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

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

For calendar year 2011 or tax year beginning , and ending Name of foundation A Employer identification number JASPER WOOD PRODUCTS FOUNDATION, INC. D/B/A GRAMELSPACHER FOUNDATION 35-6024934 Number and street (or P O box number if mail is not delivered to street addre Room/suite B Telephone number P.O. BOX 2386 317-423-9800 City or town, state, and ZIP code C If exemption application is pending, check here INDIANAPOLIS, 46206-2386 IN G Check all that apply Initial return initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation Check type of organization E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here X Cash I Fair market value of all assets at end of year | J | Accounting method If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 270,844. (Part I, column (d) must be on cash basis.) ▶\$ Part | Analysis of Revenue and Expenses (d) Disbursements for chantable purposes (cash basis only) (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income ıncome 100,800 N/A 1 Contributions, gifts, grants, etc., received Check I if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments STATEMENT 6,498 6,498 STATEMENT Dividends and interest from securities 5a Gross rents h Net rental income or (loss) 432. 6a Net gain or (loss) from sale of assets not on line 10 432 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 107.731 6,931. Total. Add lines 1 through 11 0 0. Compensation of officers, directors, trustees, etc Other employee salaries and wages Pension plans, employee benefits 16a Legal fees STMT 3 685. 343. 342. **b** Accounting fees c Other professional fees 17 Interest STMT 4 124 0. 18 Taxes 124. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences and neetings D Printing and publications 22 RS-OSC Other expenses 23 Total operating and administrative 24 809 343 expenses. Add lines 13 through 23 466. 0 Contributions, grits grants paid UT Total expenses and disbursements. 809 343 466. Add lines 24 and 25 27 Subtract line 26 from line 12 106,922 2 Excess of revenue over expenses and disbursements 6,588 b Net investment income (if negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-) 123501 12-02-11 LHA For Paperwork Reduction Act Notice, see instructions. Form **990-PE** (2011)

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2011.04010 JASPER WOOD PRODUCTS FOUNDA CMWILL NI

		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	year
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	1,477.	4,198.	4,198.
	3	Accounts receivable			
		Less allowance for doubtful accounts			
	4	Pledges receivable			· F
		Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less allowance for doubtful accounts			
ets	8	Inventories for sale or use	-		
Assets	9	Prepaid expenses and deferred charges	156 402	150 002	165 046
•	ı	Investments - U S and state government obligations STMT 5	156,482.	159,883. 100,800.	
	l	Investments - corporate stock STMT 6	U.	100,800.	100,800.
	l	Investments - corporate bonds			
	וון	Investments - land, buildings, and equipment basis		1	
		Less accumulated depreciation			
	Ι.	Investments - mortgage loans			
	13	Investments - other			·····
	14	Land, buildings, and equipment basis	1		
	15				
	13	Other assets (describe)			
	16	Total assets (to be completed by all filers)	157,959.	264,881.	270,844.
_	17	Accounts payable and accrued expenses	13,7333.	2017001.	2707011.
	18	Grants payable			
s	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abil	21	Mortgages and other notes payable			
Ë	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
,		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
ces	24	Unrestricted	157,959.	264,881.	
lan	25	Temporarily restricted			
B	26	Permanently restricted			
Net Assets or Fund Balance		Foundations that do not follow SFAS 117, check here			
ř		and complete lines 27 through 31.			
tso	27	Capital stock, trust principal, or current funds		_	
SSe	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
Ä	29	Retained earnings, accumulated income, endowment, or other funds	157.050	064 001	
Ž	30	Total net assets or fund balances	157,959.	264,881.	
			157 050	264 001	
	31	Total liabilities and net assets/fund balances	157,959.	264,881.	
P	art	Analysis of Changes in Net Assets or Fund B	lalances		
-	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
1		t net assets or fund balances at beginning of year - Part 11, column (a), line st agree with end-of-year figure reported on prior year's return)	30		157,959.
2	•	r amount from Part I, line 27a		2	106,922.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	264,881.
		eases not included in line 2 (itemize)		5	0.
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30	6	264,881.
_					Form 990-PF (2011)

Part IV Capital Gains	and Losses for Tax	on Investment	Income						
	ribe the kind(s) of property so arehouse, or common stock, 2			`P	low acquired - Purchase - Donation		Date ao mo , da		(d) Date sold (mo , day, yr)
1a CAPITAL GAINS	DIVIDENDS					T			
<u>b</u>				ļ		 			
<u>c</u>		-		-		+			
<u>d</u>				-		+			
<u>e</u>	(f) Depreciation allowed	(a) Coo	at or other book	Ь.,			(h) Co	n or /loss\	
(e) Gross sales price	(or allowable)	10/	xpense of sale			(in or (loss) (f) minus (g)
a 432.									432.
<u>b</u>									
C d									
e									
Complete only for assets showing	ng gain in column (h) and own	ed by the foundation	on 12/31/69			(I) G	ains (Co	l (h) gain	minus ——
(1) = 1.1.4	(j) Adjusted basis	(k) Ex	cess of col (I)			col (k), but no	ot less than	1 -0-) or
(i) FMV as of 12/31/69	as of 12/31/69	over	col (j), if any			L	osses (from col (I	n)) - · · · · · · · · · · · · · · · · · · ·
a						,			432.
b									
_ C									
<u>d</u>									
<u>e</u>									
2 Capital gain net income or (net ca		o enter in Part I, line nter -0- in Part I, line		}	2			_,	432.
3 Net short-term capital gain or (los	ss) as defined in sections 122	2(5) and (6)			1				
If gain, also enter in Part I, line 8,	• •			 				37 / 3	
If (loss), enter -0- in Part I, line 8 Part V Qualification U	Inder Section 4940(e	V for Bodyood	Toy on Not		3	nooi		N/A	
(For optional use by domestic private If section 4940(d)(2) applies, leave to		ection 4940(a) tax on	net investment in	icome	9)				
Was the foundation liable for the sec if "Yes," the foundation does not qua			-	rıod?					Yes X No
1 Enter the appropriate amount in	each column for each year, se	e instructions before	making any entri	es					
(a) Base period years Calendar year (or tax year beginni	Adjusted auglify	o) ing distributions	Net value of no	(c) ncha	ritable-use ass		((d) oution ratio ided by col (c))
2010		3,902.			160,99	92.			.024237
2009		8,902.			106,2				.083760
2008		2,427.			86,8				.027937
2007		4,735.			79,7				.059370
2006		3,809.			37,1	34.	1		.102574
2 Total of line 1, column (d)							2		.297878
3 Average distribution ratio for the the foundation has been in existe	•	e total on line 2 by 5,	or by the number	of ye	ars		3		.059576
4 Enter the net value of noncharitat	ble-use assets for 2011 from F	Part X, line 5					4		187,439.
5 Multiply line 4 by line 3							5		11,167.
6 Enter 1% of net investment incor	me (1% of Part I, line 27b)						6		66.
7 Add lines 5 and 6							7		11,233.
8 Enter qualifying distributions from	m Part XII, line 4						8		466.
If line 8 is equal to or greater than See the Part VI instructions	n line 7, check the box in Part	VI, line 1b, and comp	olete that part usin	ıg a 1	% tax rate				

JASPER WOOD PRODUCTS FOUNDATION, INC. D/B/A GRAMELSPACHER FOUNDATION 35-6024934 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions ra Exempt operating foundations described in section 4940(d)(2), check here ▶ 📖 and enter "N/A" on line 1 Date of ruling or determination letter (attach copy of letter if necessary-see instructions) 132. b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1% 1 c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b) 2 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 3 3 Add lines 1 and 2 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4 5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-6 Credits/Payments a 2011 estimated tax payments and 2010 overpayment credited to 2011 b Exempt foreign organizations - tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 6с d Backup withholding erroneously withheld 6d 0. 7 Total credits and payments Add lines 6a through 6d 7 8 Enter any penalty for underpayment of estimated tax. Check here _____ if Form 2220 is attached 8 132. SEE STATEMENT 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 10 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Refunded > 11 11 Enter the amount of line 10 to be Credited to 2012 estimated tax Part VII-A Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 1b If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. X c Did the foundation file Form 1120-POL for this year? 10 d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year 0. 0 • (2) On foundation managers ▶ \$ (1) On the foundation ► \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation 0. managers > \$ X 2 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? N/A b if "Yes." has it filed a tax return on Form 990-T for this year? 4b X 5 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law Х remain in the governing instrument? X 7 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV. 8a Enter the states to which the foundation reports or with which it is registered (see instructions)

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X

X

X

8b

STMT 8

b if the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)

year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar

of each state as required by General Instruction G? If "No," attach explanation

had not been removed from jeopardy before the first day of the tax year beginning in 2011?

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Form **990-PF** (2011)

Total number of other employees paid over \$50,000

(a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE Total number of others receiving over \$50,000 for professional services ▶ O Part X.A. Summary of Direct Charitable Activities List the foundation sor largest drict charitable activities or organizations and other beneficiaries served, conferences convened, desearch papers produced, etc. 1 TO PROVIDE GENERAL SUPPORT FOR CHARITABLE ORGANIZATIONS IN NEED O. 2 3 4 Part XB Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the lax year on lines 1 and 2 Amount Amount All other program-related investments See instructions 3 All other program-related investments See instructions	Part VIII Information About Officers, Directors, Trustees, Foundation Man Paid Employees, and Contractors (continued)	agers, Highly	
NONE Total number of others receiving over \$50,000 for professional services Part K.A. Summary of Direct Charitable Activities List the foundation is four largest fact charitable solutions during the tax year include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 TO PROVIDE GENERAL SUPPORT FOR CHARITABLE ORGANIZATIONS IN NEED C. 2 2 3 4 Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 N/A All other program-related investments See instructions 3 Total, Add lines 1 through 3	3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable actives during the tax year include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, issearch papers produced, etc. 1 TO PROVIDE GENERAL SUPPORT FOR CHARITABLE ORGANIZATIONS IN NEED 0. Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions 3. Total, Add lines 1 through 3.		(b) Type of service	(c) Compensation
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 TO PROVIDE GENERAL SUPPORT FOR CHARITABLE ORGANIZATIONS IN NEED 0. Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 N/A All other program-related investments. See instructions 3 ITotal. Add lines 1 through 3	NONE		
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List the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc 1 TO PROVIDE GENERAL SUPPORT FOR CHARITABLE ORGANIZATIONS IN NEED 0. 2 Part IX-B Summary of Program-Related Investments	Total number of others receiving over \$50,000 for professional services		O
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc 1 TO PROVIDE GENERAL SUPPORT FOR CHARITABLE ORGANIZATIONS IN NEED 0. 2 Part IX-B Summary of Program-Related Investments	Part IX-A Summary of Direct Charitable Activities		
NEED 2 3 4 Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount N/A All other program-related investments See instructions 3 Total. Add lines 1 through 3	List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical informat number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	on such as the	Expenses
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount N/A All other program-related investments See instructions Total. Add lines 1 through 3	1 TO PROVIDE GENERAL SUPPORT FOR CHARITABLE ORGANIZA	TIONS IN	
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions Total. Add lines 1 through 3 • O •	NEED		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 All other program-related investments See instructions Total. Add lines 1 through 3 O .			0.
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Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 All other program-related investments See instructions Total. Add lines 1 through 3	•	·	
Part X-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions Total. Add lines 1 through 3	3		
Part X-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions Total. Add lines 1 through 3			
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions Total. Add lines 1 through 3			·
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions Total. Add lines 1 through 3			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions Total. Add lines 1 through 3			
N/A All other program-related investments See instructions Total. Add lines 1 through 3	Part IX-B Summary of Program-Related Investments		
All other program-related investments. See instructions Total. Add lines 1 through 3.			Amount
All other program-related investments. See instructions Total. Add lines 1 through 3.	1 N/A		
All other program-related investments. See instructions Total. Add lines 1 through 3.			
All other program-related investments. See instructions Total. Add lines 1 through 3.			
Total. Add lines 1 through 3 ▶ 0.			
Total. Add lines 1 through 3 ▶ 0.			
Total. Add lines 1 through 3 ▶ 0.	All other program-related investments. See instructions		
Total. Add lines 1 through 3 ▶ 0.	, ,		
	Total. Add lines 1 through 3	<u> </u>	

D/B/A GRAMELSPACHER FOUNDATION 35-6024934 Page 8 Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes 187,282. a Average monthly fair market value of securities 1a 3,011. b Average of monthly cash balances 1b c Fair market value of all other assets 10 190,293. d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 2 190,293. 3 Subtract line 2 from line 1d 3 4 Cash deemed held for chantable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 5 5 6 Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain Part XI foreign organizations check here
and do not complete this part) 9,372. 1 Minimum investment return from Part X, line 6 132. Tax on investment income for 2011 from Part VI, line 5 b Income tax for 2011 (This does not include the tax from Part VI) c Add lines 2a and 2b 20 Distributable amount before adjustments. Subtract line 2c from line 1 3 3 Recoveries of amounts treated as qualifying distributions 4 Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 7 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 1 466. Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a b Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required) 3a **b** Cash distribution test (attach the required schedule) 3b 466.

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

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

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4

6

income Enter 1% of Part I, line 27b

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years

Form 990-PF (2011

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI,	00.000	10010 prior to 2010	2010	2011
line 7				9,240.
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only			0.	
b Total for prior years				
,		0.		
3 Excess distributions carryover, if any, to 2011			•••••	
a From 2006 463.				
b From 2007 805.				
c From 2008				
d From 2009 3,711.				
e From 2010				
f Total of lines 3a through e	4,979.			
4 Qualifying distributions for 2011 from		r n · n ·	'	
Part XII, line 4. ▶ \$ 466.				
a Applied to 2010, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2011 distributable amount				466.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))	4,979.			4,979.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income Subtract			,, , , , , , , , , , , , , , , , , , ,	
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which				
the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable	,			
amount - see instructions		0.		
e Undistributed income for 2010 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2011 Subtract		,,		· · · · · · · · · · · · · · · · · · ·
lines 4d and 5 from line 1. This amount must				
be distributed in 2012				3,795.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2006				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2012.		1		
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2007				
b Excess from 2008				
c Excess from 2009				
d Excess from 2010				
e Excess from 2011				

Part XIV Private Operating F	oundations (see ins	structions and Part VII-	A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter that	it is a private operating			
foundation, and the ruling is effective fo	r 2011, enter the date of t	he ruling	>		
b Check box to indicate whether the found	lation is a private operating	ig foundation described in		4942(J)(3) or 49)42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(1) 0040	Prior 3 years	40,000	
income from Part I or the minimum	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
investment return from Part X for					
each year listed				-	
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly		<u>-</u>			
for active conduct of exempt activities					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon a "Assets" alternative test - enter (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	te this part only i	f the foundation	had \$5,000 or me	ore in assets
at any time during t				40,000 01 1111	
1 Information Regarding Foundation	n Managers:	-			
a List any managers of the foundation wh year (but only if they have contributed r			abutions received by the	foundation before the clos	se of any tax
NONE					
b List any managers of the foundation wh other entity) of which the foundation ha			or an equally large portion	on of the ownership of a p	artnership or
NONE					
2 Information Regarding Contribut Check here ☐ If the foundation of the foundation makes gifts, grants, etc.	only makes contributions t	to preselected charitable (organizations and does r	not accept unsolicited requ complete items 2a, b, c, and	
a The name, address, and telephone num	,				
SEE STATEMENT 11					
b The form in which applications should t	e submitted and informat	tion and materials they sh	ould include		
c Any submission deadlines				· -	
d Any restrictions or limitations on award	s, such as by geographica	al areas, charitable fields,	kinds of institutions, or	other factors	
123601 12-02-11					Form 990-PF (2011)

Part XV Supplementary Information				
3 * Grants and Contributions Paid During the Ye	ear or Approved for Future	Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		····-
a Paid during the year				
NONE				
		-		
]		
				
Total			▶ 3a	
b Approved for future payment	1			0.
• Approved for locare payment				
NONE				
			_	
				·
<u>Total</u>			► 3b	0

r gross amounts unless otherwise indicated	Unrelated b	usiness income		oy section 512, 513, or 514	(e)
rogram service revenue	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
		· <u>- · · · · · · · · · · · · · · · · · ·</u>			
				-	
				_	
Fees and contracts from government agencies					
lembership dues and assessments		_			
terest on savings and temporary cash		_			
vestments			14	1.	
ividends and interest from securities			14	6,498.	
et rental income or (loss) from real estate					
Debt-financed property				· · ·	
Not debt-financed property					
et rental income or (loss) from personal					
roperty					
ther investment income					
ain or (loss) from sales of assets other					
nan inventory			14	432.	
et income or (loss) from special events					
iross profit or (loss) from sales of inventory		·•			
Other revenue					
·	_				
			<u> </u>		
ubtotal Add columns (b), (d), and (e)		0.	,	6,931.	6,93
otal. Add line 12, columns (b), (d), and (e)				13	6,93
worksheet in line 13 instructions to verify calculations	s)				
rt XVI-B Relationship of Activitie	es to the Accon	nplishment of E	xempt P	urposes	
e No. Explain below how each activity for which i			A contribute	d importantly to the accomp	plishment of
the foundation's exempt purposes (other to	han by providing fund:	s for such purposes)			
					
					
		-			
					-
					-

Pa	rt XVII	Information Re Exempt Organ		sfers To a	and Transactions	and Relations	hips With None	haritable	,	
1	Did the c	rganization directly or indir		of the followin	n with any other organizat	ion described in sect	ion 501(c) of		Yes	No
		(other than section 501(c)			•		1011 30 1(0) 01		.03	110
а		s from the reporting founda								
_	(1) Casi	• •	ation to a mononanta.	or oxompt on	gamzation of			1a(1)		X
	(2) Othe							1a(2)		<u>X</u>
b		nsactions						10(2)		
		s of assets to a noncharital	ble exempt organizati	ion				16(1)		X
		chases of assets from a noi						1b(2)		X
		tal of facilities, equipment,		3				1b(3)		X
		nbursement arrangements						1b(4)		X
		ns or loan guarantees						1b(5)		X
		ormance of services or me	mbership or fundrais	ing solicitatio	ons			16(6)		X
C	Sharing	of facilities, equipment, ma	iling lists, other asset	ts, or paid em	ployees			10		X
	-	swer to any of the above is	-			lways show the fair r	narket value of the goo	ds, other ass	ets.	
		es given by the reporting fo							•	
	column ((d) the value of the goods,	other assets, or servi	ces received						
(a) ⊔	ne no	(b) Amount involved	(c) Name of	noncharitable	e exempt organization	(d) Description	of transfers, transactions,	and shanng an	angeme	nts
				N/A						
									-	
										
		undation directly or indirect n 501(c) of the Code (othei	-			nizations described		Yes	X	¬ No
		complete the following sch		(0), 01 000.						_ 140
	, , , ,	(a) Name of org			(b) Type of organization		(c) Description of relat	ionship	_	
		N/A			,,,,,		<u>, , , , , , , , , , , , , , , , , , , </u>	•		
	_									
	Unde	er penalties of penjury, I declare	that I have examined this	return, includir	ng accompanying schedules an	d statements, and to the	best of my knowledge	May the IRS	discuss	this
Sig	in and	belief, it is true, correct, and con	nplete Declaration of pre	eparer (other tha	n taxpayer) is based on all infor	mation of which person	DENT KNOW AND	return with the	e prepar	er
He	re 📗	MANA		-	8/15/2012	TREAS	URER	Yes] No
	Sig	nature of officer or trustee			Date	Title	-			
		Print/Type preparer's na		Preparer's s	ignature	Date	Check If P	TIN		
	Í	BRANDON L.	COOK,		1 1/20	1	self- employed			
Pa	id	CPA		Sra	when land, CP4	8/10/12		P01327		
	eparer		ENWALT CP	AS, IN	C.		Firm's EIN ► 35	-14895	21	
Us	e Only									
		Firm's address ▶ 53								
		IN	DIANAPOLI	S, IN	46224		Phone no 31	7-241-		
								Form 990	-PF	2011)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

2011

Name of the organization

JASPER WOOD PRODUCTS FOUNDATION, INC. D/B/A GRAMELSPACHER FOUNDATION

Employer identification number

35-6024934

Filers of:	Section:
Form 990 or 990-EZ	501(c)() (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	X 501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
, ,	n is covered by the General Rule or a Special Rule . c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
General Rule	
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one inplete Parts I and II.
contributor. Com	
contributor. Com Special Rules For a section 50' 509(a)(1) and 170	
contributor. Com Special Rules For a section 50' 509(a)(1) and 17' of the amount or For a section 50' total contribution	nplete Parts I and II. 1(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 0(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2%

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

JASPER WOOD PRODUCTS FOUNDATION, INC.

D/B/A GRAMELSPACHER FOUNDATION

Employer identification number

35-6024934

Part I	Contributors	(see instructions)	. Use duplicate copie	es of Part I if additional	space is needed.
--------	---------------------	--------------------	-----------------------	----------------------------	------------------

rant I	Contributors (see instructions). Use duplicate copies of Part I	if additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MARK GRAMELSPACHER 4205 N. WASHINGTON BLVD. INDIANAPOLIS, IN 46205	\$\$	Person Payroll Noncash X (Complete Part II if there is a noncash contribution
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	MARK GRAMELSPACHER 4205 N. WASHINGTON BLVD. INDIANAPOLIS, IN 46205	\$\$ \$	Person Payroll Noncash X (Complete Part II if there is a noncash contribution
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	MARK GRAMELSPACHER 4205 N. WASHINGTON BLVD. INDIANAPOLIS, IN 46205	\$\$ 43,280.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution 990, 990-EZ, or 990-PF) (201

Name of organization

JASPER WOOD PRODUCTS FOUNDATION, INC.

D/B/A GRAMELSPACHER FOUNDATION

Employer identification number

35-6024934

Part II	Noncash Property	(see instructions). Use duplicate copies of Part II if additional space is needed.
---------	------------------	--

art II No	ncash Property (see instructions). Use duplicate copies of Pa	art li if additio	nal space is needed.	
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
	SHARES OF CATERPILLAR STOCK			
		\ \$_	36,240.	12/31/11
(a) No. irom	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
2 200	SHARES OF CHEVRON STOCK			
		\$ _	21,280.	12/31/11
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
3 2,0	000 SHARES OF PFIZER STOCK			
		\$_	43,280.	12/31/11
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$_		
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$_		
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
3453 01-23-12		\$ _	Sahadula B /Earm 0	90, 990-EZ, or 990-PF) (3

Name of org				Employer id	lentification number
	R WOOD PRODUCTS FOUNDAT				
	GRAMELSPACHER FOUNDATION	ON	504(-)(7) (0)	35-6	024934
Part III	Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc Use duplicate copies of Part III if additional	ie following line entry. For orga captributions of \$1,000 or l	anizations completir	ng Part III enter	more than \$1,000 for the
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of h	ow gift is held
			-		
; ;		(e) Transfer	of gift	-	· · · · · · · · · · · · · · · · · · ·
	Transferee's name, address, ar	nd ZIP + 4	Relat	ionship of transferor to t	ransferee
(a) No.					
from Part I	(b) Purpose of gift	(c) Use of gift	·	(d) Description of h	ow gift is held
	ionship of transferor to	rancfaras			
	Transferee's name, address, ar	nd ZIP + 4		ionship of transferor to	ransieree
(a) No.					
from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of h	ow gift is held
		(e) Transfer	of gift		
Transferee's name, address, a		nd ZIP + 4	Relat	ionship of transferor to	ransferee
(1)					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	t .	(d) Description of I	ow gift is held
		(e) Transfer	of gift		
	Transferee's name, address, ar	nd ZIP + 4	Relat	ionship of transferor to	transferee

FORM 990-PF	U.S. AND S	STATE/CITY G	OVERNMENT	OBLIGATIONS	STATEMENT	5
DESCRIPTION		U.S GOV'		BOOK VALUE	FAIR MARKET	r
FIDELITY CAPITAL &		оск		81,708. 78,175.	87,16 78,68	
TOTAL U.S. GOVERNM	MENT OBLIGAT	CIONS				
TOTAL STATE AND MU	UNICIPAL GOV	ERNMENT OBL	IGATIONS	159,883.	165,84	16
						40.
TOTAL TO FORM 990-	-PF, PART II	_		159,883.	165,84	
	-PF, PART II	_		<u> </u>		-
TOTAL TO FORM 990- FORM 990-PF DESCRIPTION	-PF, PART II	, LINE 10A		<u> </u>	165,84	46.
FORM 990-PF	-PF, PART II	, LINE 10A		159,883.	165,84 STATEMENT FAIR MARKET	46. 6

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10

STATEMENT

NAME OF CONTRIBUTOR

ADDRESS

CMW INC.

P.O. BOX 2266

INDIANAPOLIS, IN 46206

FORM 990-PF INTEREST ON SAV	INGS A	ND TEM	PORARY C.	ASH II	NVESTMENTS	STATEMENT	1
SOURCE						AMOUNT	
FIDELITY INTEREST INCOME						,	1.
TOTAL TO FORM 990-PF, PART I	, LINE	3, CO	LUMN A				1.
FORM 990-PF DIVIDENI	DS AND	INTER	EST FROM	SECUI	RITIES	STATEMENT	2
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A	7)
FIDELITY	-	<u></u>	6,930.		432.	6,4	198.
TOTAL TO FM 990-PF, PART I, 1	LN 4 =		6,930.		432.	6,4	198.
FORM 990-PF	ACC	COUNTI	NG FEES			STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOM	CHARITA	
ACCOUNTING FEES		685.		343.			342.
TO FORM 990-PF, PG 1, LN 16B		685.		343.			342.
FORM 990-PF TAXES					STATEMENT	4	
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOM		
4940(E) EXCISE TAX		124.		0.			124.
TO FORM 990-PF, PG 1, LN 18		124.		0.			124.
							=

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION STATEMENT 11 PART XV, LINES 2A THROUGH 2D

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

MARK B. GRAMELSPACHER, PRESIDENT JASPER WOOD PRODUCTS FOUNDATION, INC. P.O. BOX 2386 INDIANAPOLIS, IN 46206

TELEPHONE NUMBER

317-423-9800

FORM AND CONTENT OF APPLICATIONS

THE APPLICATION MUST BE SUBMITTED IN THE FORM OF A LETTER AND SHOULD DESCRIBE THE APPLICANTS PURPOSE AND ACTIVITIES IN GENERAL. IF THE REQUESTED AMOUNT IS USED FOR A SPECIFIC PURPOSE, PROJECT, OR PROGRAM, THEN IT SHOULD BE CLEARLY EXPLAINED. APPLICANTS OR REQUESTS LONGER THAN FIVE PAGES WILL NOT BE ACCEPTED.

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

NONE

Form **8868**

(Rev. January 2012)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No. 1545-1709

If you a	re filing for an Automatic 3-Month Extension, complet	e only Pa	rt I and check this box		•	· [X]
If you a	re filing for an Additional (Not Automatic) 3-Month Ext	tension, c	omplete only Part II (on page 2 of	this form).		
Do not co	omplete Part II unless you have already been granted a	ın automa	tic 3-month extension on a previous	sly filed For	m 8868.	
lectroni	c filing (e-file). You can electronically file Form 8868 if y	ou need a	3-month automatic extension of tin	ne to file (6	months for a corp	oration
quired t	o file Form 990-T), or an additional (not automatic) 3-mor	nth extens	ion of time. You can electronically fi	ile Form 88	68 to request an e	extension
time to	file any of the forms listed in Part I or Part II with the exc	eption of	Form 8870, Information Return for 1	Fransfers A	ssociated With Ce	ertain
ersonal l	Benefit Contracts, which must be sent to the IRS in pap	er format ((see instructions). For more details o	on the elec	tronic filing of this	form,
sit www.	irs.gov/efile and click on e-file for Charities & Nonprofits.					
Part I	Automatic 3-Month Extension of Time	. Only s	ubmit original (no copies ne	eded).		
corpora	tion required to file Form 990-T and requesting an auton	natic 6-mo	nth extension - check this box and	complete		
art I only	•				•	• 🗀
	corporations (including 1120-C filers), partnerships, REM. ome tax returns.	iCs, and ti	rusts must use Form 7004 to reques	t an exten	sion of time	
ype or	Name of exempt organization or other filer, see instruc	ctions.		Employer	mployer identification number (Elf	
rint	JASPER WOOD PRODUCTS FOUND	MOITA	, INC.			
	D/B/A GRAMELSPACHER FOUNDAT	CION_		X	35-60249	34
le by the ue date for	Number, street, and room or suite no. If a P.O. box, so	ee instruct	tions.	Social se	N)	
ng your turn See	P.O. BOX 2386					
structions	City, town or post office, state, and ZIP code. For a for INDIANAPOLIS, IN 46206-238		ress, see instructions.			
nter the	Return code for the return that this application is for (file	a separa	te application for each return)			0 4
	.,					
pplicati	on	Return	Application			Return
For		Code	Is For			Code
orm 990		01	Form 990-T (corporation)			07
orm 990	·BL	02	Form 1041-A			08
orm 990	·EZ	01	Form 4720			09
orm 990	·PF	04	Form 5227			10
orm 990	-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
orm 990	-T (trust other than above)	06	Form 8870		·	12
-	MARK B. GRAMELS					
	ooks are in the care of P.O. BOX 2386 -	- IND	<u>IANAPOLIS, IN 4620</u>	6		
Teleph	one No. ► 317-423-9800		FAX No. ▶			
If the	organization does not have an office or place of business	s in the Ur	nited States, check this box		•	L
If this	is for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN)	If this is fo	r the whole group,	check this
ox ▶ [. If it is for part of the group, check this box	and atta	ich a list with the names and EINs o	f all memb	ers the extension	s for.
1 I re	quest an automatic 3-month (6 months for a corporation					
	AUGUST 15, 2012 , to file the exemp	t organiza	tion return for the organization nam	ed above.	The extension	
_	or the organization's return for:					
►ļ	X calendar year 2011 or					
►l	tax year beginning	, an	d ending		·	
			. —			
2 If th	ne tax year entered in line 1 is for less than 12 months, o	heck reas	on: Initial return I	Final retur	n	
L	☐ Change in accounting period					
				1	 	
	nis application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any			Λ
	nrefundable credits. See instructions.			3a	\$	0.
	nis application is for Form 990-PF, 990-T, 4720, or 6069,	-				^
	imated tax payments made. Include any prior year overp			3b_	\$	0.
	ance due. Subtract line 3b from line 3a. Include your pa				_	^
	using EFTPS (Electronic Federal Tax Payment System).			3c	\$	0.
_	If you are going to make an electronic fund withdrawal			orm 8879-		
_HA F	or Privacy Act and Paperwork Reduction Act Notice,	see Instr	uctions.		Form 8868 (l	Kev. 1·2012)

123841 01-04-12