FIRST STREET SE
LITTLE FALLS, MN 56345

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

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

H(c) Group exemption number ▶

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

J Website: ▶ WWW IFOUND ORG

K Form of organization Corporation Trust Association Other ▶

L Year of formation 1986

M State of legal domicile MN

Part I Summary

1 Briefly describe the organization's mission or most significant activities
TO EMPOWER PEOPLE TO BUILD THRIVING COMMUNITIES AND A VIBRANT REGION ACROSS CENTRAL MINNESOTA

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

3 Number of voting members of the governing body (Part VI, line 1a)	3	15
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	15
5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	33
6 Total number of volunteers (estimate if necessary)	6	274
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	49,938
7b Net unrelated business taxable income from Form 990-T, line 39	7b	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	6,049,559	5,198,038
9 Program service revenue (Part VIII, line 2g)	734,255	658,981
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,350,939	4,312,546
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	137,866	121,660
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	9,272,619	10,291,225
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	2,175,100	1,983,908
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	2,396,004	2,346,947
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶419,038		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,353,122	899,700
18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	5,924,226	5,230,555
19 Revenue less expenses Subtract line 18 from line 12	3,348,393	5,060,670
	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	71,595,102	81,789,533
21 Total liabilities (Part X, line 26)	7,361,900	5,480,099
22 Net assets or fund balances Subtract line 21 from line 20	64,233,202	76,309,434

Part II Signature Block

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

Sign Here
Signature of officer: ***** Date: 2020-06-18
MATT VARILEK PRESIDENT
Type or print name and title

Paid Preparer Use Only
Print/Type preparer's name: Preparer's signature: Date: 2020-06-18
Check if self-employed PTIN: P00066049
Firm's name: ▶ SCHLENNER WENNER & CO CPA'S PA Firm's EIN: ▶ 41-1656121
Firm's address: ▶ 630 ROOSEVELT RD STE 201 Phone no: (320) 251-0286
ST CLOUD, MN 56301

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

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 \$ 612,167 including grants of \$ 460,705) (Revenue \$ 8,172)
See Additional Data

4b (Code) (Expenses \$ 1,196,925 including grants of \$ 177,581) (Revenue \$ 635,759)
See Additional Data

4c (Code) (Expenses \$ 119,352 including grants of \$) (Revenue \$ 20,690)
See Additional Data

(Code) (Expenses \$ 1,745,527 including grants of \$ 1,345,622) (Revenue \$)

COMMUNITY PHILANTHROPY IN SUPPORT OF ITS VISION TO CULTIVATE A LASTING CULTURE OF GENEROSITY, STAFF PROVIDED TRAINING AND OTHER ASSISTANCE TO LOCAL COMMUNITY VOLUNTEERS INVOLVED WITH THE FOUNDATION'S 127 PARTNER/COMPONENT FUNDS. FOUR TRAINING SESSIONS ON THE TOPICS OF MARKETING, FUNDRAISING AND PLANNED GIVING WERE DELIVERED TO 112 ENGAGED PARTICIPANTS FROM PARTNER/COMPONENT FUND ADVISORY BOARDS AND OTHER NONPROFIT BOARD MEMBERS. OF THE 11 NEW FUNDS ESTABLISHED IN 2019, THE MAJORITY ARE AGENCY FUNDS

4d Other program services (Describe in Schedule O)
(Expenses \$ 1,745,527 including grants of \$ 1,345,622) (Revenue \$)

4e Total program service expenses ▶ 3,673,971

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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	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		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		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		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	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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		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		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	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		
11a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	Yes	
11b	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	Yes	
11c	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		No
11d	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		No
11e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		No
11f	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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	Yes	
12b	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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?		No
14b	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		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		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		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)		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	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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		No
20b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	Yes	

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, and Yes/No columns. Rows include questions 22 through 38 regarding organizational reporting and compliance.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question ID, Question Text, and Yes/No columns. Rows include questions 1a, 1b, and 1c regarding IRS filings and gaming.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

<p>2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return</p>	<p>2a 33</p>		
<p>b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</p>		2b	Yes
<p>3a Did the organization have unrelated business gross income of \$1,000 or more during the year?</p>		3a	Yes
<p>b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O</p>		3b	Yes
<p>4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?</p>		4a	No
<p>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)</p>			
<p>5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</p>		5a	No
<p>b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</p>		5b	No
<p>c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?</p>		5c	
<p>6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?</p>		6a	No
<p>b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</p>		6b	
<p>7 Organizations that may receive deductible contributions under section 170(c).</p>			
<p>a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?</p>		7a	Yes
<p>b If "Yes," did the organization notify the donor of the value of the goods or services provided?</p>		7b	Yes
<p>c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?</p>		7c	No
<p>d If "Yes," indicate the number of Forms 8282 filed during the year</p>	<p>7d </p>		
<p>e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</p>		7e	No
<p>f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</p>		7f	No
<p>g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?</p>		7g	
<p>h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?</p>		7h	
<p>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?</p>		8	
<p>9 Sponsoring organizations maintaining donor advised funds.</p>			
<p>a Did the sponsoring organization make any taxable distributions under section 4966?</p>		9a	
<p>b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?</p>		9b	
<p>10 Section 501(c)(7) organizations. Enter</p>			
<p>a Initiation fees and capital contributions included on Part VIII, line 12</p>	<p>10a </p>		
<p>b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</p>	<p>10b </p>		
<p>11 Section 501(c)(12) organizations. Enter</p>			
<p>a Gross income from members or shareholders</p>	<p>11a </p>		
<p>b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)</p>	<p>11b </p>		
<p>12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?</p>			
<p>b If "Yes," enter the amount of tax-exempt interest received or accrued during the year</p>	<p>12b </p>	12a	
<p>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</p>			
<p>a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O</p>		13a	
<p>b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans</p>	<p>13b </p>		
<p>c Enter the amount of reserves on hand</p>	<p>13c </p>		
<p>14a Did the organization receive any payments for indoor tanning services during the tax year?</p>		14a	No
<p>b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O</p>		14b	
<p>15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N</p>		15	No
<p>16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O</p>		16	No

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



Section A. Governing Body and Management

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

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

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

Section C. Disclosure

- 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
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

See instructions for the order in which to list the persons above

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(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) TRACI TAPANI TRUSTEE/CHAIR	2 00	X		X				0	0	0
(7) JULIE NELSON TRUSTEE	1 00	X						0	0	0
(8) TIM NELSON 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) TERI HOGGARTH TRUSTEE	1 00	X						0	0	0
(15) KIM ELLINGSON TRUSTEE/VICE-CHAIR	2 00	X		X				0	0	0
(16) MATT VARILEK PRESIDENT	40 00			X				181,651	0	29,965
(17) LYNN BUSHINGER COO/CFO/TREASURER	40 00			X				112,634	0	23,741

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a			
	b Membership dues	1b	11,075		
	c Fundraising events	1c	65,208		
	d Related organizations	1d			
	e Government grants (contributions)	1e	1,059,281		
	f All other contributions, gifts, grants, and similar amounts not included above	1f	4,062,474		
	g Noncash contributions included in lines 1a - 1f \$	1g	9,788		
	h Total. Add lines 1a-1f		5,198,038		

Program Service Revenue			(A)	(B)	(C)	(D)
	Business Code					
2a REVOLVING LOAN INTEREST	522100		606,038	606,038		
b LOAN ADMIN FEE	900099		27,821	27,821		
c EVENTS AND WORKSHOP REGISTRATIONS	900099		25,122	25,122		
d						
e						
f All other program service revenue						
g Total. Add lines 2a-2f.		658,981				

Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			1,579,228			1,579,228	
	4 Income from investment of tax-exempt bond proceeds							
	5 Royalties							
	6a Gross rents	(i) Real	6a	5,640				
			6b Less rental expenses	0				
		(ii) Personal	6c	5,640				
		d Net rental income or (loss)			5,640	5,640		
	7a Gross amount from sales of assets other than inventory	(i) Securities	7a	18,775,116	13,204			
			7b Less cost or other basis and sales expenses	16,055,002	0			
		(ii) Other	7c	2,720,114	13,204			
		d Net gain or (loss)			2,733,318			2,733,318
	8a Gross income from fundraising events (not including \$ 65,208 of contributions reported on line 1c) See Part IV, line 18		8a		97,349			
		b Less direct expenses	8b		39,322			
		c Net income or (loss) from fundraising events			58,027			58,027
	9a Gross income from gaming activities See Part IV, line 19		9a					
		b Less direct expenses	9b					
	c Net income or (loss) from gaming activities							
	10a Gross sales of inventory, less returns and allowances		10a					
		b Less cost of goods sold	10b					
	c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	Business Code							
11a ADVERTISING	541860		49,938		49,938			
b OTHER INCOME	900099		8,055			8,055		
c								
d All other revenue								
e Total. Add lines 11a-11d			57,993					
12 Total revenue. See instructions			10,291,225	664,621	49,938		4,378,628	

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	1,826,280	1,826,280		
2 Grants and other assistance to domestic individuals See Part IV, line 22	157,628	157,628		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	347,991	95,412	203,087	49,492
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	1,523,907	873,395	431,545	218,967
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	63,973	36,184	19,198	8,591
9 Other employee benefits	283,522	159,567	85,236	38,719
10 Payroll taxes	127,554	68,065	40,909	18,580
11 Fees for services (non-employees)				
a Management				
b Legal	7,643	1,392	6,251	
c Accounting	30,574		30,574	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	88,986		88,986	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	285,740	259,100	20,020	6,620
12 Advertising and promotion	44,857	28,774	11,568	4,515
13 Office expenses	80,848	44,238	21,480	15,130
14 Information technology	193,462	113,062	59,294	21,106
15 Royalties				
16 Occupancy	92,439	51,525	29,163	11,751
17 Travel	37,267	28,397	4,087	4,783
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	27,925	19,384	7,214	1,327
20 Interest	34,044	34,044		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	63,779	36,512	18,346	8,921
23 Insurance	15,469	8,359	5,068	2,042
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	139,470	83,112	47,558	8,800
b IQ MAG/ANNUAL REPORT	88,053	80,091	7,962	
c EVENT EXPENSE	50,089	50,089		
d BAD DEBTS DEOBLIGATIONS	-380,945	-380,639		-306
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	5,230,555	3,673,971	1,137,546	419,038
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	2,255,464	1	2,632,356
	2 Savings and temporary cash investments	725,702	2	1,172,540
	3 Pledges and grants receivable, net	1,607,756	3	1,052,203
	4 Accounts receivable, net	45,583	4	66,757
	5 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net	9,239,986	7	8,522,966
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	77,407	9	47,260
	10a Land, buildings, and equipment—cost or other basis—Complete Part VI of Schedule D	10a 3,017,409		
	b Less accumulated depreciation	10b 1,318,288	1,725,088	10c 1,699,121
	11 Investments—publicly traded securities	51,072,608	11	60,598,116
	12 Investments—other securities—See Part IV, line 11	4,845,508	12	5,998,214
	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)	71,595,102	16	81,789,533	
Liabilities	17 Accounts payable and accrued expenses	399,066	17	433,351
	18 Grants payable	985,313	18	195,414
	19 Deferred revenue	1,566,734	19	126,385
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability—Complete Part IV of Schedule D	1,076,581	21	1,418,058
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties	1,237,075	23	1,116,197
	24 Unsecured notes and loans payable to unrelated third parties	2,097,131	24	2,190,694
	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	7,361,900	26	5,480,099
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	33,341,962	27	41,583,518
	28 Net assets with donor restrictions	30,891,240	28	34,725,916
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
32 Total net assets or fund balances	64,233,202	32	76,309,434	
33 Total liabilities and net assets/fund balances	71,595,102	33	81,789,533	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	10,291,225
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,230,555
3	Revenue less expenses Subtract line 2 from line 1	3	5,060,670
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	64,233,202
5	Net unrealized gains (losses) on investments	5	7,015,562
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	76,309,434

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990 Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain 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
 Separate basis Consolidated basis Both consolidated and separate basis
- 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
 Separate basis Consolidated basis Both consolidated and separate basis
- 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
- 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?
- 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	No
2a		No
2b	Yes	
2c	Yes	
3a	Yes	
3b	Yes	

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

Form 990 (2019)

Form 990, Part III, Line 4a:

COMMUNITY AND NONPROFIT DEVELOPMENT CHILD CARE SOLUTIONS IN 2019, THE FOUNDATION LAUNCHED A NEW PROGRAM TO WORK IN FOUR PILOT COMMUNITIES TO EXPAND ACCESS TO QUALITY, AFFORDABLE CHILD CARE CENTRAL MINNESOTA HAS THE GREATEST DEFICIT OF CHILD CARE IN GREATER MINNESOTA, WHICH IS RECOGNIZED AS A MAJOR BARRIER TO WORKFORCE ATTRACTION AND RETENTION AT A TIME OF RECORD-LOW UNEMPLOYMENT IN ADDITION, BECAUSE SO MANY PROVIDERS FACE CHALLENGES RELATED TO PROFITABILITY, THE PROGRAM EMPHASIZES AND OFFERS SOUND BUSINESS MANAGEMENT TRAINING AND TECHNICAL ASSISTANCE IT ALSO SEEKS TO DEVELOP PARTNERSHIPS WITH LOCAL UNITS OF GOVERNMENT (ECONOMIC DEVELOPMENT AUTHORITIES) AND EMPLOYERS TO EXPLORE ALTERNATIVE MODELS (SUCH AS ALLOWING A PROVIDER TO OPERATE ON EMPLOYER SPACE IN EXCHANGE FOR PRIORITY PLACEMENT OF EMPLOYEES' CHILDREN) THIS PROGRAM IS A PARTNERSHIP WITH FIRST CHILDREN'S FINANCE, A MINNEAPOLIS-BASED COMMUNITY DEVELOPMENT FINANCIAL INSTITUTION WORKING EXCLUSIVELY WITH CHILD CARE PROVIDERS, AND IS FUNDED BY THE MINNESOTA DEPARTMENT OF HUMAN SERVICES ENERGY TRANSITION STAFF CONTINUE TO HELP THE CITY OF BECKER AND SHERBURNE COUNTY PREPARE FOR THE DECOMMISSIONING OF UNITS AT THE LARGEST COAL-FIRED POWER PLANT IN THE MIDWEST EFFORTS TO DIVERSIFY THE BECKER ECONOMY HAVE RESULTED IN THE GROUNDBREAKING 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 2019, THE INITIATIVE FOUNDATION MADE COMMUNITY DEVELOPMENT GRANT AWARDS TOTALING \$122,500 DISASTER RESPONSE 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 IN 2019, TWO DOZEN COMMUNITIES RECEIVED TRAINING SUPPORTED BY THE INITIATIVE FOUNDATION ON HOW TO PREPARE A "WHOLE COMMUNITY" DISASTER PREPAREDNESS PLAN THE EFFORT INVOLVED BOTH THE "COMMAND AND CONTROL" APPARATUS OF FIRE/POLICE AND OTHER EMERGENCY RESPONSE PROFESSIONALS WITH THE VOLUNTEER AND SOCIAL CAPITAL RESOURCES OF NONPROFITS, FAITH LEADERS AND OTHER CIVIC INSTITUTIONS THE FOUNDATION PROVIDED THE CITY OF CAMBRIDGE WITH A CHALLENGE GRANT OF \$10,000 TO CREATE ITS ENDOWED FUND TO SUPPORT FUTURE DISASTER RESPONSE EFFORTS HEALTHY LAKES AND RIVERS PARTNERSHIP (HLRP) THE FOUNDATION COMPLETED THE FINAL YEAR OF FIELDWORK ASSOCIATED WITH A \$4 MILLION GRANT FROM THE LESSARD-SAMS OUTDOOR HERITAGE COUNCIL TO SUPPORT INNOVATIVE PILOT PROJECTS THAT PREVENT THE SPREAD OF AQUATIC INVASIVE SPECIES (AIS) FIFTEEN OF 17 FUNDED PROJECTS REMAIN ACTIVE PROJECTS RANGE FROM DEPLOYING AN INTEGRATED PEST MANAGEMENT (IPM) STRATEGY FOR THE 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, FOUNDATION FUNDING HAS SUPPORTED TRAINING INSPECTORS TO DE-ESCALATE CONFRONTATIONS WITH RECREATIONALISTS 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 GRANT COMMITMENTS FROM THE FOUNDATION THROUGH JUNE 2020 GRANTMAKING AND SPECIAL INITIATIVES THE INITIATIVE FOUNDATION AWARDED \$1.9 MILLION IN GRANTS, SCHOLARSHIPS AND FELLOWSHIPS TO 448 ORGANIZATIONS FOR ALL PROGRAMS IN AGGREGATE NONPROFIT DEVELOPMENT FOUNDATION STAFF PILOTTED THREE COHORTS OF OUR FINANCIAL RESILIENCY PROGRAM PROGRAMMING IS OFFERED IN TWO TRACKS ONE FOCUSED ON CLARIFYING AND REFINING EACH NONPROFIT'S BUSINESS MODEL, AND THE SECOND FOCUSED EXCLUSIVELY ON DONOR DEVELOPMENT CAPACITY-BUILDING WITH GUIDANCE AND SUPPORT FROM FOUNDATION STAFF, VARIOUS OTHER NONPROFIT TRAINING PARTNERS AND BUSINESS AND MARKETING CONSULTANTS, A TOTAL OF 17 ORGANIZATIONS (INVOLVING 67 INDIVIDUALS) PARTICIPATED IN FINANCIAL RESILIENCY PROGRAMS ADVANCING THEIR FUNDRAISING, FINANCIAL MANAGEMENT, LEADERSHIP, MARKETING AND PROGRAM-DELIVERY CAPACITY FOUNDATION STAFF AND CONSULTANTS FACILITATED TWO LEADERS CIRCLES FOR NONPROFITS, INVOLVING 19 LEADERS FROM 15 NONPROFIT ORGANIZATIONS THESE PEER-COACHING CIRCLES BUILD LEADERSHIP SKILLS/ABILITIES, HELP MEMBERS IN A CONFIDENTIAL SETTING TO IDENTIFY CONSTRUCTIVE STEPS FOR RESOLVING WORK CHALLENGES AND DECREASE PROFESSIONAL ISOLATION MOST LEADERS CIRCLES MEMBERS REPORT GAINING NEW SKILLS IN THE AREAS OF PROBLEM-SOLVING, LISTENING, SPEAKING AND TAKING ACTION FOUR QUARTERLY NONPROFIT LUNCHTIME LEARNING SESSIONS, COORDINATED BY THE INITIATIVE FOUNDATION IN CONJUNCTION WITH LOCAL PARTNERS, WERE HELD IN ST. CLOUD AND BRAINERD EIGHTY NONPROFIT PROFESSIONALS PARTICIPATED IN ONE OR MORE LUNCHTIME LEARNING SESSIONS

Form 990, Part III, Line 4b:

ECONOMIC DEVELOPMENT/BUSINESS LENDING/LOANS THE INITIATIVE FOUNDATION ORIGINATED LOANS TOTALING \$1.9 MILLION DURING 2019. THE EFFORT LEVERAGED \$28.7 MILLION FROM OUTSIDE SOURCES OF CAPITAL. WE ESTIMATE THAT THIS VOLUME OF LOANS CONTRIBUTED SIGNIFICANTLY TO THE CREATION OF 71 JOBS AND THE RETENTION OF 101. WE CONTINUED TO ENSURE THAT OUR ENTIRE REGION HAS ACCESS TO MICRO-LENDING PROGRAMS. MANY ORGANIZATIONS PARTNER WITH US IN THIS EFFORT, INCLUDING THE REGION 5 DEVELOPMENT COMMISSION, SOUTHWEST INITIATIVE FOUNDATION, WELLS FARGO DIVERSE COMMUNITY CAPITAL, U.S. BANK, AND ST. CLOUD STATE UNIVERSITY. TO STRENGTHEN OUR MICRO-LENDING NETWORK, WE MAINTAIN FUNDING AND REFERRAL RELATIONSHIPS WITH THE SMALL BUSINESS DEVELOPMENT CENTERS LOCATED IN OUR REGION INITIATORS FELLOWSHIP. THE ECONOMIC DEVELOPMENT TEAM CELEBRATED THE SELECTION OF SEVEN INDIVIDUALS FROM ACROSS THE 41 COUNTIES SERVED BY THE INITIATIVE FOUNDATION, SOUTHWEST INITIATIVE FOUNDATION AND WEST CENTRAL INITIATIVE. THESE SEVEN FELLOWS MAKE UP OUR SECOND COHORT OF THE INITIATORS FELLOWSHIP. THEIR TWO-YEAR FELLOWSHIP BEGAN IN JANUARY 2020. THE INITIATORS FELLOWSHIP IS A TWO-YEAR SUITE OF SUPPORTS-INCLUDING TRAINING, MENTORING, AND FUNDING-FOR BEGINNING OR EARLY-STAGE SOCIAL ENTREPRENEURS IN CENTRAL, SOUTHWEST AND WEST CENTRAL MINNESOTA. THESE GREATER MINNESOTA LEADERS ARE HELPING TO BUILD THE ECONOMY AND QUALITY OF LIFE IN THEIR HOMETOWNS BY DEVELOPING PURPOSE-DRIVEN, FOR-PROFIT BUSINESSES AND NONPROFIT ORGANIZATIONS THAT HAVE A POSITIVE SOCIAL OR ENVIRONMENTAL IMPACT. ENTERPRISE ACADEMY THE ECONOMIC DEVELOPMENT TEAM CONTINUES TO OFFER THE ENTERPRISE ACADEMY PROGRAM, PROVIDING BUSINESS TRAINING, ONE-ON-ONE TECHNICAL ASSISTANCE, AND DIRECT LENDING TO LOWER-INCOME ENTREPRENEURS. THIS PROGRAM HAS SERVED MORE THAN 40 LOW-INCOME OR MINORITY ENTREPRENEURS IN THE ST. CLOUD AREA SINCE ITS INCEPTION IN 2018. THE INITIAL TARGET POPULATION OF THE ENTERPRISE ACADEMY WAS NEW AMERICANS FROM THE EAST AFRICAN COMMUNITY IN ST. CLOUD, AND THE PROGRAM HAS EXPANDED TO SERVE THE GREATER AFRICAN AMERICAN COMMUNITY IN 2019. ENTERPRISE ACADEMY WILL EXPAND AGAIN IN 2020, OFFERING THE PROGRAM IN THE BRAINERD AREA IN ADDITION TO CONTINUING IN THE ST. CLOUD AREA. COMMUNITY ENGAGEMENT 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. THE FOUNDATION PROVIDED FUNDING AND OTHER SUPPORT FOR LOCALLY DRIVEN STRATEGIC PLANNING, LINKING TO OTHER FUNDERS AND JOB CREATION OPPORTUNITIES, MEMBERSHIP GROWTH EFFORTS, AND DEVELOPMENT OF TECHNOLOGY TOOLS AND/OR PROGRAMS TO ATTRACT AND RETAIN SKILLED WORKERS. ATTRACTION, DEVELOPMENT, AND RETENTION OF A SKILLED WORKFORCE REMAIN A PRIMARY INTEREST TO EMPLOYERS THROUGHOUT OUR REGION, AND A NAMED STRATEGIC PRIORITY OF THE FOUNDATION.

Form 990, Part III, Line 4c:

COMMUNICATIONS & IQ MAGAZINE THE FOUNDATION IN 2019 PUBLISHED TWO EDITIONS OF IQ MAGAZINE 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 2019 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 REPURPOSED IN OTHER MEDIA-WEBSITES, EMAIL MARKETING, SOCIAL MEDIA-TO COMMUNICATE TO OUR AUDIENCES THE CONTINUED NEED FOR ONGOING GENEROSITY IN THE REGION

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 instructions and the latest information.

2019

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) and 170(b)(1)(A)(vi)

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")	3,982,955	4,208,565	5,977,516	6,049,559	5,198,038	25,416,633
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	3,982,955	4,208,565	5,977,516	6,049,559	5,198,038	25,416,633
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)						9,300,057
6	Public support. Subtract line 5 from line 4						16,116,576

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4	3,982,955	4,208,565	5,977,516	6,049,559	5,198,038	25,416,633
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	970,388	982,684	1,091,586	1,325,709	1,584,868	5,955,235
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.)	51,227	27,982	5,244	8,143	8,055	100,651
11	Total support. Add lines 7 through 10						31,472,519
12	Gross receipts from related activities, etc. (see instructions)					12	3,218,600

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

14	Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	51.210 %
15	Public support percentage for 2018 Schedule A, Part II, line 14	15	52.510 %

16a 33 1/3% support test—2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization **b 33 1/3% support test—2018.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization **17a 10%-facts-and-circumstances test—2019.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization **b 10%-facts-and-circumstances test—2018.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization **18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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 2019 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2018 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2019 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2018 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2019. 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—2018. 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>		

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

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

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

- 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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2019 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-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2019			
a From 2014.			
b From 2015.			
c From 2016.			
d From 2017.			
e From 2018.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2019 from Section D, line 7			
\$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2019, 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 2019 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 2020. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2015.			
b Excess from 2016.			
c Excess from 2017.			
d Excess from 2018.			
e Excess from 2019.			

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 - 2015 AMOUNT \$ 31,106 OTHER INCOME - 2015 AMOUNT \$ 20,121 2016 AMOUNT \$ 27,982 2017 AMOUNT \$ 5,244 2018 AMOUNT \$ 8,143 2019 AMOUNT \$8,055

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2019

Open to Public Inspection

▶ 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 instructions and the latest information.

Department of the Treasury
Internal Revenue Service

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	21	
2 Aggregate value of contributions to (during year)	734,692	
3 Aggregate value of grants from (during year)	535,154	
4 Aggregate value at end of year	3,715,529	

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

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

- 1** Purpose(s) of conservation easements held by the organization (check all that apply)
- Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area
- Protection of natural habitat Preservation of a certified historic structure
- Preservation of open space
- 2** Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year
- | | Held at the End of the Year |
|---|-----------------------------|
| a Total number of conservation easements | 2a |
| b Total acreage restricted by conservation easements | 2b |
| c Number of conservation easements on a certified historic structure included in (a) | 2c |
| d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register | 2d |
- 3** Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____
- 4** Number of states where property subject to conservation easement is located ▶ _____
- 5** Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No
- 6** Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____
- 7** Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____
- 8** Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No
- 9** In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

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

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

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

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

Part IV Escrow and Custodial Arrangements.

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

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

- b** If "Yes," explain the arrangement in Part XIII and complete the following table
- 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	48,811,030	52,827,997	47,521,361	45,268,612	47,230,663
b Contributions	1,250,994	1,072,154	840,759	930,575	1,433,411
c Net investment earnings, gains, and losses	9,932,589	-3,389,553	7,512,426	3,421,606	-1,081,691
d Grants or scholarships					
e Other expenditures for facilities and programs	2,192,862	1,699,568	3,046,549	2,099,432	2,313,771
f Administrative expenses					
g End of year balance	57,801,751	48,811,030	52,827,997	47,521,361	45,268,612

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

- a** Board designated or quasi-endowment ▶ 52 520 %
- b** Permanent endowment ▶ 39 370 %
- c** Temporarily restricted endowment ▶ 8 110 %

The percentages on lines 2a, 2b, and 2c should equal 100%

- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by

- (i)** unrelated organizations
- (ii)** related organizations

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

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

- 4** Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		768,200		768,200
b Buildings		1,782,183	885,979	896,204
c Leasehold improvements				
d Equipment		467,026	432,309	34,717
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				1,699,121

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	5,998,214	F
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	5,998,214	

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	17,257,123
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	7,015,562
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	7,015,562
3	Subtract line 2e from line 1	3	10,241,561
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	88,986
b	Other (Describe in Part XIII)	4b	-39,322
c	Add lines 4a and 4b	4c	49,664
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	10,291,225

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	5,180,891
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	39,322
e	Add lines 2a through 2d	2e	39,322
3	Subtract line 2e from line 1	3	5,141,569
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	88,986
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	88,986
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	5,230,555

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	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 INTIATIVES PURSUED BY THE DONOR, AND TO SUPPORT ORGANIZATIONS CONDUCTING VARIOUS CHARITABLE ACTIVITIES

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	THE FOUNDATION FOLLOWS FASB ASC TOPIC 740, UNCERTAINTY IN INCOME TAXES THE FOUNDATION IS RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS A NOT-FOR-PROFIT ORGANIZATION UNDER IRS CODE SECTION 501(C)(3) DUE TO THE NOT-FOR-PROFIT NATURE AND PROVISION OF THE FOUNDATION, ALL INCOME AND EXPENSES ATTRIBUTABLE TO THE MISSION OF THE FOUNDATION ARE TAX EXEMPT AND ACCORDINGLY NO PROVISION OR LIABILITY FOR INCOME TAXES HAVE BEEN MADE IN THE FINANCIAL STATEMENTS AND CONTRIBUTIONS TO THE FOUNDATION ARE TAX DEDUCTIBLE TO DONORS AS ALLOWED BY IRS REGULATIONS HOWEVER, THE FOUNDATION IS REQUIRED TO PAY STATE AND FEDERAL INCOME TAXES ON UNRELATED BUSINESS INCOME IF THE FOUNDATION WERE TO ENGAGE IN ANY ACTIVITIES THAT RESULTED IN UNRELATED BUSINESS INCOME, A TAX WOULD BE ASSESSED ON THAT ACTIVITY THE FOUNDATION IS SUBJECT TO UNRELATED BUSINESS INCOME TAX WITH RESPECT TO ADVERTISING INCOME AND INVESTMENT IN PARTNERSHIPS THE FOUNDATION IS OPEN AND SUBJECT TO EXAMINATION GENERALLY FOR THREE YEARS AFTER THE FILING DATE

Supplemental Information

Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	FUNDRAISING EXPENSES REPORTED UNDER INCOME -39,322

Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	FUNDRAISING EXPENSES REPORTED UNDER INCOME 39,322

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

2019

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.
- | | |
|---|---|
| <p>a <input type="checkbox"/> Mail solicitations</p> <p>b <input type="checkbox"/> Internet and email solicitations</p> <p>c <input type="checkbox"/> Phone solicitations</p> <p>d <input type="checkbox"/> In-person solicitations</p> | <p>e <input type="checkbox"/> Solicitation of non-government grants</p> <p>f <input type="checkbox"/> Solicitation of government grants</p> <p>g <input type="checkbox"/> Special fundraising events</p> |
|---|---|
- 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 10 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			
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	(b) Event #2	(c) Other events	(d) Total events
	<u>TRCF GOLF EVENT</u> (event type)	<u>ANNUAL SPRING GALA</u> (event type)	<u>12</u> (total number)	(add col (a) through col (c))
1 Gross receipts	26,020	40,441	93,519	159,980
2 Less Contributions	5,738	18,261	38,632	62,631
3 Gross income (line 1 minus line 2)	20,282	22,180	54,887	97,349
4 Cash prizes				
5 Noncash prizes	1,010		2,257	3,267
6 Rent/facility costs		925	7,477	8,402
7 Food and beverages	1,502	5,413	9,998	16,913
8 Entertainment	4,248		200	4,448
9 Other direct expenses	697	383	5,212	6,292
10 Direct expense summary Add lines 4 through 9 in column (d) ▶				39,322
11 Net income summary Subtract line 10 from line 3, column (d) ▶				58,027

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))
	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 | % |
| b | An outside facility | % |

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

Schedule I (Form 990)

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

OMB No 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Name of the organization INITIATIVE FOUNDATION

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...
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

Table with 8 columns: (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. Rows 1-12.

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

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) STIPENDS	25	96,974			
(2) SCHOLARSHIPS	45	49,750			
(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 GENERALLY 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
ACTIVE CENTRAL MN 1825 34TH ST NE SAUK RAPIDS, MN 56379	83-2118678	501(C)(3)	15,000				TO SUPPORT THE MISSION OF THE ORGANIZATION
ANDERSON CENTER 122 12TH AVENUE NORTH SUITE 102 ST CLOUD, MN 56303	41-1911774	501(C)(3)	10,000				TO INCREASE ACCESSIBILITY TO HIGH QUALITY TRAINING THAT SUPPORTS NEW AND EXPANDING BUSINESSES IN GREATER MINNESOTA

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 PROVIDE SCHOLARSHIPS FOR ENTREPRENEURS AND NONPROFIT LEADERS
ANDERSON CENTER 122 12TH AVENUE NORTH SUITE 102 ST CLOUD, MN 56303	41-1911774	501(C)(3)	15,000				TO SUPPORT THE MISSION OF THE ORGANIZATION

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
ANISHINABE LEGAL SERVICES INC PO BOX 157 CASS LAKE, MN 56633	41-0960032	501(C)(3)	5,000				FOR ORGANIZATIONAL GROWTH AND TRAINING RELATED TO FUND DEVELOPMENT
AVIVO 1900 CHICAGO AVENUE MINNEAPOLIS, MN 55404	41-0828779	501(C)(3)	5,000				FOR WORKFORCE TRAINING FOR IMMIGRANTS AND ENGLISH AS A SECOND LANGUAGE LEARNERS

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
BERTHA-HEWITT SCHOOL DISTRICT PO BOX 8 BERTHA, MN 56437	41-6008395	SCHOOL DISTRICT	5,000				TO PROVIDE SUPPORT FOR INNOVATIVE CLASSROOM NEEDS FOR BERTHA-HEWITT SCHOOL DISTRICT
BICYCLE ALLIANCE OF MINNESOTA 3745 MINNEHAHA AVENUE SOUTH MINNEAPOLIS, MN 55406	41-1719332	501(C)(3)	7,000				TO PROVIDE TECHNICAL ASSISTANCE AND PLANNING TO HELP COMMUNITIES ACHIEVE "BIKE FRIENDLY" ACCREDITATION

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				FOR ORGANIZATIONAL AND BOARD DEVELOPMENT TRAINING
BRAHAM ELEMENTARY PARENT ORGANIZATION 390 RUSH POINT DRIVE WEST STANCHFIELD, MN 55080	46-3071244	501(C)(3)	5,000				TO SUPPORT THE MISSION OF THE ORGANIZATION

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 W WASHINGTON ST BRAINERD, MN 56401	41-1787694	501(C)(3)	10,000				TO SUPPORT A THIRD YEAR OF AN INNOVATIVE CONTEST TO FILL EMPTY STOREFRONTS AND CREATE PUBLIC ENGAGEMENT IN DOWNTOWN BRAINERD
BRAINERD LAKES AREA ECONOMIC DEVELOPMENT CORPORATION 224 WEST WASHINGTON STREET BRAINERD, MN 56468	41-1543292	501(C)(3)	10,000				TO PROVIDE COMPREHENSIVE SERVICES IN SUPPORT OF ENTREPRENEURS IN THE BRAINERD LAKES AREA

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	5,000				TO SUPPORT INNOVATIVE CLASSROOM INSTRUCTION
BRIDGES OF HOPE 2011 SOUTH 6TH STREET BRAINERD, MN 56401	72-1538846	501(C)(3)	10,000				TO BUILD INNOVATION AND COLLABORATION ACROSS LOCAL SOCIAL SERVICE ORGANIZATIONS

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
BROWERVILLE PUBLIC SCHOOLS 620 PARK AVE N BROWERVILLE, MN 56438	41-6004321	SCHOOL DISTRICT	5,000				TO SUPPORT INNOVATIVE CLASSROOM INSTRUCTION
BROWERVILLE PUBLIC SCHOOLS 620 PARK AVE N BROWERVILLE, MN 56438	41-6004321	SCHOOL DISTRICT	5,000				TO SUPPORT THE MISSION OF THE BROWERVILLE SCHOOL WRESTLING 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
CAMBRIDGE AREA PICKLEBALL ASSOCIATION (CAPA) 2615 MAPLE DRIVE SO CAMBRIDGE, MN 55008	83-3302809	501(C)(3)	10,000				TO SUPPORT THE MISSION OF THE ORGANIZATION
CAMBRIDGE COMMUNITY COLLEGE CENTER FOUNDATION 300 SPIRIT RIVER DRIVE SOUTH CAMBRIDGE, MN 55008	41-1643037	501(C)(3)	25,000				TO SUPPORT THE MISSION OF THE ORGANIZATION

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 ISANTI SCHOOL DISTRICT 625A MAIN STREET N CAMBRIDGE, MN 55008		SCHOOL DISTRICT	5,000				TO SUPPORT EARLY CHILDHOOD DEVELOPMENT
CASS COUNTY ECONOMIC DEVELOPMENT CORPORATION 303 MINNESOTA AVENUE WEST WALKER, MN 56484	41-1873815	501(C)(3)	5,000				TO HELP BUSINESSES WITH 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
CENTRACARE HEALTH FOUNDATION 1406 6TH AVENUE NORTH ST CLOUD, MN 56303	41-1855173	501(C)(3)	5,000				TO SUPPORT CENTRACARE HEALTH FOUNDATION'S EARTH DAY RUNNING EVENT
CENTRAL LAKES COLLEGE 501 W COLLEGE DRIVE BRainerd, MN 56401	41-1697554	UNIT OF GOVERNMENT	10,000				TO PROVIDE ASSISTANCE TO EMERGING AND ESTABLISHED ENTREPRENEURS IN 10 COUNTIES SERVED BY THE 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
CENTRAL MINNESOTA JOBS AND TRAINING SERVICES INC 406 EAST 7TH STREET PO BOX 720 MONTICELLO, MN 55362	41-1484048	501(C)(3)	7,000				TO OFFER AN EMPLOYER SEMINAR SERIES, TITLED OUR UNTAPPED WORKFORCE, WHICH WILL HIGHLIGHT THE BENEFITS OF HIRING FAIR CHANCE WORKERS
CENTRAL MINNESOTA JOBS AND TRAINING SERVICES INC 406 EAST 7TH STREET PO BOX 720 MONTICELLO, MN 55362	41-1484048	501(C)(3)	10,000				TO SUPPORT THE "K12 CONNECTION WEBPAGE" TO HELP EDUCATORS, PARENTS AND STUDENTS LINK WITH MANUFACTURERS FOR CAREER DEVELOPMENT

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
CENTRAL MN HOUSING PARTNERSHIP 37 28TH AVENUE NORTH SUITE 102 ST CLOUD, MN 56303	41-1752558	501(C)(3)	5,000				TO SUPPORT DEVELOPMENT OF A HOUSING PROJECT FOR INDIVIDUALS WITH MENTAL HEALTH ISSUES AND CRIMINAL HISTORIES
CHRIST THE KING CHURCH 720 MAIN STREET NORTH BROWERVILLE, MN 56438			15,000				TO SUPPORT THE MISSION AND OPERATIONS OF CHRIST THE KING CHURCH IN BROWERVILLE

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
CITY OF BECKER PO BOX 250 BECKER, MN 55308	41-6004965	UNIT OF GOVERNMENT	55,000				TO SUPPORT A COMPREHENSIVE PLAN PROCESS, INCLUDING PUBLIC INPUT ON THE DESIRED FUTURE OF TRANSPORTATION, AFFORDABLE HOUSING, LAND USE, AND OTHER POLICIES
CITY OF BRAINERD 501 LAUREL STREET BRAINERD, MN 56401	41-6005001	UNIT OF GOVERNMENT	5,000				TO SUPPORT THE MISSION OF THE ORGANIZATION THROUGH THE PULSE POINT PROJECT

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
CITY OF LITTLE FALLS 100 7TH AVE NE LITTLE FALLS, MN 56345	41-6005321	UNIT OF GOVERNMENT	10,000				TO PROVIDE EXPAND ACCESS ECONOMICALLY SUSTAINABLE QUALITY AFFORDABLE CHILD CARE
CITY OF LITTLE FALLS 100 7TH AVE NE LITTLE FALLS, MN 56345	41-6005321	UNIT OF GOVERNMENT	7,500				TO SUPPORT AN ENGINEERING STUDY TO DETERMINE THE COST OF DELIVERING BROADBAND TO RESIDENTIAL NEIGHBORHOODS OF LITTLE FALLS

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
CITY OF MONTICELLO 505 WALNUT STREET SUITE 1 MONTICELLO, MN 55362	41-6005385	UNIT OF GOVERNMENT	10,000				TO SUPPORT THE COALITION OF UTILITY CITIES (CUC) ORGANIZATION TO DOCUMENT THE ECONOMIC AND BROADER SOCIAL IMPACTS FOR UTILITY CITIES DURING TRANSITION OUT OF UTILITY ECONOMY DEPENDENCE
CITY OF PINE CITY 315 MAIN STREET SOUTH SUITE 100 PINE CITY, MN 55063	41-6005456	UNIT OF GOVERNMENT	25,000				TO SUPPORT THE OUTDOOR RINK FACILITY IMPROVEMENT PROJECT

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
CITY OF WADENA 222 2ND ST SE PO BOX 30 WADENA, MN 564820151		UNIT OF GOVERNMENT	30,000				TO SUPPORT THE DEVELOPMENT OF THE WADENA REGIONAL WELLNESS CENTER
COLLEGE OF SAINT BENEDICT 37 COLLEGE AVE S ST JOSEPH, MN 56374	41-0969244	UNIT OF GOVERNMENT	15,000				TO SUPPORT THE MISSION OF THE COLLEGE OF SAINT BENEDICT THROUGH THE CAPITAL CAMPAIGN

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
COMMUNITYGIVING 1601 EAST HIGHWAY 12 SUITE 9 WILLMAR, MN 56201	36-3412544	501(C)(3)	10,000				TO LAUNCH OF AN INNOVATIVE YOUTH ENTREPRENEURSHIP PROGRAM CALLED WEST STEARNS COUNTY CREATING ENTREPRENEURIAL OPPORTUNITIES (CEO)
COMMUNITYGIVING 1601 EAST HIGHWAY 12 SUITE 9 WILLMAR, MN 56201	36-3412544	501(C)(3)	5,000				TO PROVIDE FUNDS TO ADDRESS A VARIETY OF EMERGENCY ASSISTANCE NEEDS OF LOW INCOME FAMILIES

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
COMMUNITYGIVING 1601 EAST HIGHWAY 12 SUITE 9 WILLMAR, MN 56201	36-3412544	501(C)(3)	10,000				TO SUPPORT LEADERSHIP DEVELOPMENT AND COMMUNITY ENGAGEMENT IN GREATER ST CLOUD
COMMUNITYGIVING 1601 EAST HIGHWAY 12 SUITE 9 WILLMAR, MN 56201	36-3412544	501(C)(3)	6,000				TO SUPPORT THREE BOARD MEMBERS GAIN TRAINING AND CREDENTIALS AS ADMINISTRATORS OF THE INTERCULTURAL DEVELOPMENT INVENTORY

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

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COMMUNITYGIVING 101 7TH AVENUE SOUTH ST CLOUD, MN 56301	36-3412544	501(C)(3)	86,589				TO ESTABLISH A DONOR ADVISED FUND WITH CENTRAL MN COMMUNITY FOUNDATION IN ANNELOISE EDEBURN'S NAME
CONFIDENCE LEARNING CENTER (CLC) 1620 MARY FAWCETT MEMORIAL DRIVE E GULL LAKE, MN 56401	41-0985513	501(C)(3)	5,000				TO PROVIDE A CHALLENGE MATCH TO SURFACE NEW DONORS IN SUPPORT OF THE WINTER SPECIAL OLYMPICS EVENT (FEBRUARY 13-14, 2020)

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

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CROSBY-IRONTON PUBLIC SCHOOLS FOUNDATION DBA CUYUNA LAKES EDUCATION FOUNDAT PO BOX 355 DEERWOOD, MN 56444	41-1855418	501(C)(3)	5,000				TO FUND INNOVATIVE CLASSROOM PROJECTS
CROSBY-IRONTON PUBLIC SCHOOLS FOUNDATION DBA CUYUNA LAKES EDUCATION FOUNDAT PO BOX 355 DEERWOOD, MN 56444	41-1855418	501(C)(3)	5,000				TO SUPPORT CLASSROOM GRANTS FOR THE CROSBY-IRONTON SCHOOLS

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

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CROW WING SOIL AND WATER CONSERVATION DISTRICT 322 LAUREL ST SUITE 22 BRainerd, MN 56401	41-1300519	UNIT OF GOVERNMENT	5,900				TO DEVELOP A SYSTEM OF FILTERS AND A RETENTION POND TO IMPROVE WATER QUALITY
CROW WING SOIL AND WATER CONSERVATION DISTRICT 322 LAUREL ST SUITE 22 BRainerd, MN 56401	41-1300519	UNIT OF GOVERNMENT	5,900				TO WORK WITH AREA FARMERS TO MITIGATE ADVERSE IMPACTS OF AGRICULTURE ON WATER QUALITY

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

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CUYUNA RANGE YOUTH CENTER PO BOX 263 15 3RD AVE SW CROSBY, MN 56441	06-1778801	501(C)(3)	5,000				FOR YOUTH INTERNSHIP PROGRAM TO DEVELOP WORKFORCE SKILLS
ECONOMIC DEVELOPMENT PARTNERSHIP OF WRIGHT COUNTY 6800 ELECTRIC DRIVE PO BOX 525 ROCKFORD, MN 55373	41-1761424	501(C)(3)	10,000				TO USE THE WRIGHT TECHNICAL CENTER TO PROVIDE INCUMBENT WORKER TRAINING OPPORTUNITIES TO HELP ADDRESS THE SKILLED LABOR SHORTAGE IN WRIGHT AND ADJACENT COUNTIES

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

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ELK RIVER SCHOOL DISTRICT 11500 193RD AVENUE NW ELK RIVER, MN 55330	41-6003818	SCHOOL DISTRICT	10,000				TO REPLACE AND UPDATE TOOLS IN THE ROGERS HIGH SCHOOL WOODWORKING DEPARTMENT
ELK RIVER SCHOOL DISTRICT 11500 193RD AVENUE NW ELK RIVER, MN 55330	41-6003818	SCHOOL DISTRICT	7,500				TO SUPPORT THE MISSION OF THE ORGANIZATION THROUGH EDUCATION SCHOLARSHIPS

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

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ELK RIVER SCHOOL DISTRICT 11500 193RD AVENUE NW ELK RIVER, MN 55330	41-6003818	SCHOOL DISTRICT	7,500				TO SUPPORT THE MISSION OF THE ORGANIZATION
ENTERPRISE MINNESOTA INC 2100 SUMMER STREET NE MINNEAPOLIS, MN 55413	41-1595930	501(C)(3)	7,200				TO SUPPORT THE EXECUTIVE HR PEER COUNCIL FOR ENTREPRENEURS WITHIN CENTRAL MINNESOTA

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FAMILY PATHWAYS 6413 OAK STREET NORTH BRANCH, MN 55056	41-1332828	501(C)(3)	7,500				FOR CAPACITY BUILDING FOR A NONPROFIT FOCUSED ON ALLEVIATING POVERTY
FIRST UNITED METHODIST CHURCH OF THE SAINT CLOUD REGION 1107 PINE CONE ROAD S SARTELL, MN 56377		501(C)(3)	5,400				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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FOUNDATION FOR ESSENTIAL NEEDS 701 NORTH 3RD STREET SUITE 203 MINNEAPOLIS, MN 55401	27-4342240	501(C)(3)	5,000				TO SUPPORT STRATEGIC PLANNING, FUND DEVELOPMENT, BOARD TRAINING, AND CAPACITY BUILDING
GOODWILL INDUSTRIES INC 553 FAIRVIEW AVENUE N ST PAUL, MN 55104	41-0706171	501(C)(3)	5,000				TO PROVIDE FINANCIAL SERVICES WORK SKILLS TRAINING TO LOW-INCOME ADULTS IN THE SAINT CLOUD AREA

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

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GREAT RIVER FAMILY PROMISE PO BOX 592 ELK RIVER, MN 55330	39-2074289	501(C)(3)	5,000				TO SUPPORT FUND DEVELOPMENT FOR THE ONLY SHELTER SERVING FAMILIES IN THE ELK RIVER AREA WHO ARE EXPERIENCING HOMELESSNESS
GREATER MINNESOTA WORKER CENTER 1546 6TH AVE SOUTH 63 ST CLOUD, MN 56303	46-3874287	501(C)(3)	7,000				FOR BOARD TRAINING AND PROFESSIONAL GUIDANCE IN LEADERSHIP SUCCESSION PLANNING

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GREATER SAINT CLOUD DEVELOPMENT CORPORATION 501 WEST ST GERMAIN STREET SUITE 100 ST CLOUD, MN 56301	45-2050341	501(C)(3)	5,000				TO SUPPORT THE MISSION OF THE ORGANIZATION THROUGH THE WORKPLACE WELL-BEING INITIATIVE
GREATER ST CLOUD PUBLIC SAFETY FOUNDATION 101 11TH AVE N ST CLOUD, MN 56303	47-5625865	501(C)(3)	69,000				TO SUPPORT THE MISSION OF THE ORGANIZATION

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HANDS ACROSS THE WORLD 1605 GOETTENS WAY SUITE 206 ST CLOUD, MN 56301	68-0576502	501(C)(3)	7,500				TO SUPPORT 100 REFUGEES AND IMMIGRANTS IN THEIR PARTICIPATION IN WORKFORCE TRAININGS IN THE GREATER ST CLOUD AREA
ISANTI COUNTY COMMISSION ON AGING 140 BUCHANAN STREET NORTH SUITE 164 CAMBRIDGE, MN 55008	41-1536740	501(C)(3)	5,000				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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KANABEC COUNTY 18 NORTH VINE STREET MORA, MN 55051	41-6005815	UNIT OF GOVERNMENT	10,000				TO COMPLETE A FEASIBILITY STUDY OF THE KELLING SITE IN MORA FOR THE DEVELOPMENT OF A LARGE WORKFORCE HOUSING PROJECT
LAKE REGION CHRISTIAN SCHOOL 7398 FAIRVIEW RD BAXTER, MN 56425			14,288				TO SUPPORT SCHOLARSHIPS FOR STUDENTS ATTENDING THE SCHOOL AND CLASSROOM ENHANCEMENTS

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

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LAKES & PINES COMMUNITY ACTION COUNCIL INC 1700 MAPLE AVENUE EAST MORA, MN 55051	41-0900982	501(C)(3)	7,000				TO SUPPORT A VOLUNTEER TRANSPORTATION NETWORK
LAKES AREA SENIOR ACTIVITY CENTER 803 KINGWOOD STREET BRainerd, MN 56401	41-1360211	501(C)(3)	5,000				TO SUPPORT OUTREACH EFFORTS TO LOW INCOME INDIVIDUALS AND VETERANS TO PROVIDE A PLACE TO CONNECT WITH OTHERS

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

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LINCOLN EVANGELICAL FREE CHURCH 1354 320TH STREE CUSHING, MN 56443			10,000				TO SUPPORT THE MISSION OF THE ORGANIZATION
LITTLE FALLS SCHOOL DISTRICT 1001 5TH AVE SE LITTLE FALLS, MN 56345	41-6002411	SCHOOL DISTRICT	22,000				TO PROVIDE 11 SCHOLARSHIPS IN THE AMOUNT OF 2,000 EACH TO QUALIFIED GRADUATING SENIORS OF LITTLE FALLS HIGH SCHOOL

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

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LITTLE FALLS SCHOOL DISTRICT 1001 5TH AVE SE LITTLE FALLS, MN 56345	41-6002411	SCHOOL DISTRICT	5,000				TO SUPPORT INNOVATIVE CLASSROOM INSTRUCTION
LITTLE FALLS SCHOOL DISTRICT 1001 5TH AVE SE LITTLE FALLS, MN 56345	41-6002411	SCHOOL DISTRICT	5,400				TO SUPPORT THE MISSION OF THE ORGANIZATION

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MILESTONES PO BOX 548 WAITE PARK, MN 56387	41-1321820	501(C)(3)	5,000				TO ENGAGE AREA EMPLOYERS IN SURFACING INNOVATIVE SOLUTIONS TO THE ACUTE SHORTAGE IN QUALITY AFFORDABLE CHILDCARE
MILESTONES PO BOX 548 WAITE PARK, MN 56387	41-1321820	501(C)(3)	10,000				TO IMPROVE ACCESS TO QUALITY, AFFORDABLE CHILD CARE

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

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MINNESOTA ASSOCIATION FOR VOLUNTEER ADMINISTRATION 970 RAYMOND AVE SUITE G-70 ST PAUL, MN 55114	41-1463366	501(C)(3)	5,000				TO IMPROVE VOLUNTEER RECRUITMENT, MANAGEMENT, AND RETENTION FOR NONPROFITS
MINNESOTA CHAMBER FOUNDATION 400 ROBERT ST N SUITE 1500 ST PAUL, MN 55101	41-1453093	501(C)(3)	5,000				TO PROVIDE SUPPORT FOR "MINNESOTA 2030 EMPOWERING MINNESOTA'S ECONOMY -- A PREVIEW OF GROUNDBREAKING ECONOMIC RESEARCH "

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

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MINNESOTA STATE VETERANS CEMETERY ASSOCIATION 15550 HWY 115 LITTLE FALLS, MN 56345	41-1679519	501(C)(3)	24,080				TO SUPPORT THE HISTORIC EDUCATIONAL ART PROJECT AT THE MINNESOTA STATE VETERANS CEMETERY
MN CHAMBER OF COMMERCE FOUNDATION 400 ROBERTS STREET N SUITE 1500 ST PAUL, MN 55101	41-1453093	501(C)(3)	10,000				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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NEW PATHWAYS INC PO BOX 366 CAMBRIDGE, MN 55008	41-1945426	501(C)(3)	7,000				TO DELIVER PROGRAMMING TO MOVE FAMILIES OUT OF HOMELESSNESS IN THE CAMBRIDGE AREA
NEW PATHWAYS INC PO BOX 366 CAMBRIDGE, MN 55008	41-1945426	501(C)(3)	10,000				TO SUPPORT THE MISSION OF THE ORGANIZATION

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NORTHEAST ENTREPRENEUR FUND INC 309 FIRST STREET NORTHEAST SUITE 103 LITTLE FALLS, MN 56345	36-3566632	501(C)(3)	5,500				TO SUPPORT THE MISSION OF THE WOMENS BUSINESS ALLIANCE OF CENTRAL MN
NORTHEAST ENTREPRENEUR FUND INC 309 FIRST STREET NORTHEAST SUITE 103 LITTLE FALLS, MN 56345	36-3566632	501(C)(3)	5,000				TO SUPPORT THE NEWLY ESTABLISHED WOMENS BUSINESS ALLIANCE OFFICE IN LITTLE FALLS, MN

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

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NORTHERN WATERS LAND TRUST PO BOX 124 WALKER, MN 56484	41-1887906	501(C)(3)	70,000				TO SUPPORT THE MISSION AND OPERATIONS OF THE ORGANIZATION
PINE CITY AREA HISTORY ASSOCIATION 315 MAIN STREET SOUTH SUITE 170 PINE CITY, MN 55063	46-2927420	501(C)(3)	5,000				TO SUPPORT THE MISSION OF THE ORGANIZATION

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PIONEER ELEMENTARY PARENT TEACHER ORGANIZATION (PTO) 112 KARNIC STREET PIERZ, MN 56364	22-3950703	501(C)(3)	5,000				TO SUPPORT INNOVATION IN THE CLASSROOM
PROMISE NEIGHBORHOOD OF CENTRAL MINNESOTA PO BOX 6082 ST CLOUD, MN 56302	45-3233276	501(C)(3)	10,000				TO SUPPORT FUND DEVELOPMENT CAPACITY-BUILDING AND FACILITY PLANNING

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 MISSION OF THE ORGANIZATION
RURAL RENEWABLE ENERGY ALLIANCE PO BOX 89 PINE RIVER, MN 56474	41-1999030	501(C)(3)	7,500				TO ADVANCE ORGANIZATIONAL PLANNING, STRATEGY, BOARD AND ORGANIZATIONAL DEVELOPMENT

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

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RURAL RENEWABLE ENERGY ALLIANCE PO BOX 89 PINE RIVER, MN 56474	41-1999030	501(C)(3)	5,000				TO SUPPORT DEVELOPMENT OF A COMMUNITY-OWNED SOLAR ARRAY IN LITTLE FALLS FOR LOW-INCOME VETERAN FAMILIES
SAINT CLOUD AREA FAMILY YMCA 2001 STOCKINGER DRIVE ST CLOUD, MN 56303	41-0952420	501(C)(3)	5,000				TO SUPPORT THE ST CLOUD AREA YMCA BUILDING

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SAINT CLOUD AREA SCHOOL DISTRICT 1201 2ND STREET SOUTH WAITE PARK, MN 56387	41-6003926	SCHOOL DISTRICT	6,000				TO SUPPORT REGIONAL CAREER EXPLORATION EVENT IN THE GREATER ST CLOUD AREA
SAINT CLOUD ROTARY FOUNDATION 203 COOPER AVENUE SOUTH ST CLOUD, MN 56303	36-3396376	501(C)(3)	5,000				TO SUPPORT YOUTH (AGES 16-23) EXPERIENCING HOMELESSNESS IN CENTRAL MN

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SAINT CLOUD STATE UNIVERSITY 720 4TH AVE SOUTH AS210 ST CLOUD, MN 56301	41-1687554	UNIT OF GOVERNMENT	5,000				TO SUPPORT FEASIBILITY ANALYSIS FOR A NEW CHILD CARE CENTER
SAINT CLOUD STATE UNIVERSITY 720 4TH AVE SOUTH AS210 ST CLOUD, MN 56301	41-1687554	UNIT OF GOVERNMENT	5,000				TO SUPPORT FINANCIAL LITERACY TRAINING FOR ENTREPRENEURS AND SMALL BUSINESS OWNERS IN CENTRAL MINNESOTA

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SAINT CLOUD STATE UNIVERSITY FOUNDATION 720 4TH AVE SOUTH AS210 ST CLOUD, MN 56301	41-6019040	501(C)(3)	40,235				TO SUPPORT OPERATIONS OF THE SMALL BUSINESS DEVELOPMENT CENTER IN ITS SUPPORT OF LOCAL ENTREPRENEURS
SAINT CLOUD STATE UNIVERSITY FOUNDATION 720 4TH AVE SOUTH AS210 ST CLOUD, MN 56301	41-6019040	501(C)(3)	10,000				TO SUPPORT THE MISSION OF THE ORGANIZATION THROUGH THE MLK BREAKFAST EVENT

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SAINT CLOUD TECHNICAL & COMMUNITY COLLEGE FOUNDATION 1540 NORTHWAY DRIVE ST CLOUD, MN 56303	41-1791598	501(C)(3)	15,000				TO SUPPORT THE MISSION OF THE ORGANIZATION
SAINT JOHN'S UNIVERSITY 2850 ABBEY PLAZA PO BOX 2000 COLLEGEVILLE, MN 56321	45-3656162		5,000				TO SUPPORT THE MISSION OF THE ST JOHN'S UNIVERSITY MEN'S WRESTLING PROGRAM

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SAUK RAPIDS-RICE SCHOOL DISTRICT 1835 OSAUKA ROAD NORTHEAST SAUK RAPIDS, MN 56379	41-6000219	SCHOOL DISTRICT	5,000				TO SUPPORT ONGOING COORDINATION OF THE THRIVE COALITION FOR EARLY CHILDHOOD
SAUK RAPIDS-RICE SCHOOL DISTRICT 1835 OSAUKA ROAD NORTHEAST SAUK RAPIDS, MN 56379	41-6000219	SCHOOL DISTRICT	152,319				TO SUPPORT THE MISSION OF THE ORGANIZATION THROUGH THE COMPASS PROGRAM

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SAUK RAPIDS-RICE SCHOOL DISTRICT 1835 OSAUKA ROAD NORTHEAST SAUK RAPIDS, MN 56379	41-6000219	SCHOOL DISTRICT	11,364				TO SUPPORT THE MISSION OF THE ORGANIZATION
SHERBURNE COUNTY 13880 BUSINESS CENTER DR ELK RIVER, MN 55330	41-6005895	UNIT OF GOVERNMENT	20,000				TO ASSIST WITH FUNDING COMPREHENSIVE HOUSING STUDY AND NEEDS ANALYSIS

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
SHERBURNE COUNTY 13880 BUSINESS CENTER DR ELK RIVER, MN 55330	41-6005895	UNIT OF GOVERNMENT	25,000				TO SUPPORT COMMUNITY INPUT IN TRANSPORTATION PLANNING
SHERBURNE COUNTY 13880 BUSINESS CENTER DR ELK RIVER, MN 55330	41-6005895	UNIT OF GOVERNMENT	9,286				TO SUPPORT REGIONAL PLANNING FOR ECONOMIC DEVELOPMENT, COMMUNITY INFRASTRUCTURE, AND AMENITIES

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
SPROUT MN LLC 609 13TH AVE NE SUITE 8 LITTLE FALLS, MN 56345	46-1953536	501(C)(3)	5,000				TO SUPPORT PUBLIC ENGAGEMENT IN COMMUNITY PLANNING
STAPLES ECONOMIC DEVELOPMENT AUTHORITY 122 6TH STREET NE STAPLES, MN 56479	80-0453825	UNIT OF GOVERNMENT	5,000				TO COMPLETE ASSIST WITH THE FUNDRAISING PLAN FOR THE OPERA HOUES RESTORATION PROJECT

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
STAPLES ECONOMIC DEVELOPMENT AUTHORITY 122 6TH STREET NE STAPLES, MN 56479	80-0453825	UNIT OF GOVERNMENT	10,000				TO EXPAND ACCESS TO QUALITY, AFFORDABLE, ECONOMICALLY SUSTAINABLE CHILD CARE
SWANVILLE DOLLARS FOR SCHOLARS 11388 50TH AVE SWANVILLE, MN 56382	41-1709875	501(C)(3)	5,000				TO SUPPORT INNOVATIVE CLASSROOM GRANTS IN THE SWANVILLE 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
TEREBINTH REFUGE 110 2ND ST SUITE 231 WAITE PARK, MN 56387	81-3807059	501(C)(3)	5,000				TO PROVIDE SKILLS TRAINING, EDUCATIONAL OPPORTUNITIES, AND SAFE HOUSING FOR WOMEN AGES 18 AND UP WHO HAVE BEEN VICTIMS OF SEX TRAFFICKING
THE LEECH LAKE BAND OF OJIBWE RESERVATION BUSINESS COMMITTEE 190 SAILSTAR DRIVE NE CASS LAKE, MN 56633	41-1242052	501(C)(3)	5,000				TO SUPPORT THIS PROGRAM WHICH PROVIDES A HANDS-ON CONSTRUCTION TRAINING PROGRAM AND CREDENTIALING FOR DISCONNECTED YOUTH

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
THE NATIONAL LOON CENTER FOUNDATION POST OFFICE BOX 642 CROSSLAKE, MN 56442	82-1717690	501(C)(3)	5,000				TO RETAIN A GRADUATE STUDENT TO RECOMMEND CURRICULUM MEDIA FOR THE NORTHERN LAKES INITIATIVE AT THE NATIONAL LOON CENTER
THE YES NETWORK PO BOX 1042 ST CLOUD, MN 56302	32-0419607	501(C)(3)	5,000				TO SUPPORT DEVELOPMENT OF AN ADVANCED LEADERSHIP TRAINING FOR YOUTH TO ENHANCE LEADERSHIP 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
THE YES NETWORK PO BOX 1042 ST CLOUD, MN 56302	32-0419607	501(C)(3)	5,000				TO SUPPORT WORK READINESS SKILLS TO YOUTH WHO ARE EXPERIENCING MULTIPLE CHALLENGES
TODD COUNTY DEVELOPMENT CORPORATION 347 CENTRAL AVENUE PO BOX 247 LONG PRAIRIE, MN 56347	41-1749726	501(C)(3)	5,000				TO PROVIDE TRAINING AND TECHNICAL ASSISTANCE TO HELP BUSINESSES AND SOCIAL ENTERPRISES WITH SUCCESSION PLANNING (IN PARTNERSHIP WITH CASS COUNTY)

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
TRUE FRIENDS 10509 108TH STREET NW ANNANDALE, MN 55347	41-1543013	501(C)(3)	5,000				TO SUPPORT NEW RECRUITMENT STRATEGIES TO IMPROVE THE ABILITY TO ATTRACT, HIRE, TRAIN AND RETAIN SEASONAL CARE STAFF
TUSEN TACK PO BOX 214 208 WEST CENTRAL DRIVE BRAHAM, MN 55006	41-1647405	501(C)(3)	5,000				TO SUPPORT THE MISSION OF THE ORGANIZATION

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 ST CLOUD, MN 56303	41-0915124	501(C)(3)	10,000				TO SUPPORT THE PARTNER FOR STUDENT SUCCESS PROJECT BY ADDRESSING IMPLICIT BIAS AND LOW EXPECTATIONS THROUGH EFFECTIVE, DATA-DRIVEN PROFESSIONAL DEVELOPMENT
UNITED WAY OF CENTRAL MINNESOTA 921 1ST STREET NORTH ST CLOUD, MN 56303	41-0915124	501(C)(3)	45,000				TO SUPPORT THE MISSION OF THE ORGANIZATION

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
UPSALA AREA SCHOOL DISTRICT 415 SOUTH MAIN STREET PO BOX 190 UPSALA, MN 56384		SCHOOL DISTRICT	5,000				TO SUPPORT CLASSROOM INNOVATION
VERNDALE SCHOOL DISTRICT 411 SW BROWN STREET VERNDALE, MN 56481	41-6008239	SCHOOL DISTRICT	5,000				TO SUPPORT INNOVATIVE CLASSROOM GRANTS

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
WACOSA 320 SUNDIAL DRIVE WAITE PARK, MN 56387	41-0871466	501(C)(3)	9,700				TO SUPPORT EMPLOYMENT FOR INDIVIDUALS WITH DISABILITIES
WADENA-DEER CREEK SCHOOL DISTRICT 600 COLFAX AVENUE SW PO BOX 151 WADENA, MN 564820151		SCHOOL DISTRICT	5,000				TO PROMOTE 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
WRIGHT COUNTY COMMUNITY ACTION INC PO BOX 787 MAPLE LAKE, MN 553584575	41-0904809	501(C)(3)	5,000				TO IMPROVE THE FUNDRAISING ABILITY OF WRIGHT COUNTY COMMUNITY ACTION
WRIGHT COUNTY REGIONAL INSPECTION COALITION PO BOX 357 ANNANDALE, MN 55302	82-4835454	501(C)(3)	49,022				PREVENT THE SPREAD OF AQUATIC INVASIVE SPECIES

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
INITIATIVE FOUNDATION

Employer identification number
36-3451562

Part I Questions Regarding Compensation

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

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 MATT VARILEK PRESIDENT	(i)	174,296	0	7,355	9,219	20,746	211,616	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

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

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

OMB No 1545-0047

2019

Open to Public Inspection

▶ **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 instructions and the latest information.**

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 section 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 the 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	207,940	GIFT OF UNITS FOR FUND		No
(2) RICK BAUERLY	TRUSTEE	400,000	CONTRIBUTIONS FROM PARTNERSHIP TO PARTNER FUND		No

Part V Supplemental Information

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

Return Reference	Explanation

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

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

▶ Attach to Form 990 or 990-EZ.

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

2019
Open to Public Inspection

Department of the Treasury

Name of the organization
INITIATIVE FOUNDATION

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