000 T		EXTENDED TO NOVEMBER 15, 2022		OMB No. 1545-0047		
Form 990-T						
		(and proxy tax under section 6033(e))		2021		
	For ca	endar year 2021 or other tax year beginning, and ending	·	Ζυζ Ι		
Department of the Treasury Internal Revenue Service	►	► Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)	· · ·	Open to Public Inspection for 501(c)(3) Organizations Only		
A Check box if address changed.		Name of organization (Check box if name changed and see instructions.)	DEmplo	oyer identification number		
B Exempt under section	Print	QUAD CITIES COMMUNITY FOUNDATION	4	2-6122716		
X 501(c)(3)	_ or	Number, street, and room or suite no. If a P.O. box, see instructions.	E Group	exemption number		
408(e) 220(e)	Type	852 MIDDLE ROAD, 100	(000 !!			
408A 530(a)		City or town, state or province, country, and ZIP or foreign postal code				
529(a) 529A		BETTENDORF, IA 52722	F	Check box if		
	C Bo	ok value of all assets at end of year		an amended return.		
G Check organization	type 🕨	X 501(c) corporation 501(c) trust 401(a) trust Other trust				
H Check if filing only to	o 🕨	Claim credit from Form 8941 Claim a refund shown on Form 2439				
Check if a 501(c)(3)	organiz	ation filing a consolidated return with a 501(c)(2) titleholding corporation				
J Enter the number of	attach	ed Schedules A (Form 990-T)		2		
K During the tax year,	was the	e corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?		Yes X No		
If "Yes," enter the na	ame an	d identifying number of the parent corporation.				
		MICHELLE PAYNE Telephone number	563-	326-2840		
Part I Total Uni	relate	d Business Taxable Income				
1 Total of unrelated	busine	ss taxable income computed from all unrelated trades or businesses (see				
instructions)			1	19,351.		
2 Reserved			2			
3 Add lines 1 and 2			3	19,351.		
4 Charitable contrib	utions (see instructions for limitation rules)	4	0.		
5 Total unrelated bu	isiness	taxable income before net operating losses. Subtract line 4 from line 3	. 5	19,351.		
6 Deduction for net	operati	ng loss. See instructions	6			
7 Total of unrelated	busine	ss taxable income before specific deduction and section 199A deduction.				
Subtract line 6 fro				19,351.		
		ally \$1,000, but see instructions for exceptions)		1,000.		
9 Trusts. Section 1	99A de	duction. See instructions	9			
10 Total deductions			10	1,000.		
11 Unrelated busine	ess taxa	ble income. Subtract line 10 from line 7. If line 10 is greater than line 7,				
enter zero	<u></u>		11	18,351.		
Part II Tax Com				0.054		
		s corporations. Multiply Part I, line 11 by 21% (0.21)	▶ 1	3,854.		
	_	ates. See instructions for tax computation. Income tax on the amount on				
Part I, line 11 from		Tax rate schedule or Schedule D (Form 1041)	2			
3 Proxy tax. See ins			▶ 3			
4 Other tax amount						
5 Alternative minimu		27				
•		cility income. See instructions		2 0 5 4		
		h 6 to line 1 or 2, whichever applies	7	3,854.		
1 HA For Paperwork	Roduct	ion Act Natice, see instructions		⊢orm 330-1 (2021)		

LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-1** (2021)

	90-T (2021)		P	2 age
Part	III Tax and Payments			
1a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)			
b	Other credits (see instructions) 1b			
с	General business credit. Attach Form 3800 (see instructions)			
d	Credit for prior year minimum tax (attach Form 8801 or 8827) 1d			
е	Total credits. Add lines 1a through 1d	1e		
2	Subtract line 1e from Part II, line 7	2	3,8	54.
3	Other amounts due. Check if from: Form 4255 Form 8611 Form 8697 Form 8866	3		
4	Total tax. Add lines 2 and 3 (see instructions).			
	section 1294. Enter tax amount here	4	3,8	54.
5	Current net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 4	5		0.
6a	Payments: A 2020 overpayment credited to 2021 6a			
b	2021 estimated tax payments. Check if section 643(g) election applies 6b 5,000.			
с	Tax deposited with Form 8868 6c 30,000.			
d	Foreign organizations: Tax paid or withheld at source (see instructions)			
е	Backup withholding (see instructions) 6e			
f	Credit for small employer health insurance premiums (attach Form 8941)			
g	Other credits, adjustments, and payments: Form 2439			
	□ Form 4136 Other Total ▶ 6g			
7	Total payments. Add lines 6a through 6g	7	35,00	00.
8	Estimated tax penalty (see instructions). Check if Form 2220 is attached	8		17.
9	Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed	9		
10	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid		<u>31,1</u>	
	Enter the amount of line 10 you want: Credited to 2022 estimated tax Refunded	11	31,12	29.
Part	IV Statements Regarding Certain Activities and Other Information (see instructions)			
1	At any time during the 2021 calendar year, did the organization have an interest in or a signature or other authority		Yes	No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file			
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country			
	here		-	X
2	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a			
	foreign trust?			X
	If "Yes," see instructions for other forms the organization may have to file.			
3	Enter the amount of tax-exempt interest received or accrued during the tax year > \$			
4	Enter available pre-2018 NOL carryovers here 🕨 \$ Do not include any post-2017 NOL carr			
	shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part	•		
5	Post-2017 NOL carryovers. Enter available Business Activity Code and post-2017 NOL carryovers. Don't reduce			
	the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.		-	
	Business Activity Code Available post-2017 NOL ca		-	
	541200 \$	1,933.	-	
	\$		-	v
6a	Did the organization change its method of accounting? (see instructions)			X
b	If 6a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No,"			
Dert	explain in Part V Supplemental Information			Ĺ
Part				

Provide the explanation required by Part IV, line 6b. Also, provide any other additional information. See instructions.

	Inder 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, orrect, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.								
Here	Signature of officer			DENT & CH	EO	the pr	he IRS discuss this return with eparer shown below (see ctions)? X Yes No		
	Print/Type preparer's name	Preparer's signature		Date	Check	if	PTIN		
Paid Preparer	JENIFER L. CHASE	JENIFER L.	CHASE	10/31/22			P01306883		
Use Only	Firm's name ► RSM US LLP 4650 EAST	Firm's EIN		42-0714325					
	Firm's address 🕨 DAVENPORT, IA 52807-3479						Phone no. 563-888-4000		

SCHE	DULE A
(Form	990-T)

Department of the Treasury

Internal Revenue Service

Unrelated Business Taxable Income From an Unrelated Trade or Business

► Go to www.irs.gov/Form990T for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

OMB No. 1545-0047

Open to Public Inspection for 501(c)(3) Organizations Only

2

B Employer identification number

1

of

42-6122716

D Sequence:

Α	Name of the organization	

QUAD CITIES COMMUNITY FOUNDATION

Unrelated business activity code (see instructions) > 541200 С

Describe the unrelated trade or business ADMINISTRATIVE SERVICES FOR A PRIVATE FOUNDAT

ΕC	Describe the unrelated trade or business ADMINISTRATI	VES	ERVICES FOR	A PRIVATE	<u>FOUI</u>	NDAT
Pa	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses	s	(C) Net
1a	Gross receipts or sales 79,154.					
b	Less returns and allowances c Balance ►	1c	79,154.			
2	Cost of goods sold (Part III, line 8)	2				
3	Gross profit. Subtract line 2 from line 1c	3	79,154.			79,154.
4 a	Capital gain net income (attach Sch D (Form 1041 or Form					
	1120)). See instructions	4a				
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions)	4b				
с	Capital loss deduction for trusts	4c				
5	Income (loss) from a partnership or an S corporation (attach					
	statement)	5				
6	Rent income (Part IV)	6				
7	Unrelated debt-financed income (Part V)	7				
8	Interest, annuities, royalties, and rents from a controlled					
	organization (Part VI)	8				
9	Investment income of section 501(c)(7), (9), or (17)					
	organizations (Part VII)	9				
10	Exploited exempt activity income (Part VIII)	10				
11	Advertising income (Part IX)	11				
12	Other income (see instructions; attach statement)	12				
13	Total. Combine lines 3 through 12	13	79,154.			79,154.
Pa	TII Deductions Not Taken Elsewhere See instruction directly connected with the unrelated business in		r limitations on dec	ductions. Dedu	ctions r	
1	Compensation of officers, directors, and trustees (Part X)				1	5,192.
2	Salaries and wages				2	51,594.
3	Repairs and maintenance				3	
4	Bad debts				4	
5	Interest (attach statement). See instructions				5	
6	Taxes and licenses				6	
7	Depreciation (attach Form 4562). See instructions					
8	Less depreciation claimed in Part III and elsewhere on return				8b	2,710.
9	Depletion				9	
10	Contributions to deferred compensation plans				10	1,399.
11	Employee benefit programs				11	5,656.

Employee benefit programs Excess exempt expenses (Part VIII)

Other deductions (attach statement) SEE STATEMENT 1

Total deductions. Add lines 1 through 14

column (C) Deduction for net operating loss. See instructions

Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13,

Excess readership costs (Part IX)

Unrelated business taxable income. Subtract line 17 from line 16

For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2021

44,531.

111,082.

-31.928.

-31.928.

0.

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LHA

							1
Sched Part	ule A (Form 990-T) 2021 III Cost of Goods Sold Enter meth	od of inventory valu					Page 2
1	Inventory at beginning of year				1		
2	Purchases				2		
3	Cost of labor				3		
4	Additional section 263A costs (attach statement)				4		
5	Other costs (attach statement)				5		
6	Total. Add lines 1 through 5				6		
7	Inventory at end of year				7		
8	Cost of goods sold. Subtract line 7 from line 6. Enter h				8		
9	Do the rules of section 263A (with respect to property p					Yes	No
Part	IV Rent Income (From Real Property and	Personal Prope	erty Leased with Re	al Proper	ty)		
1	Description of property (property street address, city, st	ate, ZIP code). Chec	k if a dual-use. See instru	ctions.			
	A						
	в						
	c						
	D		- <u>r</u> r				
	-	Α	В	С		D	
2	Rent received or accrued						
а	From personal property (if the percentage of						
	rent for personal property is more than 10%						
	but not more than 50%)						
b	From real and personal property (if the						
	percentage of rent for personal property exceeds						
	50% or if the rent is based on profit or income)						
С	Total rents received or accrued by property.						
	Add lines 2a and 2b, columns A through D						
							0
3	Total rents received or accrued. Add line 2c columns A	through D. Enter her	re and on Part I, line 6, co	lumn (A)			0.
	Deductions directly connected with the income						
4	in lines 2(a) and 2(b) (attach statement)						
-	Total de des l'anna Addition de aleman Adherente D. Est						0.
5 Part	Total deductions. Add line 4 columns A through D. Ent V Unrelated Debt-Financed Income (se	e instructions)	т, ппе 6, соштт (в)				0.
1	Description of debt-financed property (street address, c		Check if a dual-use. See	netructione			
•	A	ity, state, Zir codej.	Offeck if a dual-use. See				
	в 🗌						
	c 🗌						
	D						
		Α	В	С		D	
2	Gross income from or allocable to debt-financed						
	property						
3	Deductions directly connected with or allocable						
	to debt-financed property						
а	Straight line depreciation (attach statement)						
b	Other deductions (attach statement)						
с	Total deductions (add lines 3a and 3b,						
	columns A through D)						
4	Amount of average acquisition debt on or allocable						
	to debt-financed property (attach statement)						
5	Average adjusted basis of or allocable to debt-						
	financed property (attach statement)						
6	Divide line 4 by line 5	(%		%		%
7	Gross income reportable. Multiply line 2 by line 6						
8	Total gross income (add line 7, columns A through D).	Enter here and on F	art I, line 7, column (A)		. ►		0.
	-						
9	Allocable deductions. Multiply line 3c by line 6						
10	Total allocable deductions. Add line 9, columns A thro						0.
11	Total dividends-received deductions included in line	10					0.

Sched Dart	ule A (Form 990-T) 2021 VI Interest, Annu	iities Ro	ovalties and Re	ents fror	n Control	led Or	nanization	S (c	ee instruct	ions)		Page 3
Tart							Exempt Contro	`		,		
	1. Name of controlled organization		2. Employer identification number			4. Tota	al of specified nents made	5. Part of column 4 that is included in the controlling organiza- tion's gross income		mn 4 in the aniza-	ne connected with	
(1)										Jointo		
(2)												
(3)												
(4)												
			No		Controlled O	•	ons					
7	7. Taxable Income	in	Net unrelated Icome (loss) e instructions)		otal of specif syments mad		10. Part of that is inconstruction of the controlling gross	luded	in the zation's		con	luctions directly nected with e in column 10
(1)												
(2)												
(3)												
(4)												
							Add colum Enter here line 8, c	and or	n Part I,	Ent	er he	umns 6 and 11. re and on Part I, 3, column (B)
Totals						►			0.			0.
Part	VII Investment	ncome	of a Section 50	1(c)(7), (9), or (17)	Orgar	nization _{(s}	ee inst	tructions)			
	1. Desc	cription of	income		2. Amou incor		3. Deduction directly connormal (attach stater	ected	4. Set- (attach st		nt)	and set-asides (add cols 3 and 4)
(1)												
<u>(2)</u>												
<u>(3)</u>												
(4) Totals					Add amor column 2 here and o line 9, colu	. Enter n Part I,						Add amounts in column 5. Enter here and on Part I, line 9, column (B) 0 •
Part		vemnt A	ctivity Income	Other 1	 [han Adva			(000 in	l atruationa)			0.
1	Description of exploite			, outer i			gincome		Structions			
2	Gross unrelated busin		e from trade or busi	ness Ente	r here and o	n Part I	line 10 colum	n (A)		2		
3	Expenses directly con						-	• •				
										3		
4	Net income (loss) from											
	lines 5 through 7									4		
5	Gross income from ac	tivity that i	s not unrelated busi	iness incor	me					5		
6	Expenses attributable									6		
7	Excess exempt expen									_		
	4. Enter here and on P	art II, line	12							7		

Schedule A (Form 990-T) 2021

Sched	ule A (Form 990-T) 2021					1 Page 4
Part						
1	Name(s) of periodical(s). Check box if reporti	ng two or more p	eriodicals on a	consolidated basis	3.	
	A 🗌					
	в 📃					
	c 🗌					
	D					
inter a	mounts for each periodical listed above in the	corresponding c	olumn.			
	······		Α	В	С	D
2	Gross advertising income					
-	Add columns A through D. Enter here and or		olumn (A)	-1		0.
~	Add coldmins A through D. Enter here and or	ri arti, ine ri, c			·····	
а З	Direct adverticing costs by periodical					
	Direct advertising costs by periodical					0.
а	Add columns A through D. Enter here and or	1 Part I, line I I, c	юіumn (в)		▶	
	A durantizing again (lange). On bland dia a Diferenti					
4	Advertising gain (loss). Subtract line 3 from li	ne				
	2. For any column in line 4 showing a gain,					
	complete lines 5 through 8. For any column i					
	line 4 showing a loss or zero, do not complet					
	lines 5 through 7, and enter zero on line 8					
5	Readership costs					
6	Circulation income	·····				
7	Excess readership costs. If line 6 is less than					
	line 5, subtract line 6 from line 5. If line 5 is le					
	than line 6, enter zero					
8	Excess readership costs allowed as a					
	deduction. For each column showing a gain	on				
	line 4, enter the lesser of line 4 or line 7					
а	Add line 8, columns A through D. Enter the g	reater of the line	8a, columns t	otal or zero here an	d on	
	Part II, line 13				🕨	0.
Part		rectors, and	Trustees	see instructions)		
					3. Percentage	4. Compensation
	1. Name		2. Title		of time devoted	attributable to
					to business	unrelated business
1) SI	IERRY RISTAU	PRESIDENT	Г & СЕО		4.00%	5,192.
2)					%	
3)					%	
4)					%	
Total	Enter here and on Part II, line 1					5,192.
Part		ee instructions)				•

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FORM 990-T (A)	OTHER DEDUCTIONS	STATEMENT 1
----------------	------------------	-------------

DESCRIPTION	AMOUNT
INSURANCE	1,285.
DUES	1,899.
POSTAGE	374.
SUPPLIES	684.
TELEPHONE	821.
OCCUPANCY	10,986.
TRAVEL	84.
CONFERENCES, CONVENTIONS, & MEETINGS	2,725.
EQUIPMENT RENTAL & MAINTENANCE	939.
CONTRACT HELP	6,060.
COMPUTER SOFTWARE SUPPORT	6,214.
WEBSITE	466.
CONSULTING	11,994.
TOTAL TO SCHEDULE A, PART II, LINE 14	44,531.

FORM 990-T	DESCRIPTION OF ORGANIZATION'S	UNRELATED	STATEMENT 2
SCHEDULE A	BUSINESS ACTIVIT	Y	

ADMINISTRATIVE SERVICES FOR A PRIVATE FOUNDATION

TO FORM 990-T, SCHEDULE A, LINE E

990-T SCH A	POST-201	7 NET OPERATING	LOSS DEDUCTION	STATEMENT 3
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/20	1,933.	0.	1,933.	1,933.
NOL CARRYOV	VER AVAILABLE THIS	YEAR	1,933.	1,933.

SCHEDULE A (Form 990-T)

Department of the Treasury

Internal Revenue Service

Unrelated Business Taxable Income From an Unrelated Trade or Business

Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

OMB No. 1545-0047

2021	

Open to Public Inspection for 501(c)(3) Organizations Only

of

2

Α	Name of the organization	

QUAD	CITIES	COMMUNITY	FOUNDATION

<u>c</u> Unrelated business activity code (see instructions) ► 901101

42-6122716 D Sequence: 2

B Employer identification number

E Describe the unrelated trade or business **INVESTMENTS IN PASS-THROUGHS**

1a Gross receipts or sales	(C) Net
2 Cost of goods sold (Part III, line 8) 2	
3 Gross profit. Subtract line 2 from line 1c 3	
4 a Capital gain net income (attach Sch D (Form 1041 or Form 1120)). See instructions 4 a 8 , 687 . b Net gain (loss) (Form 4797) (attach Form 4797). See instructions) 4 a 8 , 687 . c Capital loss deduction for trusts 4 b 4 a 5 Income (loss) from a partnership or an S corporation (attach statement) 5 f 60 , 915 . 6 6 Rent income (Part IV) 6 6	
1120)). See instructions4a8,687.bNet gain (loss) (Form 4797) (attach Form 4797). See instructions)4bc4b5Income (loss) from a partnership or an S corporation (attach statement)56Rent income (Part IV)6	
b Net gain (loss) (Form 4797) (attach Form 4797). See instructions) c Capital loss deduction for trusts 5 Income (loss) from a partnership or an S corporation (attach statement) STATEMENT 4 5 6 6	
c Capital loss deduction for trusts 4c 5 Income (loss) from a partnership or an S corporation (attach statement) 5 6 Rent income (Part IV) 6	8,687.
5 Income (loss) from a partnership or an S corporation (attach statement) STATEMENT 4 5 60,915. 6 6	
5 Income (loss) from a partnership or an S corporation (attach statement) STATEMENT 4 5 60,915. 6 6	
6 Rent income (Part IV) 6	
6 Rent income (Part IV) 6	60,915.
7 Unrelated debt financed income (Part)()	
7 Unrelated debt-financed income (Part V) 7	
8 Interest, annuities, royalties, and rents from a controlled	
organization (Part VI)	
9 Investment income of section 501(c)(7), (9), or (17)	
organizations (Part VII)	
10 Exploited exempt activity income (Part VIII) 10	
11 Advertising income (Part IX)	
12 Other income (see instructions; attach statement) 12	
13 Total. Combine lines 3 through 12 13 69,602.	69,602.

Part II Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income

1	Compensation of officers, directors, and trustees (Part X)	1			
2	Salaries and wages	2			
3	Repairs and maintenance			3	
4	Bad debts			4	
5	Interest (attach statement). See instructions				
6	Taxes and licenses			6	1,126.
7	Depreciation (attach Form 4562). See instructions				
8	Less depreciation claimed in Part III and elsewhere on return	8a		8b	
9	Depletion			9	
10	Contributions to deferred compensation plans				
11	Employee benefit programs			11	
12	Excess exempt expenses (Part VIII)				
13	Excess readership costs (Part IX)				
14	Other deductions (attach statement)	E	STATEMENT 5	14	49,125.
15	Total deductions. Add lines 1 through 14			15	50,251.
16	Unrelated business income before net operating loss deduction. Subtract line 15 from	n Parl	t I, line 13,		
	column (C)			16	19,351.
17	Deduction for net operating loss. See instructions				0.
18	Unrelated business taxable income. Subtract line 17 from line 16				19,351.
LHA	For Paperwork Reduction Act Notice, see instructions.			Schedu	le A (Form 990-T) 2021

chod	10 A (Form 990 T) 2021						2
Part	ule A (Form 990-T) 2021 III Cost of Goods Sold Enter metho	d of inventory valua	tion				Page
1	Inventory at beginning of year				1		
2	Purchases				2		
3	Cost of labor				3		
4	Additional section 263A costs (attach statement)				4		
5	Other costs (attach statement)				5		
6	Total. Add lines 1 through 5				6		
7	Inventory at end of year				7		
8	Cost of goods sold. Subtract line 7 from line 6. Enter he	re and in Part I, line	2		8		
9	Do the rules of section 263A (with respect to property pro					Yes	No
Part			-		rty)		
1	Description of property (property street address, city, sta	te, ZIP code). Checł	t if a dual-use. See instru	uctions.			
	B						
	D	•					
~		Α	В	C		D	
2	Rent received or accrued						
а	From personal property (if the percentage of						
	rent for personal property is more than 10%						
b	but not more than 50%) From real and personal property (if the						
U	percentage of rent for personal property exceeds						
	50% or if the rent is based on profit or income)						
с	Total rents received or accrued by property.						
U	Add lines 2a and 2b, columns A through D						
3	Total rents received or accrued. Add line 2c columns A th	nrough D. Enter here	and on Part I, line 6, co	olumn (A)	•		0.
	Deductions directly connected with the income						
4	in lines 2(a) and 2(b) (attach statement)						
5	Total deductions. Add line 4 columns A through D. Ente	r here and on Part I	line 6, column (B)				0.
Part	(555						
1	Description of debt-financed property (street address, cit	y, state, ZIP code). (Check if a dual-use. See	instructions	-		
	B						
	D	•	р				
•	Gross income from or allocable to debt-financed	Α	В	C		D	
2							
3	property Deductions directly connected with or allocable						
5	to debt-financed property						
а							
b	Other deductions (attach statement)						
c	Total deductions (add lines 3a and 3b,						
U	columns A through D)						
4	Amount of average acquisition debt on or allocable						
	to debt-financed property (attach statement)						
5	Average adjusted basis of or allocable to debt-						
-	financed property (attach statement)						
6	Divide line 4 by line 5	%	%		%		9
7	Gross income reportable. Multiply line 2 by line 6						
8	Total gross income (add line 7, columns A through D). E	Enter here and on Pa	art I, line 7, column (A)				0.
9	Allocable deductions. Multiply line 3c by line 6						
10	Total allocable deductions. Add line 9, columns A through						0.
11	Total dividends-received deductions included in line 1	0					0.

Schedu Part	ule A (Form 990-T) 2021	uities. Ro	ovalties, and Re	ents fror	n Control	led Or	ganization	S (s)	ee instruct	tions)	P	age 3
rart			Sydnees, and re				Exempt Contro	,		,		
	1. Name of controlled organization	1. Name of controlled organization 2. Employer identification 3. Net unrelated income (loss) 4. Total of specified payments made 5. P. that is controlled		2. Employer identification number (loss) (accelentification (accelentification) (accel		art of colu s included	mn 4 in the aniza-	6. Deductions dir connected wit income in colum	h			
(1)									o grooo int			
(2)												
(3)												
(4)												
			No	nexempt (Controlled O	rganizati	ions					
7	. Taxable Income	in	Net unrelated come (loss) e instructions)		otal of specif syments mad		10. Part that is inc controlling gross	luded	in the zation's		Deductions direc connected with come in column 1	-
(1)												
(2)												
(3)												
(4)												
							Add colum Enter here line 8, c	and or	n Part I,	Ente	l columns 6 and 1 r here and on Pai ine 8, column (B)	rt I,
Totals						🕨			0.			0.
Part			of a Section 50	1(c)(7), (nization _{(s}	ee inst	tructions)			
	1. Desc	cription of	ncome		2. Amou incor		3. Deduction directly conn (attach state)	ected	4. Set (attach st	asides tatemen	5. Total deduction and set-asing (add cols 3 and set-asing (add cols 3 and set-asing (add cols 3 and set)).	des
(1)												
(2)												
(3)												
(4) Totals	VIII				Add amor column 2 here and o line 9, colu	. Enter n Part I, umn (A) 0 •					Add amount column 5. E here and on F line 9, colum	nter Part I,
Part			ctivity Income,	, Other 1	han Adve	ertising	g Income	(see in	structions)		
1	Description of exploite											
2	Gross unrelated busin							• •		2		
3	Expenses directly con											
										3		
4	Net income (loss) from											
5	Gross income from ac		s not unrelated busi							4		
6	Expenses attributable									6		
7	Excess exempt expense									⊢ Ť†		
·	4. Enter here and on P									7		

Schedule A (Form 990-T) 2021

2

	ule A (Form 990-T) 2021					2 Page 4
Part	Ť					
1	Name(s) of periodical(s). Check box if reportin	ng two or n	nore periodicals on	a consolidated basi	S.	
	B					
	c 🗌					
	D					
Inter a	mounts for each periodical listed above in the	correspon	dina column			
intor u			A	В	С	D
2	Gross advertising income	ľ				
	Add columns A through D. Enter here and or	-	e 11, column (A)	•		0.
а	U U	,	, , , ,			
3	Direct advertising costs by periodical	[
а	Add columns A through D. Enter here and or	_	e 11, column (B)			0.
4	Advertising gain (loss). Subtract line 3 from li	ne				
	2. For any column in line 4 showing a gain,					
	complete lines 5 through 8. For any column i					
	line 4 showing a loss or zero, do not complet	e				
	lines 5 through 7, and enter zero on line 8	Г				
5	Readership costs					
6	Circulation income					
7	Excess readership costs. If line 6 is less than					
	line 5, subtract line 6 from line 5. If line 5 is le					
•	than line 6, enter zero	····· -				
8	Excess readership costs allowed as a					
	deduction. For each column showing a gain of					
-	line 4, enter the lesser of line 4 or line 7	_	a line Re columna	tatal ar zara hara an		
а	Add line 8, columns A through D. Enter the g					0.
Part 2	Part II, line 13 X Compensation of Officers, Di	rectors.	and Trustees	(see instructions)		
					3. Percentage	4. Compensation
	1. Name		2. Title		of time devoted	attributable to
					to business	unrelated business
1)					%	
2)					%	
3)					%	
4)					%	
	Enter here and on Part II, line 1					0.
Part 2	XI Supplemental Information (se	ee instructi	ions)			

FORM 990-T (A)	INCOME (LOSS)	FROM PARTNERSHIPS	STATEMENT 4
DESCRIPTION			NET INCOME OR (LOSS)
FALCON PRIVATE CREDIT	OPPORTUNITIES V	/I, LP - ORDINARY	
BUSINESS INCOME (LOSS			7,960.
FALCON PRIVATE CREDIT	OPPORTUNITIES \	/I, LP - OTHER NET	21.0
RENTAL INCOME (LOSS)			210. 203.
FALCON PRIVATE CREDIT RCP SECONDARY OPPORTU		-	203.
(LOSS)	MIII FOND OND	INANI DODINEDD INCOME	52,542.
TOTAL INCLUDED ON SCH	EDULE A, PART I,	, LINE 5	60,915.
FORM 990-T (A)	ОТНЕН	R DEDUCTIONS	STATEMENT 5

DESCRIPTION	AMOUNT
PRIVATE EQUITY INVESTMENT EXPENSES	49,125.
TOTAL TO SCHEDULE A, PART II, LINE 14	49,125.

Name

Department of the Treasury Internal Revenue Service

Capital Gains and Losses ► Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T. ► Go to www.irs.gov/Form1120 for instructions and the latest information.

OMB No. 1545-0123

► Yes X No

Employer identification number

42-6122716

QUAD CITIES COMMUNITY FOUNDATION

Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year?
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss

Part I	Short-Term Capital Gai	ins and Losses - Ass	ets Held One Year	or Less		
to enter on th	ons for how to figure the amounts ne lines below.	(d) Proceeds	(e) Cost	(g) Adjustments to ga or loss from Form(s) 89		(h) Gain or (loss) Subtract column (e) from
	y be easier to complete if you its to whole dollars.	(sales price)	(or other basis)	Part I, line 2, column (column (d) and combine the result with column (g)
reported was repo have no However transacti	r all short-term transactions on Form 1099-B for which basis orted to the IRS and for which you adjustments (see instructions). ; if you choose to report all these ons on Form 8949, leave this line d go to line 1b					
	r all transactions reported on 8949 with Box A checked					
	r all transactions reported on					
	8949 with Box B checked					
3 Totals fo	r all transactions reported on					
Form(s)	8949 with Box C checked					
4 Short-te	rm capital gain from installment sales	from Form 6252, line 26 or 3	7		4	
	rm capital gain or (loss) from like-kind				5	
	capital loss carryover (attach computa				6	()
7 Net shor	t-term capital gain or (loss). Combine	e lines 1a through 6 in column	ıh		7	
Part II	Long-Term Capital Gai	ns and Losses - Ass	ets Held More Tha	n One Year		
to enter on the This form ma	ons for how to figure the amounts ne lines below. Ny be easier to complete if you its to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to ga or loss from Form(s) 89 Part II, line 2, column	49,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
on Form reported no adjus if you ch	r all long-term transactions reported 1099-B for which basis was to the IRS and for which you have tments (see instructions). However, oose to report all these transactions 8949, leave this line blank and go to					
8b Totals fo	r all transactions reported on					
Form(s)	8949 with Box D checked					
9 Totals fo	r all transactions reported on					
Form(s)	8949 with Box E checked					
10 Totals fo	r all transactions reported on					
Form(s)	8949 with Box F checked					
U					11	8,687.
	rm capital gain from installment sales		7		12	
0	rm capital gain or (loss) from like-kind	d exchanges from Form 8824			13	
					14	
	-term capital gain or (loss). Combine		nh		15	8,687.
Part III	Summary of Parts I and					1
	cess of net short-term capital gain (lir				16	
17 Net capi	tal gain. Enter excess of net long-term				17	8,687.
						1 0 6 0 7
	s 16 and 17. Enter here and on Form losses exceed gains, see <i>Capital Lo</i> s		plicable line on other return	S	18	8,687.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

Schedule D (Form 1120) 2021

Form 4797	
Department of the Treasury	

Internal Revenue Service

Sales of Business Property (Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2)) ► Attach to your tax return. ► Go to www.irs.gov/Form4797 for instructions and the latest information.

OMB No.	1545-0184

Sequence No. 27

		, ,
QUAD CITIES COMMUNITY FOUNDATION		42-6122716
1a Enter the gross proceeds from sales or exchanges reported to you for 2021 on Form(s) 1099-B or 1099-S		
(or substitute statement) that you are including on line 2, 10, or 20	1a	
b Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of		
MACRS assets	1b	
c Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS		
sease	10	

 Part I
 Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other

 Than Casualty or Theft-Most Property Held More Than 1 Year
 (see instructions)

		•	•		(/	
2	(a) Description of property	(b) Date acquired (mo., day, yr.)	(C) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
FA	LCON PRIVATE CREDIT						
	PORTUNITIES VI,						8,687.
-	· · · · · · · · · · · · · · · · · · ·						
3	Gain, if any, from Form 4684, line 39	•		1	•	3	
4	Section 1231 gain from installment sa	ales from Form 6	252. line 26 or 3	57		4	
5	Section 1231 gain or (loss) from like-k						
6	Gain, if any, from line 32, from other t						
7	Combine lines 2 through 6. Enter the	-				7	8,687.
-	Partnerships and S corporations. R line 10, or Form 1120-S, Schedule K,	Report the gain o	r (loss) following	the instructions for		·····	
	Individuals, partners, S corporation from line 7 on line 11 below and skip 1231 losses, or they were recaptured the Schedule D filed with your return	lines 8 and 9. If I in an earlier yea	ine 7 is a gain a r, enter the gain	nd you didn't have from line 7 as a lo	any prior year sec	tion	
8	Nonrecaptured net section 1231 loss	es from prior vea	ars. See instruct	ons		8	
9	Subtract line 8 from line 7. If zero or le						
	line 9 is more than zero, enter the am	ount from line 8	on line 12 below	and enter the gair	n from line 9 as a lo	ong-term	
	capital gain on the Schedule D filed w	vith your return.	See instructions			9	8,687.
D	art II Ordinary Gains and I						
ГС		_03363 (see in	structions)				
10	Ordinary gains and losses not includ	led on lines 11 th	nrough 16 (inclu	de property held 1	year or less):		
11	Loss, if any, from line 7					11	()
12	Gain, if any, from line 7 or amount fro						
13	Gain, if any, from line 31						
14	Net gain or (loss) from Form 4684, line						
15	Ordinary gain from installment sales f						
16	Ordinary gain or (loss) from like-kind e						
17							
18	For all except individual returns, enter	r the amount fror	n line 17 on the	appropriate line of	your return and sl	kip lines	

a and b below. For individual returns, complete lines a and b below.
a If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used as an employee.) Identify as from "Form 4797, line 18a." See instructions

b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 (Form 1040), Part I, line 4

18a

18b

42-6122716

Page **2**

19	(a) Description of section 1245, 1250, 1252, 1254, c	or 1255 p	property:		(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)
A						
В						
С						
D						
	These columns relate to the properties on					
	lines 19A through 19D.		Property A	Property B	Property C	Property D
20	Gross sales price (Note: See line 1a before completing.)	20				
21	Cost or other basis plus expense of sale	21				
22	Depreciation (or depletion) allowed or allowable	22				
23	Adjusted basis. Subtract line 22 from line 21	23				
24	Total gain. Subtract line 23 from line 20	24				
	If section 1245 property:					
	Depreciation allowed or allowable from line 22	25a				
	Enter the smaller of line 24 or 25a	25b				
	If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.	200				
а	Additional depreciation after 1975. See instructions	26a				
b	Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions	26b				
С	Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip lines 26d and 26e	26c				
d	Additional depreciation after 1969 and before 1976	26d				
	Enter the smaller of line 26c or 26d	26e				
	Section 291 amount (corporations only)	26f				
	Add lines 26b, 26e, and 26f If section 1252 property: Skip this section if you didn't	26g				
	dispose of farmland or if this form is being completed for a partnership. Soil, water, and land clearing expenses	27a				
	Line 27a multiplied by applicable percentage	27b				
	Enter the smaller of line 24 or 27b	27c				
	If section 1254 property:					
	Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions	28a				
	Enter the smaller of line 24 or 28a	28b				
а	If section 1255 property: Applicable percentage of payments excluded from income under section 126. See instructions	29a				
b	Enter the smaller of line 24 or 29a. See instructions	29b				
Su	mmary of Part III Gains. Complete property c	olumns	A through D through	line 29b before going	to line 30.	

Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255 (see instructions)

30 Total gains for all properties. Add property columns A through D, line 24 20

30	Total gains for all properties. Add property columns A through D, line 24	30	
31	Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13	31	
32	Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion		
	from other than casualty or theft on Form 4797, line 6	32	
Pa	Int IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to	o 50%	or Less

(see instructions)

			(a) Section 179	(b) Section 280F(b)(2)
33	Section 179 expense deduction or depreciation allowable in prior years	33		
34	Recomputed depreciation. See instructions	34		
35	Recapture amount. Subtract line 34 from line 33. See the instructions for where to report	35		
1100	10 10 17 14			Earm 4797 (2021)

Name

Department of the Treasury Internal Revenue Service

Capital Gains and Losses ► Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T. ► Go to www.irs.gov/Form1120 for instructions and the latest information.

OMB No. 1545-0123

► Yes X No

Employer identification number

42-6122716

QUAD CITIES COMMUNITY FOUNDATION

Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year?
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss

Part I	Short-Term Capital Gai	ins and Losses - Ass	ets Held One Year	or Less		
to enter on th	ons for how to figure the amounts ne lines below.	(d) Proceeds	(e) Cost	(g) Adjustments to ga or loss from Form(s) 89		(h) Gain or (loss) Subtract column (e) from
	y be easier to complete if you its to whole dollars.	(sales price)	(or other basis)	Part I, line 2, column (column (d) and combine the result with column (g)
reported was repo have no However transacti	r all short-term transactions on Form 1099-B for which basis orted to the IRS and for which you adjustments (see instructions). ; if you choose to report all these ons on Form 8949, leave this line d go to line 1b					
	r all transactions reported on 8949 with Box A checked					
	r all transactions reported on					
	8949 with Box B checked					
3 Totals fo	r all transactions reported on					
Form(s)	8949 with Box C checked					
4 Short-te	rm capital gain from installment sales	from Form 6252, line 26 or 3	7		4	
	rm capital gain or (loss) from like-kind				5	
	capital loss carryover (attach computa				6	()
7 Net shor	t-term capital gain or (loss). Combine	e lines 1a through 6 in column	ıh		7	
Part II	Long-Term Capital Gai	ns and Losses - Ass	ets Held More Tha	n One Year		
to enter on the This form ma	ons for how to figure the amounts ne lines below. Ny be easier to complete if you its to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to ga or loss from Form(s) 89 Part II, line 2, column	49,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
on Form reported no adjus if you ch	r all long-term transactions reported 1099-B for which basis was to the IRS and for which you have tments (see instructions). However, oose to report all these transactions 8949, leave this line blank and go to					
8b Totals fo	r all transactions reported on					
Form(s)	8949 with Box D checked					
9 Totals fo	r all transactions reported on					
Form(s)	8949 with Box E checked					
10 Totals fo	r all transactions reported on					
Form(s)	8949 with Box F checked					
U					11	8,687.
	rm capital gain from installment sales		7		12	
0	rm capital gain or (loss) from like-kind	d exchanges from Form 8824			13	
					14	
	-term capital gain or (loss). Combine		nh		15	8,687.
Part III	Summary of Parts I and					1
	cess of net short-term capital gain (lir				16	
17 Net capi	tal gain. Enter excess of net long-term				17	8,687.
						1 0 6 0 7
	s 16 and 17. Enter here and on Form losses exceed gains, see <i>Capital Lo</i> s		plicable line on other return	S	18	8,687.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

Schedule D (Form 1120) 2021

LHA	Fo

17 Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next

from line 15. Then go to line 12 of the next column

column. Otherwise, go to line 1818 Overpayment. If line 10 is less than line 15, subtract line 10

For Paperwork Reduction Act Notice, see separate instructions.

Form **2220**

Underpayment of Estimated Tax by Corporations

Attach to the corporation's tax return.

FORM 990-T

	rnal Revenue Service Go to www.irs.go	ov/Fo	rm2220 for instructions a	and the latest informatio	n.	2021
Nar	ne					tification number
	QUAD CITIES COMMUNITY FOUR	NDA	TION		42-6	122716
bill est	te: Generally, the corporation is not required to file Form the corporation. However, the corporation may still use imated tax penalty line of the corporation's income tax r	Forn	n 2220 to figure the pe	enalty. If so, enter the a		
F	Part I Required Annual Payment					-
1	Total tax (see instructions)				1	3,854.
,	Personal holding company tax (Schedule PH (Form 1120), lin	a 26)	included on line 1	2a		
	D Look-back interest included on line 1 under section 460(b)(2)					
	contracts or section $167(g)$ for depreciation under the income			2b		
(Credit for federal tax paid on fuels (see instructions)			2c		
	I Total. Add lines 2a through 2c				2d	
	Subtract line 2d from line 1. If the result is less than $500,\mathrm{do}$					
	does not owe the penalty					3,854.
4	Enter the tax shown on the corporation's 2020 income tax retu					4 0 5 1
	or the tax year was for less than 12 months, skip this line and	enter	the amount from line 3 of	on line 5		4,961.
F	Dequired appual payment Enter the amellar of line 2 or line	/ If	the corneration is require	ud to akin lina 1		
5	Required annual payment. Enter the smaller of line 3 or line enter the amount from line 3				5	3,854.
F	Part II Reasons for Filing - Check the boxes belo					0,0010
	even if it does not owe a penalty. See instructions.			<i>,</i> ,		
6	The corporation is using the adjusted seasonal install	ment	method.			
7	The corporation is using the annualized income install	lment	method.			
8	The corporation is a "large corporation" figuring its firs	st req	uired installment based o	n the prior year's tax.		
ŀ	Part III Figuring the Underpayment					
		$ \square$	(a)	(b)	(C)	(d)
9	Installment due dates. Enter in columns (a) through (d) the					
	15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year	9	04/15/21	06/15/21	09/15/21	12/15/21
10		-	01/15/21	00/10/21	00/10/21	12/15/21
	above is checked, enter the amounts from Sch A, line 38. If					
	the box on line 8 (but not 6 or 7) is checked, see instructions					
	for the amounts to enter. If none of these boxes are checked,					
	enter 25% (0.25) of line 5 above in each column	10	964.	963.	964.	963.
11	Estimated tax paid or credited for each period. For					
	column (a) only, enter the amount from line 11 on line 15.					1 000
	See instructions	11			3,800.	1,200.
	Complete lines 12 through 18 of one column					
10	before going to the next column.	1.0				909.
12 13	Enter amount, if any, from line 18 of the preceding column Add lines 11 and 12	12 13			3,800.	2,109.
13 14		14		964.	1,927.	
15	Subtract line 14 from line 13. If zero or less, enter -0-	15	0.	0.	1,873.	2,109.
	If the amount on line 15 is zero, subtract line 13 from line					,
	14. Otherwise, enter -0-	16		964.	0.	
					1	1

964.

17

18

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

963.

909.

OMB No. 1545-0123

FORM 990-T

Form 2220 (2021)

Part IV Figuring the Penalty

			(a)	(b)	(C)	(d)
)	Enter the date of payment or the 15th day of the 4th month					
	after the close of the tax year, whichever is earlier.					
	(C corporations with tax years ending June 30					
	and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month					
	instead of 4th month.) See instructions	19				
	Number of days from due date of installment on line 9 to the	10				
	date shown on line 19	20				
	Number of days on line 20 after 4/15/2021 and before 7/1/2021	21				
	Underpayment on line 17 x Number of days on line 21 x 3% (0.03) 365	22	\$	\$	\$	\$
	Number of days on line 20 after 6/30/2021 and before 10/1/2021	23				
	Underpayment on line 17 x Number of days on line 23 x 3% (0.03)	24	\$	\$	\$	\$
	Number of days on line 20 after 9/30/2021 and before 1/1/2022	25				
			¢	ф.	¢	¢
	Underpayment on line 17 x Number of days on line 25 x 3% (0.03) 365	26		\$	\$	\$
	Number of days on line 20 after 12/31/2021 and before 4/1/2022	27	SEI	E ATTACHED	WORKSHEET	
;	Underpayment on line 17 x Number of days on line 27 x 3% (0.03) 365	28	\$	\$	\$	\$
	Number of days on line 20 after 3/31/2022 and before 7/1/2022	29				
	Underpayment on line 17 x Number of days on line 29 x *%	30	\$	\$	\$	\$
	Number of days on line 20 after 6/30/2022 and before 10/1/2022	31				
	Underpayment on line 17 x Number of days on line 31 x *%	32	\$	\$	\$	\$
	Number of days on line 20 after 9/30/2022 and before 1/1/2023	33				
	Underpayment on line 17 x Number of days on line 33 x *%	34	\$	\$	\$	\$
	Number of days on line 20 after 12/31/2022 and before 3/16/2023	35				
	Underpayment on line 17 x Number of days on line 35 x *%	36	\$	\$	\$	\$
	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$	\$	\$
	Penalty. Add columns (a) through (d) of line 37. Enter the to	tal he	ere and on Form 1120, li	ne 34; or the comparab		
						8 \$ 1

* Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at **www.irs.gov**. You can also call 1-800-829-4933 to get interest rate information.

Form **2220** (2021)

FORM 990-T UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

Name(s)				Identifying Num	ber
QUAD CITIES	COMMUNITY FO	DUNDATION		42-6122	2716
(A) *Date	(B) Amount	(C) Adjusted Balance Due	(D) Number Days Balance Due	(E) Daily Penalty Rate	(F) Penalty
Date	Amount	-0-			renaity
04/15/21	964.	964.	61	.000082192	5
06/15/21	963.	1,927.	78	.000082192	12
09/01/21	-3,800.	-1,873.			
09/15/21	964.	-909.			
12/01/21	-1,200.	-2,109.			
12/15/21	963.	-1,146.			
03/31/22	0.	-1,146.	45	.000109589	
nalty Due (Sum of Colu	mn F).				17

* Date of estimated tax payment, withholding credit date or installment due date.

	Form 4562						
Department of the Treasury Internal Revenue Service							
Name(s) shown on return							

Depreciation and Amortization (Including Information on Listed Property)

A PG1

Attach to your tax return.

Attachm Sequence No. 179

1

Go to www.irs.gov/Form4562 for instruct	tions and the latest information.
	Business or activity to which this form relates

Identifying number

L

OMB No. 1545-0172

OUAD CITIES	COMMUNITY	ΓΟΙΙΝΟΑΤΤΟ				PIVE SEI ATE FOIII		S ON 42-6122716
	Expense Certain Propert							
1 Maximum amount		-		-			1	1,050,000.
	on 179 property place		instructions)					1,000,0000
	section 179 property I							2,620,000.
	ation. Subtract line 3 fr							2,020,0000
	ear. Subtract line 4 from line 1						5	
6	(a) Description of pro			t (business use		(c) Elected (
				,				
7 Listed property. E	nter the amount from I	ine 29	I		7			
8 Total elected cost	of section 179 proper				· · · · ·		8	
	on. Enter the smaller							
10 Carryover of disall								
11 Business income I					-			
12 Section 179 exper			•	,				
13 Carryover of disall				►	13			
Note: Don't use Part I								
Part II Special I	Depreciation Allowar	ce and Other D	epreciation (Don't	nclude liste	d propert	y.)		
14 Special depreciati	on allowance for quali	fied property (oth	er than listed prope	ty) placed ir	n service	during		
the tax year							. 14	
15 Property subject t	o section 168(f)(1) elec	tion					15	
16 Other depreciation							16	
Part III MACRS	Depreciation (Don't i	nclude listed pro	perty. See instructio	ns.)				
			Section A					
17 MACRS deduction	ns for assets placed in	service in tax ye	ars beginning before	2021			17	2,710.
18 If you are electing to group	up any assets placed in servic	e during the tax year in	nto one or more general ass	et accounts, che	ck here	🕨 🗌		
	Section B - Assets	Placed in Servic	e During 2021 Tax	ear Using	the Gene	ral Deprecia	ion Syste	m
(a) Classificati	on of property	(b) Month and year placed in service	(c) Basis for deprecia (business/investment only - see instruction	use (a	Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year propert	У							
b 5-year propert	У							
c 7-year propert	У							
d 10-year prope	rty							
e 15-year prope	rty							
f 20-year prope	rty							
g 25-year prope	rty			2	25 yrs.		S/L	
h Residential rer	ntal property	/			7.5 yrs.	MM	S/L	
		/		2	7.5 yrs.	MM	S/L	
i Nonresidentia	l real property	/			39 yrs.	MM	S/L	
	,	/				MM	S/L	
-	Section C - Assets Pl	aced in Service	During 2021 Tax Yo	ear Using th	ne Alterna	ative Depreci		tem
20a Class life							S/L	
b 12-year					12 yrs.		S/L	
c 30-year		1			30 yrs.	MM	S/L	
d 40-year	(2))))	/		4	10 yrs.	MM	S/L	
	y (See instructions.)							
21 Listed property. E							21	
22 Total. Add amoun								2,710.
23 For assets shown	the appropriate lines of				see instr.		22	2,110.
	s attributable to section		ounoni year, enter		23			

Form 4	4 <u>562 (</u> 2021)	QUA	D CITI	ES CO	MMUN	ITY	FOUN	DAT:	ION			42-	6122	716	Page 2
Part		ty (Include a	utomobiles, o	certain otl	ner vehic	les, cert	ain aircr	aft, an	d property	used for					
	entertainment, Note: For any				standar	d milear	ne rate o	r dedu	ictina leas		e comr	olete or	ly 24a		
	24b, columns	(a) through (c) of Section	A, all of S	ection B	, and Se	ection C	if appli	icable.		c, comp		Πy 2+α,		
	Section A	- Depreciatio	on and Othe	r Informa	tion (Ca	ution: S	See the i	nstruc	tions for li	mits for p	asseng	er auton	nobiles.)		
24a D	o you have evidence to	support the bu	siness/investn	nent use cl	aimed?	<u> </u>	es 🗌	No	24b If "Y	es," is the	e evide	nce writt	ten?	Yes 🗌	No
((a) Type of property list vehicles first)	(b) Date placed in service	(c) Business investme use percent	nt o	(d) Cost or ther basis	(bu	(e) sis for depressiness/inveuse only	stment	(f) Recovery period	(e Meti Conve	hod/	Depre	(h) eciation uction	Eleo sectio	
25 Sp	becial depreciation all			ů l	placed	in servic	-		I Ix year and	 b					ost
us	ed more than 50% in	a qualified b	usiness use								25				
	operty used more tha														
		: :		%											
		: :		%											
		: :		%											
27 Pr	operty used 50% or le	ess in a qualit	fied business	s use:											
		: :		%						S/L ·					
		: :		%						S/L -					
		: :		%						S/L ·					
	ld amounts in columr														
29 Ac	ld amounts in columr	n (i), line 26. E	nter here an	d on line	7, page ⁻	1	<u></u>	<u></u>			<u></u>	<u></u>	29		
				Section											
	ete this section for ve													vehicles	
to you	r employees, first ans	wer the ques	tions in Sect	tion C to s	see if you	ı meet a	n except	tion to	completir	ng this see	ction fo	r those v	/ehicles.		
						1				1		1			
					a)	-	b)		(c)	(d	-	-	e)	(f	
	tal business/investment		•		hicle	Ve	hicle		/ehicle	Vehi	icle	Vel	nicle	Veh	icle
	ar (don't include commu														
	tal commuting miles			·											
	ital other personal (no	•	,												
33 To	tal miles driven durin	g the year.													
Ac	ld lines 30 through 32	2													
34 W	as the vehicle availab	le for person	al use	Yes	No	Yes	No	Yes	s No	Yes	No	Yes	No	Yes	No
du	ring off-duty hours?														
35 W	as the vehicle used p	rimarily by a	more												
th	an 5% owner or relate	ed person?													
36 Is	another vehicle availa	able for perso	nal												
us	e?	<u></u>	<u></u>												
		Section C	- Questions	for Emp	loyers W	/ho Prov	vide Veh	nicles	for Use by	/ Their Eı	mploye	es			
	er these questions to	-		exceptior	to com	oleting S	Section E	3 for ve	ehicles use	ed by emp	oloyees	who a	ren't		
	han 5% owners or rel														
	o you maintain a writte	en policy stat	ement that p	prohibits a	Ill persor	nal use c	of vehicle	es, incl	uding con	nmuting, I	by your			Yes	No
	you maintain a writte		-	-				-			ur				
	nployees? See the ins			• •											
	you treat all use of v	-		-											
	you provide more th														
	e use of the vehicles,														
	you meet the require														I
Part	VI Amortization	<i>৩।</i> , <i>৩</i> , <i>৬</i> , <i>৬</i> , ४	υ, υτ 4 Ι IS "Υ	es, don	i comple	ere Secti	UI B TOP	une co	overea ver	licies.					
- urt	(a)			(b)		(c)			(d)		(e)			(f)	
	Description o	f costs	D	ate amortization begins		Amortizat	ole t		Code section	.	Amortiza Deriod or per	tion	Ar	nortization r this year	
42 An	nortization of costs th	nat begins du	ring vour 20'		ar:	amodili	•		0000011	F	reling of her	uennaye		. ano you	
					<u> </u>										
				. :											
					1					I					

43	Amortization of costs that began before your 2021 tax year	43	
44	Total. Add amounts in column (f). See the instructions for where to report	44	
			_

Form 4797	
Department of the Treasury	

Internal Revenue Service

Sales of Business Property (Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2)) ► Attach to your tax return. ► Go to www.irs.gov/Form4797 for instructions and the latest information.

OMB No.	1545-0184

Sequence No. 27

		, ,
QUAD CITIES COMMUNITY FOUNDATION		42-6122716
1a Enter the gross proceeds from sales or exchanges reported to you for 2021 on Form(s) 1099-B or 1099-S		
(or substitute statement) that you are including on line 2, 10, or 20	1a	
b Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of		
MACRS assets	1b	
c Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS		
sease	10	

 Part I
 Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other

 Than Casualty or Theft-Most Property Held More Than 1 Year
 (see instructions)

		•	•		(/	
2	(a) Description of property	(b) Date acquired (mo., day, yr.)	(C) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
FA	LCON PRIVATE CREDIT						
	PORTUNITIES VI,						8,687.
-	· · · · · · · · · · · · · · · · · · ·						
3	Gain, if any, from Form 4684, line 39	•		1	•	3	
4	Section 1231 gain from installment sa	ales from Form 6	252, line 26 or 3	57		4	
5	Section 1231 gain or (loss) from like-k						
6	Gain, if any, from line 32, from other t						
7	Combine lines 2 through 6. Enter the	-				7	8,687.
-	Partnerships and S corporations. R line 10, or Form 1120-S, Schedule K,	Report the gain o	r (loss) following	the instructions for		·····	
	Individuals, partners, S corporation from line 7 on line 11 below and skip 1231 losses, or they were recaptured the Schedule D filed with your return	lines 8 and 9. If I in an earlier yea	ine 7 is a gain a r, enter the gain	nd you didn't have from line 7 as a lo	any prior year sec	tion	
8	Nonrecaptured net section 1231 loss	es from prior vea	ars. See instruct	ons		8	
9	Subtract line 8 from line 7. If zero or le						
	line 9 is more than zero, enter the am	ount from line 8	on line 12 below	and enter the gair	n from line 9 as a lo	ong-term	
	capital gain on the Schedule D filed w	vith your return.	See instructions			9	8,687.
D	art II Ordinary Gains and I						
ГС		_03363 (see in	structions)				
10	Ordinary gains and losses not includ	led on lines 11 th	nrough 16 (inclu	de property held 1	year or less):		
11	Loss, if any, from line 7					11	()
12	Gain, if any, from line 7 or amount fro						
13	Gain, if any, from line 31						
14	Net gain or (loss) from Form 4684, line						
15	Ordinary gain from installment sales f						
16	Ordinary gain or (loss) from like-kind e						
17							
18	For all except individual returns, enter	r the amount fror	n line 17 on the	appropriate line of	your return and sl	kip lines	

a and b below. For individual returns, complete lines a and b below.
a If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used as an employee.) Identify as from "Form 4797, line 18a." See instructions

b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 (Form 1040), Part I, line 4

18a

18b

42-6122716

Page **2**

19	(a) Description of section 1245, 1250, 1252, 1254, c	or 1255 p	property:		(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)
A						
В						
С						
D						
	These columns relate to the properties on					
	lines 19A through 19D.		Property A	Property B	Property C	Property D
20	Gross sales price (Note: See line 1a before completing.)	20				
21	Cost or other basis plus expense of sale	21				
22	Depreciation (or depletion) allowed or allowable	22				
23	Adjusted basis. Subtract line 22 from line 21	23				
24	Total gain. Subtract line 23 from line 20	24				
	If section 1245 property:					
	Depreciation allowed or allowable from line 22	25a				
	Enter the smaller of line 24 or 25a	25b				
	If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.	200				
а	Additional depreciation after 1975. See instructions	26a				
b	Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions	26b				
С	Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip lines 26d and 26e	26c				
d	Additional depreciation after 1969 and before 1976	26d				
	Enter the smaller of line 26c or 26d	26e				
	Section 291 amount (corporations only)	26f				
	Add lines 26b, 26e, and 26f If section 1252 property: Skip this section if you didn't	26g				
	dispose of farmland or if this form is being completed for a partnership. Soil, water, and land clearing expenses	27a				
	Line 27a multiplied by applicable percentage	27b				
	Enter the smaller of line 24 or 27b	27c				
	If section 1254 property:					
	Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions	28a				
	Enter the smaller of line 24 or 28a	28b				
а	If section 1255 property: Applicable percentage of payments excluded from income under section 126. See instructions	29a				
b	Enter the smaller of line 24 or 29a. See instructions	29b				
Su	mmary of Part III Gains. Complete property c	olumns	A through D through	line 29b before going	to line 30.	

Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255 (see instructions)

30 Total gains for all properties. Add property columns A through D, line 24 20

30	Total gains for all properties. Add property columns A through D, line 24	30			
31	Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13	31			
32	Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion				
	from other than casualty or theft on Form 4797, line 6	32			
Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less					

(see instructions)

			(a) Section 179	(b) Section 280F(b)(2)
33	Section 179 expense deduction or depreciation allowable in prior years	33		
34	Recomputed depreciation. See instructions	34		
35	Recapture amount. Subtract line 34 from line 33. See the instructions for where to report	35		
Form 4797 (20				

(Rev. January 2022)

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

Eile e	concrete	application	for oach	roturn
File a	separate	application	tor each	return.

► Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits*.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type o print	or Name of exempt organization or other filer, see instructions.			Taxpayer identification number (TIN)			
•	QUAD CITIES COMMUNITY FOUNDATION			42-6122716			
File by the due date f filing your return. See	the terr Number, street, and room or suite no. If a P.O. box, see instructions.						
instruction	See						
Enter th	e Return Code for the return that this application is for (file	e a separat	te application for each return)				
Applica	ation	Return	Application			Return	
ls For		Code	Is For			Code	
Form 9	90 or Form 990-EZ	01	Form 1041-A			08	
Form 4	720 (individual)	03	Form 4720 (other than individual)			09	
Form 9	90-PF	04	Form 5227			10	
Form 9	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
Form 9	90-T (trust other than above)	06	Form 8870			12	
Form 9	90-T (corporation) MICHELLE PAYNE	07					
 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 If request an automatic 6-month extension of time until <u>NOVEMBER 15, 2022</u>, to file the exempt organization return for the organization named above. The extension is for the organization's return for: and ending, and ending 							
<u>a</u> b If <u>e</u> c B	this application is for Forms 990-PF, 990-T, 4720, or 6069, ny nonrefundable credits. See instructions. this application is for Forms 990-PF, 990-T, 4720, or 6069, stimated tax payments made. Include any prior year overpa alance due. Subtract line 3b from line 3a. Include your par	, enter any ayment all yment witl	v refundable credits and owed as a credit. h this form, if required, by	3a 3b	\$	35,000. 5,000. 30,000.	
	sing EFTPS (Electronic Federal Tax Payment System). See n: If you are going to make an electronic funds withdrawal ions.			3c 153-TE and	L ⊅ d Form 887	•	

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2022)