Department of the Treasury

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

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

OMB No. 1545-0047 Open to Public Inspection

Δ .	For the 2	022 calendar year, or tax year beginning		, and ending							
	heck if applic	- · · · · · · · · · · · · · · · · · · ·					D Employer	identification nu	mber		
\neg	ddess chang	HTOMODIO 178	HISTORIC VALLEY JUNCTION FOUNDATION								
╡		Ocing business as					42-13	3380 <u>90</u>			
ן ∟	lame change	ne charge Number and street (or P.O. box if mail is not delivered to street address)				Room/suite	E Telephone				
\exists	Malman 137 5TH STREET				515-222-3642						
	inal return/	City or town, state or province, country, and ZIP or foreign postal code									
_	erminaled	N202 210 1000	WEST DES MOINES IA 50265				G Gross rec	eiots\$	<u>466,216</u>		
_] ≠	Amended retu	F Name and address of principal officer.				H(a) İsthisa gro	n min m for m	horringtee?	Yes X No		
]/	Application pe	stephanie Trannel						一			
_		137 5TH ST.				H(b) Are all sub-			Yes ∐ No		
		WEST DES MOINESI	IA	50265		if "No,"	attach a list.	See instructions			
	T1	V /		4947(a)(1) or	527	7					
	Tax-exempt	WWW.VALLEYJUNCTION.COM		,		H(c) Group exer	nption numbe	r			
_	Website:		Other		L Y	eer of tormation: 1	987	M State of legal	omicie IA		
	Form of orga		CHI								
P	art I	Summary	anificant ac	tivities:	800	Smith Market	5.4				
Ì	1 Brie	offly describe the organization's mission or most since INSPIRE AND ENHANCE THE EVO	STEEDT ON	OF THE OF	TGTNAT. H	ISTORIC V	ALLEY				
8		TO INSPIRE AND ENHANCE THE EV	TOT TON	CURDING TE	E BIGHOD	v ATTRACT	TING A	ND	*********		
Governance		JUNCTION DISTRICT BY PRESERVING	IG WIND	SHARING II	COMMECTI	NG THE CO	COMMINITY				
19		SUPPORTING SMALL BUSINESSES, A	MD ENG	WOTING WILD	COMMECIA	of 20 and 000					
Ó	2 Che	eck this box if the organization discontinued it	s operations	s or disposed of	more than 25%	or its het asser	دة. أيا	9			
<u>ح</u>	3 Nui	mber of voting members of the governing body (Pa	art VI, line 1	a)				9			
	4 Nu	mber of independent voting members of the gover	ning body (I	Part VI, line 1b)			n 4	4			
Activities	5 Tot	al number of individuals employed in calendar yea	г 2022 (Par	t V, line 2a)			. 5				
듕	6 Tot	tal number of volunteers (estimate if necessary)	A N	M. STORE STORE		A	6	185			
⋖	7a Tol	tal unrelated business revenue from Part VIII, colu	mn (C), line	12	A		7/a1		0		
	b No	t unrelated business taxable income from Form 99	0-T. Part I.	line 11		.A.AA.B	7b		0		
_	D IAE	t difficiated business tenders to	- 10		100	PTIOT TE		Current			
	l a Co	8 Contributions and grants (Part VIII, line 1h)					7,504		85,424		
16	8 Dr	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)			230	0,947		80,521			
Revenue	40 104					<u>704</u>		<u>271</u>			
8	44 0	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)						l	0		
	11 00	tal revenue – add lines 8 through 11 (must equal l	Part VIII on	lumn (A), line 12		40	9,155	4	66, <u>216</u>		
	12 10	ants and similar amounts paid (Part IX, column (A) lines 1_3	1					0		
	13 Gr	ants and similar amounts paid (Part IX, column (A	line Al						0		
	14 Be	nefits paid to or for members (Part IX, COlumn (X)	its paid to or for members (Part IX, column (A), line 4)					1	50,955		
89	15 Sa	es, other compensation, employee benefits (Part IX, column (A), lines 5-10)					3 <u>,140</u>		0		
Expenses	16a Pn	ofessional fundraising fees (Part IX, column (A), lir	ne 11e)		n	ENGLISHMENTS:	esc mon	พระกระสมเดินกั	1 2 5 5		
8	. b To	tal fundraising expenses (Part IX, column (D), line	fundraising expenses (Part IX, column (D), line 25)				2,378	2	97,816		
ũ	1 17 01	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)					$\frac{2}{5}, \frac{5}{5}$		48,771		
	18 To	tal expenses. Add lines 13-17 (must equal Part I)	expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)				3,637	-	17,445		
	19 Re	evenue less expenses. Subtract line 18 from line 12				Beginning of Cu		End o			
b	8						3,336		98,381		
Net Assets or	20 To	otal assets (Part X, line 16)				- 3 /	7,860		15,460		
8	의 21 To	otal liabilities (Part X, line 26)				36	5,476		82,921		
₹.	1 22 Ne	et assets or fund balances. Subtract line 21 from li	ne 20	 <u> </u>			3,410		02,321		
	Donald III	Signature Block						 	P. F. W. I.		
		alties of perjury, I declare that I have examined this return	n, including a	ccompanying sched	dules and statem	ents, and to the b	est of my k	mowledge and b	ellet, it is		
t	тие, соптес	alties of perjury, I declare that I have examined this record t, and complete. Declaration of preparer (other than office	er) is based	on all information of	which preparer	nas any knowled	Ae.				
e:		Signature of officer			Date	Ð					
	9''	JASON KEIGLEY TREASURER									
H	ere	Type or print name and title									
_			Preparer's sig	nature		Date	Chec	k if PTIN			
_	I	Print/Type preparer's name		•		02/2/	1/23 self-e	mployed P00:	160840		
	01 E	ALTO I. BELLOIS, CONT.		ELLIOTT, CPA			Firm's EIN		222846		
Pr	eparer			ES LLC			LAIUS ENA	<u> </u>			
Ųŧ	se Only	5623 NW 86TH S	T STE	400				515-72	27-6218		
	l	Firm's address JOHNSTON, IA	<u> 50131-</u>	2956			Phone no.				
14	45 - 100	S discuss this return with the preparer shown above	e? See inst	ructions				X	Yes No		

	(Expenses \$ including grants of	\$) (Revenue	
40	Other program services (Describe on Schedule O.)		
	*		

	I/A	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(Code:) (Expenses \$ in	ncluding grants of \$) (Revenue \$

À	// A		
	(Code:) (Expenses \$ in	ncluding grants of \$) (Revenue \$
			.,
			.,
	HE ART MARKET. MANY OF THESE NHANCE COMMUNITY INVOLVMENT AND	SIC IN THE JUNCTION, PARTY, CINCO DE MA VENUES PROVIDE FAMIL TO SHOWCASE THE HI	FARMERS' MARKET, JING YO, ANTIQUE JAMBOREE A Y FRIENDLY ACTIVITIES
ľ	HE ORGANIZATION HOSTS SPECIAL E	cluding grants of \$) (Revenue \$ 280,52: YEAR TO PROMOTE AND
	Describe the organization's program service accomplishments of expenses. Section 501(c)(3) and 501(c)(4) organizations are rethe total expenses, and revenue, if any, for each program services.	quired to report the amount of grants an	d allocations to others,
	If "Yes," describe these changes on Schedule O.		
	services?		Yes X
	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant cha	nges in how it conducts, any program	
	prior Form 990 or 990-EZ?		📙 165 [6]
	Did the organization undertake any significant program services		
т	O INSPIRE AND ENHANCE THE EVOLU- UNCTION DISTRICT BY PRESERVING UPPORTING SMALL BUSINESSES, AND	AND SHARING THE HIS!	TORY, ATTRACTING AND
	bilely describe the organizations mission.		
	Check if Schedule O contains a response of Briefly describe the organization's mission:		

Checklist of Required Schedules Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," X complete Schedule A X 2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to X 3 candidates for public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) X election in effect during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, X assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If X "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," X 8 complete Schedule D, Part III 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 X 9 debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in donor-restricted endowments 10 X 10 or in quasi endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 11 VII, VIII, IX, or X, as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," 11a complete Schedule D, Part VI b Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more Х 11b of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more X 11c of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets X 11d reported in Part X, line 16? If "Yes," complete Schedule D, Part IX X 11e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X 12a Schedule D, Parts XI and XII b Was the organization included in consolidated, independent audited financial statements for the tax year? If 12b "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14a 14a Did the organization maintain an office, employees, or agents outside of the United States? 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 X 14b foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or X 15 for any foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other X 16 assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 17 Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 X 18 Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 19 If "Yes," complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a 20b b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

Form **990** (2022)

Pa	art IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			l
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			1
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
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		<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			1
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			1
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			1
	if "Yes," complete Schedule L, Part i	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			1
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			1
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			1
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	nomena? If "Van " complete Schodule I Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,	1/4	1,78	
20	Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		788	
	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
а		28a		X
_	"Yes," complete Schedule L, Part IV A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	\vdash	X
b		200		<u> </u>
C	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	28c		x
	"Yes," complete Schedule L, Part IV	29	 	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	25		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	20		x
	conservation contributions? If "Yes," complete Schedule M	30	-	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"		l	x
	complete Schedule N, Part II	32	├	_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	\vdash	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	l		
	or IV, and Part V, line 1	34	-	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	-	X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			1
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	-	\vdash
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	1		۱
	related organization? If "Yes," complete Schedule R, Part V, line 2	36	-	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			ا ا
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	┞	X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
	19? Note: All Form 990 filers are required to complete Schedule O.	38	X	
P	art 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			\Box
			Yes	No
1a				
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	_		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		

***	990 (2022) HISTORIC VALLEY JUNCTION FOUNDATION 42-1338 art V Statements Regarding Other IRS Filings and Tax Compliance (continuous)				Yes	age <u>5</u> No
	Int V Statements Regarding Other IRS Filings and Tax Compliance (continuation of employees reported on Form W-3, Transmittal of Wage and Tax	lueu)		88=1	162	140
2a	Statements, filed for the calendar year ending with or within the year covered by this return	2a	4	18. 8		
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns			2b	X	
b 3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	• • •		2-		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			35		\vdash
40	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a		x
ь	If the final and the same of the family south				1. 10	
-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				- COM	189
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa			400		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			-		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did ti					
	organization solicit any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution					
	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).			1.		- 37
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	goods		Tixo	1, 2	28.00
	and services provided to the payor?			7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					
	required to file Form 8282?			7c		X
d	if "Yes," indicate the number of Forms 8282 filed during the year	7d			×	- 3
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	contrac	t?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	ract?		. 7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			. 7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation fil	e a Form 1098-C?	. 7h		X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	ed by t	he		- 8	=000
	sponsoring organization have excess business holdings at any time during the year?			8		<u> </u>
9	Sponsoring organizations maintaining donor advised funds.			×		
а						—
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? \dots	<i></i>		9b		700
10	Section 501(c)(7) organizations. Enter:		1		1	
а	Initiation fees and capital contributions included on Part VIII, line 12	10a		(VEE)	T. Carlotte	71500111
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:		1	V ()		200
а	Gross income from members or shareholders	11a		1,17	747	7
b	Gross income from other sources. (Do not net amounts due or paid to other sources	l				M V
	against amounts due or received from them.)	11b			337	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form			12a		
ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			+100	3 10
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			40-	_	\vdash
а	Is the organization licensed to issue qualified health plans in more than one state?			13a	110	
	Note: See the instructions for additional information the organization must report on Schedule O.			1 (1)		
b	Enter the amount of reserves the organization is required to maintain by the states in which	1406	1			
	the organization is licensed to issue qualified health plans	130				Will Will
C	Enter the amount of reserves on hand	136		14a		х
14a	• • • • • • • • • • • • • • • • • • • •				-	<u> </u>
b				140		\vdash
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			15		x
	excess parachute payment(s) during the year?	• • • • • • •		13	- 2	Ylo
46	If "Yes," see instructions and file Form 4720, Schedule N.	t inco-	ne?	16	= 98	x
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?					
47	If "Yes," complete Form 4720, Schedule O.	viliae				1
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any activities					-
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?					1

Form 990 (2022) HISTORIC VALLEY JUNCTION FOUNDATION 42-1338090 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. b Enter the number of voting members included on line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? X 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 8 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 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? Each committee with authority to act on behalf of the governing body? X 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? b Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a 12b b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done 12c X 13 Did the organization have a written whistleblower policy? <u>13</u> Did the organization have a written document retention and destruction policy? 14 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed NONE 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records

IA 50265

WEST DES MOINES

HISTORIC VALLEY JUNCTION FOUNDATION 137 5TH STREET