

Form **990**

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990

A For the 2013 calendar year, or tax year beginning JUL 1, 2013 and ending JUN 30, 2014

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Community Foundation of Greater Dubuque Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite 700 Locust Street 195 City or town, state or province, country, and ZIP or foreign postal code Dubuque, IA 52001 F Name and address of principal officer: Nancy Van Milligen same as C above	D Employer identification number 42-1526614 E Telephone number 563-588-2700 G Gross receipts \$ 49,586,346. H(a) Is this a group return for subordinates? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> H(b) Are all subordinates included? Yes <input type="checkbox"/> No <input type="checkbox"/> If "No," attach a list. (see instructions) H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ www.dbqfoundation.org		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 2001 M State of legal domicile: IA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>To support scientific, educational, and charitable activities in the Greater Dubuque Area</u> 2 Check this box <input type="checkbox"/> 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 17 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 17 5 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 23 6 Total number of volunteers (estimate if necessary) 6 17 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable income from Form 990-T, line 34 7b 0.	
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		Prior Year	Current Year
Revenue	8 Contributions and grants (Part VIII, line 1h)	10,732,491.	9,140,171.
	9 Program service revenue (Part VIII, line 2g)	24,163.	45,833.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,531,255.	3,284,566.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12,287,909.	12,470,570.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	2,896,129.	3,706,745.
	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)	698,551.	840,007.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 61,126.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	743,953.	1,219,288.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,338,633.	5,766,040.	
19 Revenue less expenses. Subtract line 18 from line 12	7,949,276.	6,704,530.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 44,671,360.	End of Year 57,529,774.
	21 Total liabilities (Part X, line 26)	6,960,467.	8,700,389.
	22 Net assets or fund balances. Subtract line 21 from line 20	37,710,893.	48,829,385.

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 _____	
	Nancy Van Milligen, President/CEO Type or print name and title	
Paid Preparer Use Only	Print/Type preparer's name Carmen Krantz	Preparer's signature Carmen Krantz
	Firm's name ▶ EIDE BAILLY LLP Firm's address ▶ 1545 ASSOCIATES DR., STE. 101 DUBUQUE, IA 52002	Date 05/14/15

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: The Community Foundation of Greater Dubuque grows philanthropy to improve life in Northeast Iowa by serving donors, strengthening nonprofits and leading collaborative initiatives to address community needs.

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 [X] No

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

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 \$ 4,784,357. including grants of \$ 3,706,745.) (Revenue \$ 45,833.) The Community Foundation of Greater Dubuque works to improve the quality of life in the region by serving donors, making grants and providing community leadership through collaboration and convening. The region includes metro Dubuque and Dubuque County as well as Allamakee, Clayton, Delaware, Jackson and Jones counties.

In serving donors, the Community Foundation personally advises individuals, families, corporations, and non-profit groups about how to build both endowments and non-endowed or project funds to serve the charitable needs of the community effectively and efficiently.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 4,784,357.

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

Part IV Checklist of Required Schedules (continued)

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

Note. All Form 990 filers are required to complete Schedule O

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

Main form area containing questions 1a through 14b with columns for Yes/No and numerical input fields.

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
	17		
1b	Enter the number of voting members included in line 1a, above, who are independent		
	17		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
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?		X
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	X	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	X	
15b	Other officers or key employees of the organization		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
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 **None**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **Community Foundation of Greater Dubuque - 563-588-2700**
700 Locust Street, Ste 195, Dubuque, IA 52001

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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below 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) Tim Conlon Chair	1.00	X		X				0.	0.	0.
(2) John O'Connor Vice Chair	1.00	X		X				0.	0.	0.
(3) Brian Kane Treasurer	1.00	X		X				0.	0.	0.
(4) Ken Furst Secretary	1.00	X		X				0.	0.	0.
(5) Phillip Ruppel Director	1.00	X						0.	0.	0.
(6) Jim Theisen Director	1.00	X						0.	0.	0.
(7) Charlie Glab Director	1.00	X						0.	0.	0.
(8) William Klauer Director	1.00	X						0.	0.	0.
(9) Jeanne Lauritsen Director	1.00	X						0.	0.	0.
(10) Jane Hasek Director	1.00	X						0.	0.	0.
(11) Sarah Harris Director	1.00	X						0.	0.	0.
(12) Ed Alt Director	1.00	X						0.	0.	0.
(13) Jesus Aviles Director	1.00	X						0.	0.	0.
(14) Chad Chandlee Director	1.00	X						0.	0.	0.
(15) Robert Hoefler Director	1.00	X						0.	0.	0.
(16) Teri Zuccaro Director	1.00	X						0.	0.	0.
(17) Keith Kramer Director	1.00	X						0.	0.	0.

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a 216,949.					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e 717,077.					
	f All other contributions, gifts, grants, and similar amounts not included above	1f 8,206,145.					
	g Noncash contributions included in lines 1a-1f: \$	2,698,429.					
	h Total. Add lines 1a-1f		9,140,171.				
	Program Service Revenue	2 a Supporting revenue	Business Code 900099	25,497.	25,497.		
b Service fee income		900099	20,336.	20,336.			
c							
d							
e							
f All other program service revenue							
g Total. Add lines 2a-2f			45,833.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		832,921.			832,921.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real					
		(ii) Personal					
		b Less: rental expenses					
		c Rental income or (loss)					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	39,567,421.				
		(ii) Other					
		b Less: cost or other basis and sales expenses	37,115,776.				
		c Gain or (loss)	2,451,645.				
	d Net gain or (loss)		2,451,645.			2,451,645.	
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
		b Less: direct expenses					
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses						
	c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold						
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a							
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions.			12,470,570.	45,833.	0.	3,284,566.	

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 governments and organizations in the United States. See Part IV, line 21	3,699,977.	3,699,977.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	6,768.	6,768.		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	197,764.		172,464.	25,300.
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	544,238.	136,577.	377,376.	30,285.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	8,458.	1,416.	7,042.	
9 Other employee benefits	35,110.	4,035.	31,075.	
10 Payroll taxes	54,437.	10,046.	40,139.	4,252.
11 Fees for services (non-employees):				
a Management				
b Legal	21,940.		21,940.	
c Accounting	15,059.		15,059.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	13,479.	13,479.		
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	402,992.	377,498.	25,494.	
12 Advertising and promotion	81,108.	11,426.	68,393.	1,289.
13 Office expenses	58,881.	16,639.	42,242.	
14 Information technology	26,201.	3,812.	22,389.	
15 Royalties				
16 Occupancy	15,848.	678.	15,170.	
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates	7,767.		7,767.	
22 Depreciation, depletion, and amortization	24,437.		24,437.	
23 Insurance	4,190.		4,190.	
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 Fund holders expenses	487,809.	487,603.	206.	
b Board and staff develop	40,616.	14,323.	26,293.	
c Memberships and publica	10,223.	80.	10,143.	
d McCarthy Center expense	8,738.		8,738.	
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	5,766,040.	4,784,357.	920,557.	61,126.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1 Cash - non-interest-bearing		1		
	2 Savings and temporary cash investments	557,608.	2	182,406.	
	3 Pledges and grants receivable, net	1,582,672.	3	1,398,882.	
	4 Accounts receivable, net		4		
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5		
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6		
	7 Notes and loans receivable, net		7		
	8 Inventories for sale or use		8		
	9 Prepaid expenses and deferred charges		9	21,505.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 658,860.			
	b Less: accumulated depreciation	10b 192,454.	111,524.	10c 466,406.	
	11 Investments - publicly traded securities	41,819,556.	11	54,717,769.	
	12 Investments - other securities. See Part IV, line 11	600,000.	12	742,806.	
	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)	44,671,360.	16	57,529,774.		
Liabilities	17 Accounts payable and accrued expenses	68,281.	17	160,731.	
	18 Grants payable	114,133.	18	196,195.	
	19 Deferred revenue		19		
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22		
	23 Secured mortgages and notes payable to unrelated third parties		23		
	24 Unsecured notes and loans payable to unrelated third parties		24		
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	6,778,053.	25	8,343,463.	
	26 Total liabilities. Add lines 17 through 25	6,960,467.	26	8,700,389.	
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets	35,410,874.	27	47,053,309.	
	28 Temporarily restricted net assets	1,415,772.	28	1,010,672.	
	29 Permanently restricted net assets	884,247.	29	765,404.	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30 Capital stock or trust principal, or current funds		30		
	31 Paid-in or capital surplus, or land, building, or equipment fund		31		
	32 Retained earnings, endowment, accumulated income, or other funds		32		
33 Total net assets or fund balances	37,710,893.	33	48,829,385.		
34 Total liabilities and net assets/fund balances	44,671,360.	34	57,529,774.		

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	12,470,570.
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,766,040.
3	Revenue less expenses. Subtract line 2 from line 1	3	6,704,530.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	37,710,893.
5	Net unrealized gains (losses) on investments	5	4,417,860.
6	Donated services and use of facilities	6	
7	Investment expenses	7	-18,207.
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	14,309.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	48,829,385.

Part XII Financial Statements and Reporting

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

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

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

2013

Open to Public Inspection

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization Community Foundation of Greater Dubuque	Employer identification number 42-1526614
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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 11, 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.)
- 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 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.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 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 that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III - Functionally integrated d Type III - Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)	
(ii) A family member of a person described in (i) above?	11g(ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	
- h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	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 fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	4478214.	7596371.	6534658.	10732491.	9140171.	38481905.
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	4478214.	7596371.	6534658.	10732491.	9140171.	38481905.
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)						5814658.
6 Public support. Subtract line 5 from line 4.						32667247.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	4478214.	7596371.	6534658.	10732491.	9140171.	38481905.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	463,741.	472,651.	608,172.	804,943.	832,921.	3182428.
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 IV.)						
11 Total support. Add lines 7 through 10						41664333.
12 Gross receipts from related activities, etc. (see instructions)					12	144,098.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	78.41	%
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	76.99	%
16a 33 1/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>		
b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2013. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2012. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>		

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

(Complete only if you checked the box on line 9 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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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 IV.)						
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 2013 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2013. 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 - 2012. 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

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and
its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Name of the organization

Employer identification number

Community Foundation of Greater Dubuque

42-1526614

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

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

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

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$ _____

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization Community Foundation of Greater Dubuque	Employer identification number 42-1526614
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 508,729.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 529,310.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 200,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 216,949.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5		\$ 248,844.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6		\$ 434,637.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization Community Foundation of Greater Dubuque	Employer identification number 42-1526614
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	<hr/> <hr/> <hr/> <hr/>	\$ <u>2,002,448.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
8	<hr/> <hr/> <hr/> <hr/>	\$ <u>379,260.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	<hr/> <hr/> <hr/> <hr/>	\$ <u>297,987.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization Community Foundation of Greater Dubuque	Employer identification number 42-1526614
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
6	Stock _____ _____ _____	\$ 184,497.	12/16/13
7	Stock _____ _____ _____	\$ 2,002,448.	12/17/13
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____

Name of organization Community Foundation of Greater Dubuque	Employer identification number 42-1526614
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Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____ _____ _____		_____ _____ _____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____ _____ _____		_____ _____ _____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____ _____ _____		_____ _____ _____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____ _____ _____		_____ _____ _____	

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization

Community Foundation of Greater Dubuque

Employer identification number

42-1526614

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	131	519
2 Aggregate contributions to (during year)	3,662,693.	5,036,135.
3 Aggregate grants from (during year)	1,478,313.	3,102,775.
4 Aggregate value at end of year	17,661,495.	31,206,542.
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

Part II Conservation Easements. Complete if the organization answered "Yes" to 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 Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, 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, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, 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" to 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) Revenues included in 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 Revenues included in 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" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21? 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" to 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	29,101,927.	20,162,203.	18,285,156.	14,068,360.	11,046,379.
b Contributions	4,706,023.	7,062,983.	3,321,896.	2,544,038.	2,547,475.
c Net investment earnings, gains, and losses	5,437,273.	3,215,018.	-312,020.	2,654,661.	1,310,903.
d Grants or scholarships					
e Other expenditures for facilities and programs	1,922,439.	1,338,277.	1,132,829.	981,903.	836,397.
f Administrative expenses					
g End of year balance	37,322,784.	29,101,927.	20,162,203.	18,285,156.	14,068,360.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 97.95 %
 - b Permanent endowment 2.05 %
 - c Temporarily restricted endowment %
- The percentages in lines 2a, 2b, and 2c should equal 100%.

- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|-----|----|
| (i) unrelated organizations | | X |
| (ii) related organizations | | X |
| b If "Yes" to 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" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		444,644.	36,187.	408,457.
d Equipment		214,216.	156,267.	57,949.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				466,406.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to 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. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" to 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" to 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) Deferred compensation payable	80,299.
(3) Funds held for others	8,079,462.
(4) Amounts due under annuity agreement	183,702.
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	8,343,463.

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" to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	16,988,506.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	4,417,860.
b	Donated services and use of facilities	2b	103,974.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	14,309.
e	Add lines 2a through 2d	2e	4,536,143.
3	Subtract line 2e from line 1	3	12,452,363.
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	18,207.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	18,207.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	12,470,570.

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	5,870,014.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	103,974.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	103,974.
3	Subtract line 2e from line 1	3	5,766,040.
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	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	5,766,040.

Part XIII Supplemental Information.

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

Part V, line 4:

Explanation: Earnings on endowments are used for charitable purposes.

Part X, Line 2:

Explanation: The Foundation is a nonprofit organization as described in Section 501(c)(3) of the Internal Revenue Code and is exempt from federal and state taxes. The Foundation, however, if it should receive any unrelated business income would not be exempt from taxation on such income.

The Foundation's Forms 990, Return of Organization Exempt from Income Tax, for the fiscal years ended 2011 through 2013 are subject to examination by

Part XIII Supplemental Information (continued)

the IRS, generally for three years after they are filed.

Part XI, Line 2d - Other Adjustments:

Chg in value of split-interest agreements incl in revenue

per financial stmt

14,309.



**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

OMB No. 1545-0047

2013

Open to Public
Inspection

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990

Name of the organization **Community Foundation of Greater Dubuque** Employer identification number **42-1526614**

Part I General Information on Grants and Assistance

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Camp Albrecht Acres Foundation 14837 Sherrill Rd Sherill, IA 52073	42-1423952	501(c)(3)	5,772.	0.			General support
Allamakee Community School District - 1061 3rd Ave NW - Waukon, IA 52172	42-6036591	City of Allamakee	27,995.	0.			ACCF 2014 Grant - Project Sealed
Allamakee New Beginning Inc. 21 Allamakee St. Waukon, IA 52172	26-2480557	501(c)(3)	19,270.	0.			General support
American Cancer Society 4080 First Ave. NE Ste 101 Cedar Rapids, IA 52402	13-1788491	501(c)(3)	15,423.	0.			General support
Archdiocese of Dubuque 1229 Mt. Loretta Ave Dubuque, IA 52002	42-0680409	501(c)(3)	12,100.	0.			Prison Ministry
Beckman High School 1325 9th St SE Dyersville, IA 52040	42-0923753	501(c)(3)	28,935.	0.			Capital Campaign

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **115.**
- 3** Enter total number of other organizations listed in the line 1 table **3.**

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

Schedule I (Form 990) (2013)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
Bell Tower Production & Dinner Theater - 2728 Asbury Rd - Dubuque, IA 52001	87-0690005	501(c)(3)	12,790.	0.			Summer Program for Kids
Bellevue Ambulance Service 106 North 3rd Street Bellevue, IA 52031	42-6004273	City of Bellevue	10,000.	0.			General support
Bellevue Area Chamber of Commerce 210 N Riverview St Bellevue, IA 52031	42-1082098	501(c)(6)	12,000.	0.			Maintenance of safety equipment
Bellevue Fire Department 106 North 3rd Street Bellevue, IA 52031	42-6004273	City of Bellevue	30,149.	0.			General support
Bethany Home 1005 Lincoln Ave Dubuque, IA 52001	42-0698260	501(c)(3)	18,730.	0.			General support
Boys and Girls Club 1299 Locust St Dubuque, IA 52001	42-7210263	501(c)(3)	26,510.	0.			General support
Camp Courageous of Iowa PO Box 418 Monticello, IA 52310-0418	23-7210932	501(c)(3)	17,532.	0.			General support
Cardinal Elementary School Maquoketa - 1003 East Pershing Road - Maquoketa, IA 52060	42-6037701	City of Maquoket	7,350.	0.			2013 Jackson County Grant - Cardinal Backpack Club
Carnegie-Stout Public Library Foundation - PO Box 27 - Dubuque, IA 52004-0027	42-1452704	501(c)(3)	7,180.	0.			2013 Theisen Grant - Storybook Walk

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
Catholic Charities of the Archdiocese of Dubuque - 1229 Mt. Loretta Avenue - Dubuque, IA 52003	42-0680493	501(c)(3)	23,600.	0.			General support
City of Dubuque 50 W 13th St Dubuque, IA 52001	42-6004596	City of Dubuque	39,915.	0.			2013 WGC Grant - Circles Initiative - Babysitting Certification
City of Hopkinton PO Box 154 Hopkinton, IA 52237-0154	42-6004774	501(c)(3)	5,500.	0.			2013 Theisen Grant - 2013 Pool Renovation Project
City of Maquoketa 201 E Pleasant St Maquoketa, IA 52060	42-6004922	City of Maquoket	241,109.	0.			General support
City of Martelle PO Box 96 Martelle, IA 52305	42-1178936	City of Martelle	15,000.	0.			2013 Grant Award - Martelle Ballpark Enhancement Project
Clarke University 1550 Clarke Dr. Dubuque, IA 52001-3198	42-0680408	501(c)(3)	92,024.	0.			General support
Colts Youth Organization 1101 Central Avenue Dubuque, IA 52001	42-1057444	501(c)(3)	7,675.	0.			General support
Community Foundation of Northeast Iowa - 425 Cedar St, Ste 310 - Waterloo, IA 50704	42-6060414	501(c)(3)	6,600.	0.			Funders Network Contractor - Howard/Chickasaw
Crescent Community Health Center 1789 Elm St, Suite A Dubuque, IA 52001	48-1302204	501(c)(3)	116,326.	0.			General support

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
Diocese of Bridgeport 238 Jewett Avenue Bridgeport, CT 06606	06-0737923	501(c)(3)	7,500.	0.			Bishop Appeal
Dubuque Arboretum Association Inc. 3800 Arboretum Dr Dubuque, IA 52001	42-1160989	501(c)(3)	4,900.	0.			General support
Dubuque Area Chamber of Commerce 300 Main St, Suite 200 Dubuque, IA 52004-0705	42-0223700	501(c)(6)	5,740.	0.			Payment of 50 attendees to non-profit summit
Dubuque Chorale Inc. 900 Jackson St, Ste LL5-2D Dubuque, IA 52001	20-5778500	501(c)(3)	20,629.	0.			General support
Dubuque Community School District 2300 Chaney Rd Dubuque, IA 52001-3095	42-6001531	City of Dubuque	6,000.	0.			Campaign for Grade-Level Reading Attendance Initiative
Dubuque Community Y 35 North Booth St Dubuque, IA 52001	42-0934471	501(c)(3)	5,200.	760.	FMV	Equipment	Young Explorer Computer
Dubuque YWCA Foundation 35 North Booth Street Dubuque, IA 52001	42-1361168	501(c)(3)	6,137.	0.			2013 Theisen Grant - National YMCA Achievers Program
Dubuque County Historical Society 350 E. Third St. Dubuque, IA 52001	42-6072050	501(c)(3)	10,150.	0.			General support
Dubuque County Right To Life 2205 Carter Road Dubuque, IA 52001	42-1270933	501(c)(3)	18,300.	0.			Life Dinner

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
Dubuque Humane Society 4242 Chavenelle Rd Asbury, IA 52002	42-6039535	501(c)(3)	32,049.	0.			General support
Dubuque Mercy Health Foundation 250 Mercy Drive Dubuque, IA 52001	26-2227941	501(c)(3)	12,337.	0.			General support
Dubuque Museum of Art 701 Locust Street Dubuque, IA 52001	42-1071185	501(c)(3)	25,420.	0.			2013 Mediacom Grantmaking - Student In Sight Gallery
Dubuque Rescue Mission PO Box 147 Dubuque, IA 52004-0147	42-0844836	501(c)(3)	17,460.	0.			General support
Dubuque Symphony Orchestra 2728 Asbury Rd, Ste 900 Dubuque, IA 52001-2970	23-7429727	501(c)(3)	95,828.	0.			General support
Easton Valley School District 321 School St Preston, IA 52069	61-1707158	City of Preston	129,318.	0.			General support
ECIA Business Growth Inc. 7600 Commerce Park Dubuque, IA 52002	42-1207483	501(c)(3)	6,000.	0.			Petal Project Support of G2G 2014 annual payment
Elkader Historical Society 508 High St NE Elkader, IA 52043	42-1119953	501(c)(3)	5,290.	0.			General support
Fair and Exposition Society of Jones County, Inc. - PO Box 150 - Monticello, IA 52310	42-1294397	501(c)(3)	10,000.	0.			Great Jones County Fair Livestock campus wash rack

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
Family Resources Inc. 2800 Eastern Ave. Davenport, IA 52803	42-0698225	501(c)(3)	8,500.	0.			Emergency Assistance Fund
Finley Health Foundation Inc. 350 N Grandview Ave Dubuque, IA 52001	42-1286953	501(c)(3)	18,530.	0.			General support
Flames of Love International Ministries - 8616 Arboleda Street - El Paso, TX 79907	74-2374868	501(c)(3)	29,000.	0.			General support
Four Mounds Foundation 4900 Peru Road Dubuque, IA 52001	42-1265303	501(c)(3)	15,041.	0.			General support
Friends of Mines of Spain 8991 Bellevue Heights Dubuque, IA 52003-9214	42-1423836	501(c)(3)	7,170.	0.			General support
Frog Hollow Kid Campus 5005 Asbury Road Dubuque, IA 52002	46-2290057	501(c)(3)	0.	5,200.	FMV	Equipment	Young Explorer Computer
Fulton Elementary School 2540 Central Ave Dubuque, IA 52001	42-6001531	City of Dubuque	8,000.	0.			General support
The Grand Opera House 135 West 8th Street Dubuque, IA 52001	42-1133812	501(c)(3)	5,602.	0.			General support
Green Dubuque Inc. 1640 Lawndale St Dubuque, IA 52001	26-2172211	501(c)(3)	30,300.	0.			2013 Community Impact Grant

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
Guttenberg Municipal Hospital PO Box 550 Guttenberg, IA 52052-0550	42-6038728	City of Guttenbe	28,000.	0.			Guttenberg Municipal Hospital Building Campaign Fund
Dubuque/Jackson Counties Habitat for Humanity - 900 Jackson St, Suite LL5-2E - Dubuque, IA 52001	42-1365181	501(c)(3)	21,242.	0.			General support
Harpers Ferry Booster Club PO Box 162 Harpers Ferry, IA 52146	42-1526614	501(c)(3)	12,000.	0.			Hapers Ferry Comm Ctr - Lighten & Brighten Project
Hillcrest Family Services 2005 Asbury Rd Dubuque, IA 52001	42-0680411	501(c)(3)	39,541.	0.			General support
Hills and Dales Child Development Center - 1011 Davis St - Dubuque, IA 52001	42-1388270	501(c)(3)	22,985.	5,200.	FMV	Equipment	General support
Holy Family Catholic Schools 2005 Kane St Dubuque, IA 52001-0538	42-0792429	501(c)(3)	61,827.	0.			Annual Business Appeal
Holy Ghost School 2981 Central Ave Dubuque, IA 52001	42-0792429	501(c)(3)	0.	5,200.	FMV	Equipment	Young Explorer Computer
Holy Spirit Church & School 515 Albert St S St. Paul, MN 55116	41-0705768	501(c)(3)	8,000.	0.			General support
Hospice of Dubuque 1670 John F. Kennedy Road Dubuque, IA 52002	42-1205973	501(c)(3)	14,929.	0.			General support

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
Iowa State University of Science and Technology - 3609 Administrative Services Bldg - Ames, IA 50011-3609	42-6004224	501(c)(3)	24,550.	0.			General support
Friends of Jackson County Conservation - 18670 63rd Street - Maquoketa, IA 52060	42-1521029	501(c)(3)	8,000.	0.			2013 Jackson County Grant
Jackson County Economic Alliance 119 S Main Street, Ste 5 Maquoketa, IA 52060	42-6004923	City of Maquoket	6,000.	0.			2014 Jackson County Grant
Jackson County Historical Society PO Box 1245 Maquoketa, IA 52060	42-0984105	501(c)(3)	6,597.	0.			General support
Jones Regional Medical Center Foundation - 1795 Hwy 64 East - Anamosa, IA 52205	42-1429225	501(c)(3)	5,500.	0.			General support
Junior Achievement of the Heartland, Inc. - 800 12th Ave - Moline, IL 61265	36-2684253	501(c)(3)	9,513.	0.			2013 Community Impact Grant
Kirkwood Community College 6301 Kirkwood Blvd. SW Cedar Rapids, IA 52406	42-0924685	State of Iowa	5,800.	0.			General support
Lansing Fire Department PO Box 57 Lansing, IA 52151	39-1872357	501(c)(3)	5,725.	0.			ACCF 2014 Grant - New Air Packs
Lincoln Elementary School 555 Nevada Street Dubuque, IA 52001	42-6001531	City of Dubuque	9,000.	0.			General support

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
Loras College 1450 Alta Vista St Dubuque, IA 52001	42-0680412	501(c)(3)	168,970.	0.			General support
Luther College 700 College Dr Decorah, IA 52101	42-0680466	501(c)(3)	6,095.	0.			General support
Lutheran Services in Iowa 2255 JFK Rd Dubuque, IA 52002	42-0698267	501(c)(3)	7,000.	0.			2013 Community Impact Grant
Maquoketa Art Experience PO Box 968 Maquoketa, IA 52060	26-1771426	501(c)(3)	24,075.	0.			General support
Maquoketa Community Schools 612 S Vermont St Maquoketa, IA 52060	42-6037701	City of Maquoket	14,578.	0.			General support
Marquette Catholic Schools 403 Park Street Bellevue, IA 52031	42-0955523	501(c)(3)	7,170.	0.			Grant to pay for hot lunches
Maryknoll Fathers and Brothers PO BOX 302 Maryknoll, NY 10545-9989	13-1740144	501(c)(3)	10,750.	0.			General support
Mid-Iowa Community Action, Inc. 1001 South 18th Ave Marshalltown, IA 50158	42-0923311	501(c)(3)	5,500.	0.			2013 Theisen Grant
Monticello Youth Baseball & Softball Association - PO Box 302 - Monticello, IA 52310	42-6004981	501(c)(3)	25,000.	0.			Jaycee/Kleinow & Sports Complex Renovation

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
Multicultural Family Center 1157 Central Avenue Dubuque, IA 52001	27-0751743	501(c)(3)	15,944.	0.			2013 Mediacom Grantmaking
NAMI - Dubuque 900 Jackson St, Suite LL5-2B Dubuque, IA 52001	31-1492256	501(c)(3)	11,503.	0.			General support
National Mississippi River Museum & Aquarium - 350 East 3rd Street - Dubuque, IA 52001	42-6072050	501(c)(3)	54,555.	0.			Annual Appeal
Nativity Church 1225 Alta Vista St. Dubuque, IA 52001	53-0196617	501(c)(3)	15,000.	0.			General support
North Bend Community Center 127 E. Main St. Spragueville, IA 52074	42-1526614	City of Spraguev	7,000.	0.			General support
Northeast Iowa Community College Foundation - 10250 Sundown Road - Peosta, IA 52068-9703	42-1178729	501(c)(3)	19,845.	0.			2013 Theisen Grant - Third Grade Reading Program
Opening Doors (Maria House & Teresa Shelter) - 1561 Jackson St - Dubuque, IA 52001	42-1490364	501(c)(3)	44,353.	0.			2014 Endowment Payout
Operation: New View Community Action Agency - 1473 Central Ave - Dubuque, IA 52001	20-2549142	501(c)(3)	1,154.	5,200.	FMV	Equipment	General support
Phoenix Children's Hospital Foundation - 1919 E Thomas Rd - Phoenix, AZ 85016	74-2421549	501(c)(3)	20,000.	0.			Challenge Cup

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
Postville Parks, Pool and Recreation Board - PO Box 491 - Postville, IA 52162	42-1016174	City of Postvill	8,500.	0.			Swim Pool Starting Platforms
Presentation Lantern 900 Jackson St, Suite LL5-1 Dubuque, IA 52001	13-4224124	501(c)(3)	123,069.	0.			Lantern Center
Project Concern Inc. 1789 Elm St, Ste B Dubuque, IA 52001	42-1298833	501(c)(3)	34,879.	0.			2013 Jackson County Grant
Proudly Accessible Dubuque 3715 Asbury Rd Dubuque, IA 52001	45-4847665	501(c)(3)	16,863.	0.			2013 Community Impact Grant
Riverview Center, Inc. 2600 Dodge St Dubuque, IA 52002	36-3920008	501(c)(3)	16,699.	0.			General support
Shalom Retreat Center 1001 Davis St Dubuque, IA 52001	42-0757421	501(c)(3)	9,400.	0.			Shalom Spring Appeal
Sisters of Charity of Blessed Virgin Mary - 1100 Carmel Drive - Dubuque, IA 52003	42-0680320	501(c)(3)	24,577.	0.			BVM Senate Sponsorship
St. Giles Parish 1025 Columbian Ave Oak Park, IL 60302	36-2171014	501(c)(3)	4,200.	0.			Sharing Cup Campaign
St. John of the Cross 1027 5th Ave SE Cedar Rapids, IA 52403	42-1307304	501(c)(3)	10,500.	0.			Homeless Shelter

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
St. John's Lutheran Church PO Box 819 Guttenberg, IA 52052	42-1522040	501(c)(3)	6,700.	0.			Current Fund
St. Joseph the Worker Catholic Church - 60 South Algona Street - Dubuque, IA 52001	42-0698063	501(c)(3)	21,760.	0.			General support
St. Mark Youth Enrichment 1201 Locust St Dubuque, IA 52001	42-1338364	501(c)(3)	61,408.	0.			2014 3rd Grade Reading Grant
St. Mary's Catholic Church PO Box 847 Guttenberg, IA 52052	42-0698075	501(c)(3)	12,000.	0.			Helping of the poor in the area
St. Mary's Church PO Box 479 Dubuque, IA 52004-0479	42-0741001	501(c)(3)	20,000.	0.			General support
St. Patrick School 200 2nd St SW Waukon, IA 52172	42-0698115	501(c)(3)	6,530.	0.			General support
St. Raphael's Cathedral Church 231 Bluff Street Dubuque, IA 52001	42-0703275	501(c)(3)	5,250.	0.			General support
Starlighters II Inc. 136 E Main St Anamosa, IA 52205	42-1125849	501(c)(3)	25,000.	0.			Light/Sound Booth & Wiring
Stonehill Benevolent Foundation 3485 Windsor Avenue Dubuque, IA 52001	42-1337556	501(c)(3)	16,250.	0.			General support

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
Stonehill Franciscan Services 3485 Windsor Ave Dubuque, IA 52001-9282	51-0141775	501(c)(3)	11,288.	0.			Annual Appeal
Studio Works Inc 900 Jackson St, LL3 Dubuque, IA 52001	45-4217883	501(c)(3)	320,654.	0.			General support
T.A.S.C., Inc. 2213 Mt Olivet Rd NW Waukon, IA 52172	42-1018273	501(c)(3)	8,000.	0.			ACCF 2014 Grant
Two by Two Character Development 470 W 4th St Dubuque, IA 52001	38-3908793	501(c)(3)	85,034.	0.			General support
University of Dubuque 2000 University Ave Dubuque, IA 52001	42-0680323	501(c)(3)	20,179.	0.			Partnership Program
University of Wisconsin - Platteville - 1 University Plaza - Platteville, WI 53818	39-1805963	State of Wiscons	5,750.	0.			General support
Urevbu Foundation 410 S Main St Memphis, TN 38103	26-0448526	501(c)(3)	50,000.	0.			General support
Wartburg College 100 Wartburg Blvd Waverly, IA 50677	42-0680351	501(c)(3)	10,650.	0.			General support
Wartburg Theological Seminary 333 Wartburg Pl Dubuque, IA 52003	42-0681105	501(c)(3)	14,770.	0.			General support

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
Waukon Area Fire Protection District - 706 3rd Ave SW - Waukon, IA 52172	42-6005340	City of Waukon	6,562.	0.			Safety gear replacement
Waukon Wellness Center 1220 3rd Avenue NW, Ste 101 Waukon, IA 52172	42-6005340	501(c)(3)	8,305.	0.			General support
Young Heros Foundation 15 Villone Drive Leeds, MA 01053	20-4026044	501(c)(3)	5,462.	0.			General support
Prodigy Child Development 715 W Locust Street Dubuque, IA 52001	42-1509268		0.	5,200.	FMV		Young Explorer Computer

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to 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 non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Opportunity Passport - youth financial management	19	6,768.	0.		

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

Part I, Line 2:

Explanation: The unrestricted fund is a fund from which income and/or principal may be distributed to charities designated as 501(c)(3) organizations and to charitable causes and concerns. Applications for grants must be submitted by organizations. From the applications submitted, a committee established by the board will decide which organizations grants will be awarded. The board of directors retains complete discretion as to the selection of grantees and programs to receive help from such a fund, and in meeting emerging and priority community needs

Part IV Supplemental Information

and opportunities.

The field of interest fund is a fund from which income and/or principal may be distributed to charities designated as 501(c)(3) organizations or to groups with potential for achieving 501(c)(3) status which provide services in a specified field or fields of charitable activity, such as arts and culture, community affairs and development, education, environment, health, historic preservation, and human services. The board of directors of the Foundation shall exercise complete discretion in identifying funding opportunities and selecting grantees within the specified fields of interest. Designated funds are funds from which income and/or principal is distributed by the board of directors of the Foundation to 501(c)(3) charities named or specified by the donor(s) at the time the fund is established. Agency Endowment Funds are funds that may be established by IRS 501(c)(3) organizations from which income and/or principal may be distributed by the board of directors of the Foundation for the particular organization's own benefit. Donor advised funds are funds from which income and/or principal is distributed by the board of directors to 501(c)(3) charities in response to recommendations made by the donor, the donor's family, or an advisor. In accordance with Internal Revenue Code requirements, however, such recommendations are advisory only and not binding on the board of directors of the Foundation.

Opportunity Passport is a program aimed at teaching youth aging out of foster care the financial management skills they need to achieve personal success. Participants must apply for the program and once chosen they must successfully complete 10 hours of financial literacy training and make a plan and commitment to save for an approved asset. As long as a participant

Part IV Supplemental Information

stays active in the program, the Community Foundation of Greater Dubuque will match the savings account dollar for dollar up to \$1,000 per year for approved expenses, such as buying a computer for school or paying for tuition.

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**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990

Name of the organization **Community Foundation of Greater Dubuque** Employer identification number **42-1526614**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	27	2,698,429.	Quoted market price
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (_____)				
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** **0**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 - 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

2013

Open to Public
Inspection

Name of the organization

Community Foundation of Greater Dubuque

Employer identification number

42-1526614

Form 990, Part III, Line 4a, Program Service Accomplishments:

In making grants, the Community Foundation seeks to be a hub for community knowledge and then advises individuals, families, and corporations as they make grants in the community. In addition, the Community Foundation hosts and administers the following annual grantmaking programs: Community Impact, Theisens More for Your Community Grants, YAPPERS grants, Women's Giving Circle Grants and Mediacom grants. We also assist in the grantmaking process for the counties of Jackson, Delaware, Allamakee, and Jones. The State of Iowa awards money to counties that do not have gaming institutions. Part of the money goes into a permanent endowment and part goes to grantmaking for the county.

In providing community leadership through collaboration and convening, the Community Foundation gathers data about urgent and emerging needs in the community. The Community Foundation then convenes stakeholders by facilitating meetings, educational opportunities and programs which encourage convening and collaboration including Every Child Every Promise, Inclusive Dubuque, Speak Your Peace, Green and Healthy Home Initiative and Project Hope.

Form 990, Part VI, Section A, line 1:

Explanation: The Executive Committee consists of not less than five and not more than seven Directors, including the Chair, Vice Chair, Secretary, Treasurer and other Directors selected at-large. The Executive Committee serves between meetings of the Board and possess and may exercise all

Name of the organization Community Foundation of Greater Dubuque	Employer identification number 42-1526614
---	--

powers of the Board in the management affairs of the Community Foundation of Greater Dubuque, including the responsibility and power to appoint committees, to determine the distribution of property, authority over investment policies, and other duties delegated by the Board. All actions taken by the Executive Committee are reported to the Board and subject to control, revision and alteration.

Form 990, Part VI, Section A, line 2:

Explanation: John O'Connor and William Klauer have a business relationship. John O'Connor and Donnelle Fuerste have a business relationship.

Form 990, Part VI, Section B, line 11:

Explanation: The Form 990 is made available to the governing body but not in its entirety. The President/CEO and Finance Director review the 990.

Form 990, Part VI, Section B, Line 12c:

Explanation: Any member of the Foundation's staff, board of directors, and officers must complete a conflict of interest statement annually. The Chair of the Foundation and the Executive Director review the signed statements. Any possible conflicts are brought to the board's attention.

Any member of the Board of Directors who is connected with a prospective grant recipient in any official capacity shall abstain from voting on the proposed grant. This abstention shall be recorded in the minutes of the meeting at which such vote occurs.

If, because of such abstentions at any such meeting of the Board of Directors, a particular grant would fail for lack of a majority vote, such

Name of the organization Community Foundation of Greater Dubuque	Employer identification number 42-1526614
---	--

a grant could be made if approved in writing by an absent but disinterested member or members within a reasonable time after the Directors' meeting at which the grant proposal was first considered.

If a situation should arise in which a majority of directors would be disqualified from voting on a grant proposal because of the Foundation's conflict of interest policy, the board may, after full disclosure of the potential conflict and by majority affirmative vote, suspend the conflict of interest policy and proceed to make the grant.

All discussion and action with respect to actual or potential conflicts of interest shall be entered into the minutes of the meetings where such action takes place.

It is the practice of the Community Foundation to build a written record of any special relationships between prospective grantees and directors, staff, or the family members of either directors or staff for the purpose of documenting the factual record and enabling full disclosure to all directors. Such record shall be kept with the permanent minutes of the board proceedings.

Any person having knowledge of any action or conduct in violation of the policies should report the information to the Chair of the Foundation board.

Form 990, Part VI, Section B, Line 15a:

Explanation: The Executive Committee determines the compensation for the President/CEO. Salary adjustments are based on an annual evaluation and comparability data. The organization documents and provides substantiation

Name of the organization Community Foundation of Greater Dubuque	Employer identification number 42-1526614
---	--

for the compensation process. The compensation process was last completed in FY 2014.

The President/CEO determines the compensation for the Director of Finance. Salary adjustments are based on an annual evaluation and comparability data. The organization documents and provides substantiation for the compensation process. There are no other officers or key employees of the organization.

Form 990, Part VI, Section C, Line 19:

Explanation: The Organization's governing documents, conflict of interest policy, and financial statements are available upon written request.

Form 990, Part XI, line 9, Changes in Net Assets:

Change in value of split-interest agreements	14,309.
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**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

2013

**Open to Public
Inspection**

Name of the organization

Community Foundation of Greater Dubuque

Employer identification number

42-1526614

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
CFGD Real Estate, LLC - 42-1526614 700 Locust Street, Suite 195 Dubuque, IA 52001	Assist Community Foundation of Greater Dubuque with charitable giving needs	Iowa	0.	0.	Community Foundation of Greater Dubuque

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
CFGD Charitable Trust - 35-6840681 700 Locust Street, Ste 195 Dubuque, IA 52001	Support the Community Foundation of Greater Dubuque	Iowa	501(c)(3)	Line 11a, I	Community Foundation of Greater Dubuque	X	

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

Schedule R (Form 990) 2013

See Part VII for Continuations

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

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o Sharing of paid employees with related organization(s)	X	
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)	X	

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
Leo A. and Joy K. McCarthy Charitable Lead (1) Annuity Trust	S	60,000.	Amount received
(2)			
(3)			
(4)			
(5)			
(6)			

Part VII Supplemental Information

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

Part I, Identification of Disregarded Entities:**Name, Address, and EIN of Disregarded Entity:**

CFGD Real Estate, LLC

EIN: 42-1526614

700 Locust Street, Suite 195

Dubuque, IA 52001

Primary Activity: Assist Community Foundation of Greater Dubuque with charitable giving needs

Direct Controlling Entity: Community Foundation of Greater Dubuque

Part II, Identification of Related Tax-Exempt Organizations:**Name, Address, and EIN of Related Organization:**

CFGD Charitable Trust

EIN: 35-6840681

700 Locust Street, Ste 195

Dubuque, IA 52001

Primary Activity: Support the Community Foundation of Greater Dubuque

Direct Controlling Entity: Community Foundation of Greater Dubuque

Part IV, Identification of Related Organizations Taxable as Corp or Trust:**Name, Address, and EIN of Related Organization:**

Leo A. and Joy K. McCarthy Charitable Lead Annuity Trust

EIN: 20-6408300

700 Locust Street, Ste 195

Dubuque, IA 52001

Part VII Supplemental Information

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

Primary Activity: Support Community Foundation of Greater Dubuque

Direct Controlling Entity: Community Foundation of Greater Dubuque

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• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. Community Foundation of Greater Dubuque	Employer identification number (EIN) or 42-1526614
	Number, street, and room or suite no. If a P.O. box, see instructions. 700 Locust Street, No. 195	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Dubuque, IA 52001	

Enter the Return code for the return that this application is for (file a separate application for each return)

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

Community Foundation of Greater Dubuque

• The books are in the care of **700 Locust Street, Ste 195 - Dubuque, IA 52001**

Telephone No. **563-588-2700** Fax No.

• If the organization does not have an office or place of business in the United States, check this box

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until **May 15, 2015**.

5 For calendar year , or other tax year beginning **JUL 1, 2013**, and ending **JUN 30, 2014**.

6 If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

7 State in detail why you need the extension
Additional time and information is needed to file a complete and accurate tax return.

8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$	0.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0.

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature Title Date