

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

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation
 ▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No 1545-0052
2018
Open to Public Inspection

For calendar year 2018, or tax year beginning 01-01-2018 , and ending 12-31-2018

Name of foundation CHARLES E LAKIN FOUNDATION INC		A Employer identification number 76-0751233
Number and street (or P O box number if mail is not delivered to street address) 705 NORTH 16TH STREET	Room/suite	B Telephone number (see instructions) (712) 256-5580
City or town, state or province, country, and ZIP or foreign postal code COUNCIL BLUFFS, IA 51501		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ <u>143,139,841</u>	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ <i>(Part I, column (d) must be on cash basis)</i>	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	67,404,748			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	3,223	3,223		
	4 Dividends and interest from securities	1,165,851	1,165,851		
	5a Gross rents	1,960,149	1,960,149		
	b Net rental income or (loss) 735,823				
	6a Net gain or (loss) from sale of assets not on line 10	316,511			
	b Gross sales price for all assets on line 6a 7,985,694				
	7 Capital gain net income (from Part IV, line 2)		316,511		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	70,850,482	3,445,734			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	655,513	242,820		171,795
	14 Other employee salaries and wages	59,277	0		0
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)	165,200	123,900		0
	b Accounting fees (attach schedule)	3,195	0		0
	c Other professional fees (attach schedule)	279,956	234,614		45,342
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	53,406	31,832		0
	19 Depreciation (attach schedule) and depletion	449,083	443,903		
	20 Occupancy	687,970	617,712		0
	21 Travel, conferences, and meetings	37,434	1,193		36,241
	22 Printing and publications				
	23 Other expenses (attach schedule)	55,773	13,948		0
	24 Total operating and administrative expenses. Add lines 13 through 23	2,446,807	1,709,922		253,378
	25 Contributions, gifts, grants paid	2,266,856			2,266,856
26 Total expenses and disbursements. Add lines 24 and 25	4,713,663	1,709,922		2,520,234	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	66,136,819				
b Net investment income (if negative, enter -0-)		1,735,812			
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	327,989	306,387	306,387
	2 Savings and temporary cash investments		642,354	642,354
	3 Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	0	21,170,451	30,600,000
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶ _____ 66,675,340 Less accumulated depreciation (attach schedule) ▶ _____ 444,810		66,230,530	62,795,975
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	72,942,197	50,635,759	48,369,536
	14 Land, buildings, and equipment basis ▶ _____ 347,949 Less accumulated depreciation (attach schedule) ▶ _____ 4,273	0	343,676	343,676
15 Other assets (describe ▶ _____)	0	81,913	81,913	
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	73,270,186	139,411,070	143,139,841	
Liabilities	17 Accounts payable and accrued expenses		895	
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)	0	3,170	
	23 Total liabilities (add lines 17 through 22)	0	4,065	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	0	0	
	28 Paid-in or capital surplus, or land, bldg, and equipment fund	0	0	
29 Retained earnings, accumulated income, endowment, or other funds	73,270,186	139,407,005		
30 Total net assets or fund balances (see instructions)	73,270,186	139,407,005		
31 Total liabilities and net assets/fund balances (see instructions) .	73,270,186	139,411,070		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	73,270,186
2 Enter amount from Part I, line 27a	2	66,136,819
3 Other increases not included in line 2 (itemize) ▶ _____	3	0
4 Add lines 1, 2, and 3	4	139,407,005
5 Decreases not included in line 2 (itemize) ▶ _____	5	0
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	139,407,005

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
1 a FARMLAND- IOWA	D	2018-07-15	2018-07-31
b 116,665 SH COCA-COLA COMPANY	D	1975-01-01	2018-02-14
c BESSEMER 260 SHORT TERM	D	2018-01-17	2018-01-24
d BESSEMER 260 LONG TERM	D	2017-07-26	2018-08-21
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 63,700		27,514	36,186
b 5,378,157		5,333,948	44,209
c 883,245		874,283	8,962
d 1,660,592		1,433,438	227,154
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a			36,186
b			44,209
c			8,962
d			227,154
e			

2 Capital gain net income or (net capital loss)	2	316,511
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
 If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2017	3,440,608	54,627,120	0.062984
2016	1,881,274	9,176,109	0.205019
2015			
2014			
2013			

2 Total of line 1, column (d)	2	0.268003
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	0.134002
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	119,593,108
5 Multiply line 4 by line 3	5	16,025,716
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	17,358
7 Add lines 5 and 6	7	16,043,074
8 Enter qualifying distributions from Part XII, line 4	8	2,520,234

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

Table with 11 rows for excise tax calculation. Includes fields for exempt foundations, tax under section 511, subtitle A tax, and total tax due. Includes sub-table for 2018 estimated tax payments (6a-6d).

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Columns include question number, 'Yes', and 'No' checkboxes. Questions cover political campaign influence, political expenditures, and other activities.

Part VII-A Statements Regarding Activities (continued)

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule See instructions.
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement See instructions
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A
14 The books are in care of TINA GARLAND Telephone no (712) 256-5580

Located at 705 NORTH 16TH STREET COUNCIL BLUFFS IA ZIP+4 51501

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 -check here and enter the amount of tax-exempt interest received or accrued during the year 15

16 At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes", enter the name of the foreign country

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a During the year did the foundation (either directly or indirectly)
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days).
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018?
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))
a At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? If "Yes," list the years 20, 20, 20, 20
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement-see instructions).
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20, 20, 20, 20
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?
b If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period?(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2018).
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to			Yes	No
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.		5b	
	Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d)	<input type="checkbox"/> Yes <input type="checkbox"/> No		
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870		6b	No
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		7b	
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000. ▶ **0**

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services. ▶		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ▶	0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	84,041,098
b	Average of monthly cash balances.	1b	547,575
c	Fair market value of all other assets (see instructions).	1c	36,825,650
d	Total (add lines 1a, b, and c).	1d	121,414,323
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	121,414,323
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	1,821,215
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	119,593,108
6	Minimum investment return. Enter 5% of line 5.	6	5,979,655

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	5,979,655
2a	Tax on investment income for 2018 from Part VI, line 5.	2a	34,716
b	Income tax for 2018 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	34,716
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	5,944,939
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	5,944,939
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	5,944,939

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	2,520,234
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	2,520,234
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	2,520,234

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				5,944,939
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only.			0	
b Total for prior years 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2018				
a From 2013.				
b From 2014.				
c From 2015.				
d From 2016.			1,463,921	
e From 2017.			728,992	
f Total of lines 3a through e.	2,192,913			
4 Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ <u>2,520,234</u>				
a Applied to 2017, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2018 distributable amount.				2,520,234
e Remaining amount distributed out of corpus				0
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))	2,192,913			2,192,913
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019				1,231,792
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions).	0			
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	0			
10 Analysis of line 9				
a Excess from 2014.				
b Excess from 2015.				
c Excess from 2016.				
d Excess from 2017.				
e Excess from 2018.				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. ▶

b Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

	Tax year				(e) Total
	(a) 2018	(b) 2017	Prior 3 years		
			(c) 2016	(d) 2015	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					

3 Complete 3a, b, or c for the alternative test relied upon

a "Assets" alternative test—enter

(1) Value of all assets

(2) Value of assets qualifying under section 4942(j)(3)(B)(i)

b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.

c "Support" alternative test—enter

(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)

(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).

(3) Largest amount of support from an exempt organization

(4) Gross investment income

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

CHARLES E LAKING FOUNDATION INC
705 NORTH 16TH STREET
COUNCIL BLUFFS, IA 51501
(712) 256-5580

b The form in which applications should be submitted and information and materials they should include

NONE SPECIFIED

c Any submission deadlines

NONE

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

LIMITED TO THE FOLLOWING COUNTIES IN IOWA (MILLS, MONTGOMERY, POTTAWATTAMIE, FREMONT, PAGE AND CASS) AND NEBRASKA (DOUGLAS AND SARPY)

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total ▶ 3a				
b <i>Approved for future payment</i>				
Total ▶ 3b				

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

Part XVII

- 1** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?
- a** Transfers from the reporting foundation to a noncharitable exempt organization of
- (1)** Cash.
 - (2)** Other assets.
- b** Other transactions
- (1)** Sales of assets to a noncharitable exempt organization.
 - (2)** Purchases of assets from a noncharitable exempt organization.
 - (3)** Rental of facilities, equipment, or other assets.
 - (4)** Reimbursement arrangements.
 - (5)** Loans or loan guarantees.
 - (6)** Performance of services or membership or fundraising solicitations.
- c** Sharing of facilities, equipment, mailing lists, other assets, or paid employees.
- d** If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

	Yes	No
1a(1)		No
1a(2)		No
1b(1)		No
1b(2)		No
1b(3)		No
1b(4)		No
1b(5)		No
1b(6)		No
1c		No

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

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

Sign Here ▶ *****	2019-11-13	*****	
Signature of officer or trustee	Date	Title	

May the IRS discuss this return with the preparer shown below (see instr)? Yes No

Paid Preparer Use Only	Print/Type preparer's name CINDY BRENNEMAN	Preparer's Signature	Date	Check if self-employed ▶ <input type="checkbox"/>	PTIN P00328210
	Firm's name ▶ FRANKEL ZACHARIA LLC				Firm's EIN ▶ 47-0574775
	Firm's address ▶ 11404 WEST DODGE RD SUITE 700 OMAHA, NE 681542576				Phone no (402) 496-9100

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
CHARLES E LAKIN III 2265 SOUTH 21ST AVENUE YUMA, AZ 85364	DIRECTOR/MANAGER 18 00	94,700	0	0
DEBORAH L JOHNSON 196 BEACON HILL LN ASHLAND, OR 97520	DIRECTOR/MANAGER 11 00	61,200	0	0
DIANE KILZER 11857 E IDA PL ENGLEWOOD, CO 80111	DIRECTOR 10 00	52,500	0	0
JOANNA L CELLONE 139 INGLEWOOD DR PITTSBURGH, PA 15228	DIRECTOR, SECRETARY 8 00	42,500	0	0
STEPHEN WILD 222 NORTH 7TH STREET MISSOURI VALLEY, IA 51555	DIRECTOR, PRESIDENT 39 00	202,945	0	0
JOHN L HOICH 5410 NORTH 279TH ST VALLEY, NE 68064	DIRECTOR, VICE PRESIDENT 27 00	140,640	0	0
TINA GARLAND 2610 LINCOLN ST BEATRICE, NE 68310	TREASURER 3 00	17,740	0	0

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
COMPLETELY KIDS2566 ST MARYS AVE OMAHA, NE 68105	NONE	PC	CONTRIBUTION FOR SWIM PROGRAM	85,000
GREATER OMAHA YMCA430 S 20TH ST OMAHA, NE 68102	NONE	PC	CONTRIBUTION FOR NEW BUILDING	5,000
BOYS & GIRLS CLUB8156 N 16TH ST COUNCIL BLUFFS, IA 51501	NONE	PC	CONTRIBUTION FOR GENERAL PURPOSES	100,000
Total ▶ 3a				2,266,856

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MILLS CO IA FAIR ASSNPO BOX 180 MINEOLA, IA 51554	NONE	PC	CONTRIBUTION FOR NEW BUILDING	100,000
GREEN HILLS AEA24997 HWY 92 COUNCIL BLUFFS, IA 51501	NONE	PC	SCHOLARSHIPS	61,300
CHARLES E LAKIN HUMAN SERVICE CAMPUS FOUNDATION 2101 S 42ND ST OMAHA, NE 68105	NONE	PC	MAINTENANCE	975
Total ▶ 3a				2,266,856

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HEARTLAND FAMILY SERVICE 2101 S 42ND ST OMAHA, NE 68105	NONE	PC	CONTRIBUTION FOR GENERAL PURPOSES	1,160,914
MICAH HOUSE CORPORATION 1415 AVENUE J COUNCIL BLUFFS, IA 51501	NONE	PC	CONTRIBUTION FOR SHELTER	500,000
ANGELS ON WHEELS INC 5030 N 72ND ST OMAHA, NE 68134	NONE	PC	CONTRIBUTION FOR GENERAL PURPOSES	2,500
Total ▶ 3a				2,266,856

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CHARIOTS 4 HOPE INC 10845 HARNEY ST OMAHA, NE 68145	NONE	PC	CONTRIBUTION FOR GENERAL PURPOSES	2,500
GOODFELLOWS INC 1314 DOUGLAS ST OMAHA, NE 68102	NONE	PC	CONTRIBUTION FOR GENERAL PURPOSES	7,880
DO SPACE 7205 DODGE ST OMAHA, NE 68114	NONE	PC	CONTRIBUTION FOR GENERAL PURPOSES	5,000
Total ▶ 3a				2,266,856

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
OMAHA EQUESTRIAN FOUNDATION 1004 FARNAM ST OMAHA, NE 68102	NONE	PC	CONTRIBUTION FOR GENERAL PURPOSES	5,000
POLICE ATHLETICS FOR COMMUNITY ENGAGEMENT 5105 S 37TH ST OMAHA, NE 68107	NONE	PC	HARVESTER II ARTS & CULTURE CENTER	166,667
WOMEN'S CENTER FOR ADVANCEMENT 3801 HARNEY ST OMAHA, NE 68131	NONE	PC	CONTRIBUTION FOR GENERAL PURPOSES	5,000
Total ▶ 3a				2,266,856

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
REJUVENATING WOMENPO BOX 207 BOYS TOWN, NE 68010	NONE	PC	CONTRIBUTION FOR GENERAL PURPOSES	1,000
STEPHEN CENTER INC2723 Q ST OMAHA, NE 68107	NONE	PC	CONTRIBUTION FOR GENERAL PURPOSES	2,500
SUBURBAN ROTARY CHARITABLE FOUNDATION 4089 SOUTH 84TH STREET OMAHA, NE 68127	NONE	PC	CONTRIBUTION FOR GENERAL PURPOSES	2,000
Total				2,266,856

▶ 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
POST TRAUMATIC GROWTH INSTITUTE 1065 N 115TH ST STE 100 OMAHA, NE 68154	NONE	PC	CONTRIBUTION FOR GENERAL PURPOSES	9,120
NEW VISIONS HOMELESS SERVICES 1425 N 18TH STREET OMAHA, NE 68102	NONE	PC	CONTRIBUTION FOR GENERAL PURPOSES	2,500
CHILDREN'S SCHOLARSHIP FUND OF OMAHA 7101 MERCY RD 150 OMAHA, NE 68106	NONE	PC	CONTRIBUTION FOR GENERAL PURPOSES	35,000
Total ▶ 3a				2,266,856

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CHILDREN'S HOSPITAL & MEDICAL CENTER FOUNDATION 8401 W DODGE ROAD OMAHA, NE 68114	NONE	PC	CONTRIBUTION FOR GENERAL PURPOSES	2,500
CHILDREN'S SQUARE USA500 N 7TH ST COUNCIL BLUFFS, NE 51503	NONE	PC	CONTRIBUTION FOR GENERAL PURPOSES	2,500
JOSHUA COLLINGSWORTH MEMORIAL FOUNDATION PO BOX 21712 LINCOLN, NE 68542	NONE	PC	CONTRIBUTION FOR GENERAL PURPOSES	2,000
Total ▶ 3a				2,266,856

TY 2018 Accounting Fees Schedule**Name:** CHARLES E LAKIN FOUNDATION INC**EIN:** 76-0751233

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	3,195	0		0

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

TY 2018 Depreciation Schedule

Name: CHARLES E LAKIN FOUNDATION INC

EIN: 76-0751233

Depreciation Schedule

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
COLORADO PROPERTY	2018-04-15	14,700,000		SL	27 5000000000000	378,636	378,636		
COLORADO PROPERTY II	2018-04-15	2,123,665		SL	39 0000000000000	38,571	38,571		
COLORADO PROPERTY- LAND	1987-04-15	2,676,335		L		0	0		
ARIZONA PROPERTY	2018-07-15	2,194,400		SL	39 0000000000000	25,789	25,789		
IOWA PROPERTY	2018-07-15	12,700		200DB	7 0000000000000	1,814	907		
IOWA PROPERTY- LAND	2018-07-15	35,713,091		L		0	0		
SUMMIT HOUSE	2018-07-15	253,040		NC	0 %	0	0		
SUMMIT HOUSE- LAND	2018-07-15	5,160		L		0	0		
ARIZONA PROPERTY- LAND	2018-07-15	8,996,949		L		0	0		
CAMPUS BUILDING	2018-06-15	292,859		SL	39 0000000000000	4,067	0		
CAMPUS BUILDING IMPROVEMENTS	2018-07-15	10,620		SL	39 0000000000000	125	0		
CAMPUS BUILDING IMPROVEMENTS	2018-09-15	7,000		SL	39 0000000000000	52	0		
CAMPUS BUILDING IMPROVEMENTS	2018-12-15	27,470		SL	39 0000000000000	29	0		
CAMPUS LAND	2018-06-15	10,000		L		0	0		

TY 2018 Investments Corporate Stock Schedule**Name:** CHARLES E LAKIN FOUNDATION INC**EIN:** 76-0751233

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
UBS FINANCIAL	21,170,451	30,600,000

TY 2018 Investments - Land Schedule**Name:** CHARLES E LAKIN FOUNDATION INC**EIN:** 76-0751233

Category/ Item	Cost/Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
COLORADO PROPERTY	14,700,000	378,636	14,321,364	14,321,364
COLORADO PROPERTY II	2,123,665	38,571	2,085,094	2,085,094
COLORADO PROPERTY- LAND	2,676,335	0	2,676,335	2,811,335
ARIZONA PROPERTY	2,194,400	25,789	2,168,611	2,168,611
IOWA PROPERTY	12,700	1,814	10,886	10,886
IOWA PROPERTY- LAND	35,713,091	0	35,713,091	32,183,635
SUMMIT HOUSE	253,040	0	253,040	253,040
SUMMIT HOUSE- LAND	5,160	0	5,160	5,160
ARIZONA PROPERTY- LAND	8,996,949	0	8,996,949	8,956,850

TY 2018 Investments - Other Schedule**Name:** CHARLES E LAKIN FOUNDATION INC**EIN:** 76-0751233**Investments Other Schedule 2**

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
BESSENER TRUST	AT COST	50,635,759	48,369,536

**TY 2018 Land, Etc.
Schedule****Name:** CHARLES E LAKIN FOUNDATION INC**EIN:** 76-0751233

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
CAMPUS BUILDING	292,859	4,067	288,792	288,792
CAMPUS BUILDING IMPROVEMENTS	10,620	125	10,495	10,495
CAMPUS BUILDING IMPROVEMENTS	7,000	52	6,948	6,948
CAMPUS BUILDING IMPROVEMENTS	27,470	29	27,441	27,441
CAMPUS LAND	10,000	0	10,000	10,000

TY 2018 Legal Fees Schedule**Name:** CHARLES E LAKIN FOUNDATION INC**EIN:** 76-0751233

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	165,200	123,900		0

TY 2018 Other Assets Schedule**Name:** CHARLES E LAKIN FOUNDATION INC**EIN:** 76-0751233**Other Assets Schedule**

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
NOTES RECEIVABLE	0	78,362	78,362
MISCELLANEOUS ASSETS	0	3,551	3,551

TY 2018 Other Expenses Schedule**Name:** CHARLES E LAKIN FOUNDATION INC**EIN:** 76-0751233**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OFFICE SUPPLIES	34,540	0		0
OTHER EXPENSES	7,285	0		0
OFFICE SUPPLIES- RENTAL	9,381	9,381		0
OTHER EXPENSES- RENTAL	4,567	4,567		0

TY 2018 Other Liabilities Schedule**Name:** CHARLES E LAKIN FOUNDATION INC**EIN:** 76-0751233

Description	Beginning of Year - Book Value	End of Year - Book Value
MISCELLANEOUS LIABILITIES	0	3,170

TY 2018 Other Professional Fees Schedule**Name:** CHARLES E LAKIN FOUNDATION INC**EIN:** 76-0751233

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OTHER PROFESSIONAL FEES	45,342	0		45,342
INVESTMENT MANAGEMENT FEES	87,951	87,951		0
COMMISSIONS- RENTAL	29,206	29,206		0
MANAGEMENT FEE- RENTAL	61,472	61,472		0
OTHER- RENTAL	55,985	55,985		0

TY 2018 Taxes Schedule**Name:** CHARLES E LAKIN FOUNDATION INC**EIN:** 76-0751233

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL	21,574	0		0
FOREIGN	31,832	31,832		0

Schedule B
(Form 990, 990-EZ,
or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors
▶ Attach to Form 990, 990-EZ, or 990-PF
▶ Go to www.irs.gov/Form990 for the latest information

OMB No 1545-0047
2018

Name of the organization
CHARLES E LAKIN FOUNDATION INC

Employer identification number
76-0751233

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

- 501(c)() (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization

Form 990-PF

- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

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

Special Rules

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

Caution. An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 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 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization
CHARLES E LAKIN FOUNDATION INC

Employer identification number
76-0751233

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
—	See Additional Data Table _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)

Name of organization
CHARLES E LAKIN FOUNDATION INC

Employer identification number
76-0751233

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
—	See Additional Data Table	\$ _____	_____
—		\$ _____	_____
—		\$ _____	_____
—		\$ _____	_____
—		\$ _____	_____
—		\$ _____	_____

Name of organization CHARLES E LAKIN FOUNDATION INC	Employer identification number 76-0751233
---------------------------------------------------------------	-----------------------------------------------------

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. 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. See instructions.) ▶ \$ _____
 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
	_____ _____	_____ _____	_____ _____

Additional Data

Software ID:

Software Version:

EIN: 76-0751233

Name: CHARLES E LAKIN FOUNDATION INC

Form 990 Schedule B, 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	CHARLES E LAKIN REVOCABLE TRUST	\$ 1,800,000	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)
	705 NORTH 16TH STREET		
	COUNCIL BLUFFS, IA 51501		
2	CHARLES E LAKIN REVOCABLE TRUST	\$ 2,700,000	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)
	705 NORTH 16TH STREET		
	COUNCIL BLUFFS, IA 51501		
3	CHARLES E LAKIN REVOCABLE TRUST	\$ 15,000,000	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)
	705 NORTH 16TH STREET		
	COUNCIL BLUFFS, IA 51501		
4	CHARLES E LAKIN REVOCABLE TRUST	\$ 35,753,305	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)
	705 NORTH 16TH STREET		
	COUNCIL BLUFFS, IA 51501		
5	CHARLES E LAKIN REVOCABLE TRUST	\$ 258,200	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)
	705 NORTH 16TH STREET		
	COUNCIL BLUFFS, IA 51501		
6	CHARLES E LAKIN REVOCABLE TRUST	\$ 11,191,349	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)
	705 NORTH 16TH STREET		
	COUNCIL BLUFFS, IA 51501		

Form 990 Schedule B, 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	CHARLES E LAKIN REVOCABLE TRUST	\$ 250,234	Person <input checked="" type="checkbox"/>
	705 NORTH 16TH STREET		Payroll <input type="checkbox"/>
	COUNCIL BLUFFS, IA 51501		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
8	CHARLES E LAKIN REVOCABLE TRUST	\$ 58,844	Person <input type="checkbox"/>
	705 NORTH 16TH STREET		Payroll <input type="checkbox"/>
	COUNCIL BLUFFS, IA 51501		Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)
9	CHARLES E LAKIN REVOCABLE TRUST	\$ 36,746	Person <input type="checkbox"/>
	705 NORTH 16TH STREET		Payroll <input type="checkbox"/>
	COUNCIL BLUFFS, IA 51501		Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)
10	CHARLES E LAKIN REVOCABLE TRUST	\$ 9,688	Person <input type="checkbox"/>
	705 NORTH 16TH STREET		Payroll <input type="checkbox"/>
	COUNCIL BLUFFS, IA 51501		Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)
11	CHARLES E LAKIN REVOCABLE TRUST	\$ 346,382	Person <input type="checkbox"/>
	705 NORTH 16TH STREET		Payroll <input type="checkbox"/>
	COUNCIL BLUFFS, IA 51501		Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)

Form 990 Schedule B, 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
<u>1</u>	100% INTEREST IN NELSON AVENUE FAMILY PTRS LLC- REAL PROPERTY AT 175 WILLIAMS ST, MINTURN,CO	<u>\$ 1,800,000</u>	<u>2018-02-01</u>
<u>2</u>	100% INTEREST IN OAKRIDGE, LLC WHICH OWNS REAL PROPERTY AT 106 OAK RIDGE DRIVE, GYPSUM, CO	<u>\$ 2,700,000</u>	<u>2018-02-01</u>
<u>3</u>	100% INTEREST IN BEL LAGO, LLC WHICH OWN REAL PROPERTY AT 540 WEST BEAVER CREEK BOULEVARD, AVON, CO	<u>\$ 15,000,000</u>	<u>2018-02-01</u>
<u>4</u>	AGRICULTURAL REAL PROPERTY LOCATED IN THE STATE OF IOWA	<u>\$ 35,753,305</u>	<u>2018-07-31</u>
<u>5</u>	PERSONAL RESIDENCE LOCATED AT 1217 N 98TH COURT, OMAHA, NE	<u>\$ 258,200</u>	<u>2018-07-31</u>
<u>6</u>	COMMERCIAL REAL PROPERTY LOCATED IN THE STATE OF ARIZONA	<u>\$ 11,191,349</u>	<u>2018-07-31</u>
<u>8</u>	NOTE RECEIVABLE FROM THE INDIAN CREEK HISTORICAL SOCIETY, INC	<u>\$ 58,844</u>	<u>2018-03-30</u>
<u>9</u>	NOTE RECEIVABLE FROM AN INDIVIDUAL	<u>\$ 36,746</u>	<u>2018-04-09</u>
<u>10</u>	NOTE RECEIVABLE FROM INDIVIDUAL PERSONS	<u>\$ 9,688</u>	<u>2018-04-09</u>
<u>11</u>	SHARES OF COCA COLA COMPANY	<u>\$ 346,382</u>	<u>2018-01-01</u>