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£/11/2013

Form 990-PF

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

OMB No 1545-0052

Depart	ment of t	the Treasury	ed as a Private	Foundance	JH		2011
Interna	l Reveni	ue Service Note. The foundation may be			ate reporting requir	ements	L
	alend		and ending 06	/30/12	l A Employ	ver identification number	
, v	le or rou	noadon			A Employ	er identification number	
Н	OOVI	ER FAMILY FOUNDATION			35-	1873953	
Nun	ber and	street (or P O box number if mail is not delivered to street address)		Room/suite	B Telephe	one number (see instructions	s)
		E 86TH STREET		5	317	<u>-815-9553</u>	
		, state, and ZIP code ANAPOLIS IN 46240			C If exem	ption application is pending,	check here
_			urn of a former pub	lic charity	D 1. For	eign organizations, check he	ere 🕨
		Final return Amende		no onamy		eign organizations meeting t	<u> </u>
		Address change Name ch	nange			6 test, check here and attack	
H C	heck t	ype of organization X Section 501(c)(3) exempt priva	te foundation		E If prival	e foundation status was ten	minated under
$\overline{}$			ble private foundati	on	1	507(b)(1)(A), check here	▶ _
Fa	ir marl	ket value of all assets at J Accounting method	X Cash	Accrual	F If the fo	undation is in a 60-month te	ermination
	-	ear (from Part II, col. (c), Other (specify)			under s	section 507(b)(1)(B), check h	nere 🕨
	e 16) J		st be on cash basis.)			1 100 5
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		t investment	(c) Adjusted net	(d) Disbursements for charitable
		the amounts in column (a) (see instructions))	books	1	ncome	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)					
	2	Check ► X If the foundation is not required to attach Sch.					
	3	Interest on savings and temporary cash investments		L32	132		
	4	Dividends and interestiffom securities () 2013	230,	505	229,854	· · · · · · · · · · · · · · · · · · ·	
	5a	Gross rents					
ne	b	Net rental income or (loss) OGDEN, UT	620	707	<u>-</u>		
Revenue	6a	Net gain or (loss) from sale of assets not on line 10	632,	121			
	7	Gross sales price for all assets on line 6a 9, 696, 225 Capital gain net income (from Part IV, line 2)			632,727		
	7 8	Net short-term capital gain			32,727		
	9	Income modifications					<u></u>
	10a	Gross sales less returns & allowances				······································	
	b	Less. Cost of goods sold					
	c	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule) STMT 1		93			
	12	Total. Add lines 1 through 11	863,	457	862,713		
S	13	Compensation of officers, directors, trustees, etc.	153,	863	3,077		150,786
ses	14	Other employee salaries and wages					
ē	15	Pension plans, employee benefits	92,	093	1,842		90,251
X	16a	Legal fees (attach schedule)					
e	b	Accounting fees (attach schedule) STMT 2		752			5,752
Operating and Administrative Expen	C	Other professional fees (attach schedule) STMT 3	57,	933	57,933		
tra	17	Interest	<u> </u>	005	10.000		
nis	18	Taxes (attach schedule) (see instructions) STMT 4	10,		10,000		5.
Ē	19	Depreciation (attach schedule) and depletion STMT 5		338			14.05
Ad	20	Occupancy	14,				14,050
Þ	21	Travel, conferences, and meetings		381			383
<u>5</u>	22	Printing and publications Other expenses (att sch.) STMT 6	12,	140	 		12,14
ing	24	Total operating and administrative expenses.	<u></u> /				12,13
Operating a		Add lines 13 through 23	354,	577	72,852		273,38
pe B	25	Contributions, gifts, grants paid	694,				694,52
م ہ	26	Total expenses and disbursements. Add lines 24 and 25	1,049,		72,852		967,90
-	27	Subtract line 26 from line 12:	<u> </u>		· · · · · · · · · · · · · · · · · · ·		
j	a	Excess of revenue over expenses and disbursements	-185,	640			
A STANDED OF A	b	Net investment income (if negative, enter -0-)			789,861		
Ē	c	Adjusted net income (if negative, enter -0-)			· · · · · · · · · · · · · · · · · · ·		0
<u></u>		work Reduction Act Notice, see instructions.					Form 990-PF 201

	Part I	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	year
_		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing			
1	2	Savings and temporary cash investments	1,302,759	1,142,230	1,142,230
	3	Accounts receivable			,
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶]		
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see			
-		instructions)			
	7	Other notes and loans receivable (att. schedule)			
		Less: allowance for doubtful accounts			
ιχ	8	Inventories for sale or use		·	
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U S. and state government obligations (attach schedule)			
	ь	Investments—corporate stock (attach schedule) SEE STMT 7	9,011,981	10,410,130	10,532,028
	c	Investments—corporate bonds (attach schedule) SEE STMT 8	2,956,589	1,537,192	1,532,925
	11	Investments—land, buildings, and equipment basis	2,330,303	2,331,132	1,332,323
		Less accumulated depreciation (attach sch.)	1		
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)		······································	
	14	Land, buildings, and equipment basis 21,213			
	' '	Less accumulated depreciation (attach sch.) STMT 9 12,686	11,033	8,527	8,527
	15	Other assets (describe ►	11,033	8,321	6,321
	16	Total assets (to be completed by all filers—see the			
	'0	instructions Also, see page 1, Item I)	13,282,362	13,098,079	12 215 710
_	17	Accounts payable and accrued expenses	13,262,362	13,098,079	13,215,710
1	18	Grants payable Grants payable	 		
es	19	Deferred revenue			
ij	20				
Liabilities	21	Loans from officers, directors, trustees, and other disqualified persons	-	—·· · · · · · · · · · · · · · · · · · ·	
Ξ.		Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe)			
_	23	Total liabilities (add lines 17 through 22)	0	0	
ro.]	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
nces	٠,	-			
an	24	Unrestricted			
Ba	25	Temporarily restricted			
Net Assets or Fund Bala	26	Permanently restricted			
5		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
<u>~</u>					
ş	27	Capital stock, trust principal, or current funds	13,282,362	13,098,079	
Se	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
Ą	29	Retained earnings, accumulated income, endowment, or other funds			
ē	30	Total net assets or fund balances (see instructions)	13,282,362	13,098,079	
_	31	Total liabilities and net assets/fund balances (see			
_	<u> </u>	instructions)	13,282,362	13,098,079	·····
	Part			· · · · · · · · · · · · · · · · · · ·	
1		I net assets or fund balances at beginning of year—Part II, column (a), line 30 (mu	ist agree with		
		of-year figure reported on prior year's return)		. 1	13,282,362
2		r amount from Part I, line 27a		2	-185,640
		er increases not included in line 2 (itemize) SEE STATEMENT 10		3	39,857
4		lines 1, 2, and 3		4	13,136,579
	5 Dec	reases not included in line 2 (itemize) SEE STATEMENT 11		5	38,500
_6	3 Tota	I net assets or fund balances at end of year (line 4 minus line 5)—Part II, column	(b), line 30	6	13,098,079
					Form 990-PF (2011)

Part IV Capital Gains a	<u>nd Losses for Tax on Investme</u>	ent Income			
	nbe the kınd(s) of property sold (e.g., real estate, arehouse, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acq (mo , day,	
1a PUBLICLY TRADED	SECURITITES		P	VARIO	US VARIOUS
	COMMODITY INDEX TRAI	D.	P	VARIO	
			P	VARIO	
d CAPITAL GAIN DI			P	VARIO	
e ELI LILLY		·	P	VARIO	
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale	,	(h) Gain or (loss) (e) plus (f) minus (g)
a 9,258,547			8,739,284		519,263
b 252,514			242,398		10,116
42 041		· · · · · ·	47,502		-4,261
d 54,663			41,302		54,663
07 000			34,314		52,946
	g gain in column (h) and owned by the fo	Lundation on 12/3		-	32,340
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) E	xcess of col (i)	coi (i	Gains (Col. (h) gain minus k), but not less than -0-) or Losses (from col. (h))
a					519,263
b					10,116
c					-4,261
d					54,663
e				-	52,946
	If gain, also enter in	Part Lling 7			32,340
2 Capital gain net income or (net c	If (loss), enter -0- in	Part I, line 7		2	632,727
• • •	ss) as defined in sections 1222(5) and (·			
	s, column (c) (see instructions) If (loss),	enter -0- in			
Part I, line 8			<u> </u>	3	50,402
Part V Qualification U	<u>nder Section 4940(e) for Reduc</u>	ced Tax on N	et investment inco	ome	
	ction 4942 tax on the distributable amous	• •	he base period?		Yes X No
1 Enter the appropriate amount in	each column for each year; see the inst	ructions before m	naking any entries		
(a) Base period years Calendar year (or tax year beginning ir	(b) Adjusted qualifying distribution	s Net	(c) value of noncharitable-use asse	els	(d) Distribution ratio (col (b) divided by col (c))
2010	1,118	,501	14,249,	087	0.078496
2009	1,054		13,785,		0.076465
2008		,508	12,758,		0.055922
2007	1,048		18,206,		0.057593
2006		,430	17,683,		0.046904
2 Total of line 1, column (d)	1			2	0.315380
3 Average distribution ratio for the	5-year base period—divide the total on	-	the		
number of years the foundation	has been in existence if less than 5 year	rs		3_	0.063076
4 Enter the net value of noncharita	able-use assets for 2011 from Part X, lin	e 5		4	12,982,734
5 Multiply line 4 by line 3				5	818,899
6 Enter 1% of net investment inco	ome (1% of Part I, line 27b)			6	7,899
7 Add lines 5 and 6				7	826,798
8 Enter qualifying distributions fro	m Part XII, line 4 an line 7, check the box in Part VI, line 1	b and generals	that part using a 40/ hour	8	967,907
Part VI instructions.	an line 7, Check the DOX III Fatt VI, line I	b, and complete	mai part using a 1% tax	iale. See in	000 DF

DAA

	990-PF (2011) HOOVER FAMILY FOUNDATION 35-1873953		<u>Pa</u>	<u>ge 4</u>
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)			
1a	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)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	 	7,8	<u> 99</u>
	here ▶ X and enter 1% of Part I, line 27b	2		
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of			
	Part I, line 12, col. (b).			_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0
3	Add lines 1 and 2		7,8	399
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		7,8	99
6	Credits/Payments:			
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 22,183			
b	Exempt foreign organizations—tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d		22,1	<u> 183</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		14,2	<u> 284</u>
11	Enter the amount of line 10 to be: Credited to 2012 estimated tax ▶ 14,284 Refunded ▶ 11			
Pa	rt VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		<u>_x</u> _
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	1 1		
	of the instructions for definition)?	1b		X
	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.			77
С	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.			
	(1) On the foundation ▶ \$ (2) On foundation managers. ▶ \$:	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers. \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2_		X
	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	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	_		<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T	1		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or	-	Ī	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	-		
	conflict with the state law remain in the governing instrument?	6	X	<u> </u>
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	7	X	ļ.—
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ IN			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		1	
-	(or designate) of each state as required by General Instruction G? If "No," attach explanation	_8b	x	<u>L</u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			T
-	4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes,"		1	1
	complete Part XIV	9	1	x
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
- •	names and addresses	10		x
		Form 9	90-P	

orm	990-PF (2011) HOOVER FAMILY FOUNDATION 35-18	7 <u>3</u> 95 <u>3</u>				Pa	age 5
Pa	rt VII-A Statements Regarding Activities (continued)						
1	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	!					
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)				11	ļ	X
2	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqual	lified					
	person had advisory privileges? If "Yes," attach statement (see instructions)				12		X
3	Did the foundation comply with the public inspection requirements for its annual returns and exemption	on applicat	ion?	•	13	X	
	Website address ► N/A			,			
4	The books are in care of ▶ DAVID C. HOOVER	Teleph	one no. ▶	317~8	15-	955	3
	860 E 86TH STREET SUITE 5						
	Located at ▶ INDIANAPOLIS	:N	ZIP+4 ▶	46240)		
5	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here	•					▶ []
	and enter the amount of tax-exempt interest received or accrued during the year		▶ [15			
6	At any time during calendar year 2011, did the foundation have an interest in or a signature or other a	authority			. 1	Yes	No
	over a bank, securities, or other financial account in a foreign country?				16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the	name of					_
	the foreign country ▶						
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Re	quired					
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.					Yes	No
1a	During the year did the foundation (either directly or indirectly)						
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			_			
	disqualified person?		Yes	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		Yes	X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		X Yes	∐ No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			<u></u>			
	the benefit or use of a disqualified person)?		Yes	X No		•	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the						
	foundation agreed to make a grant to or to employ the official for a period after		—				
	termination of government service, if terminating within 90 days.)		Yes	X No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in	n Regulati	ons				.,
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?			, []	1b		X
_	Organizations relying on a current notice regarding disaster assistance check here			▶ 📙		-	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts	s, tnat					x
•	were not corrected before the first day of the tax year beginning in 2011?				1c		^
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a p operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	rivate					
2	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and						
а	6e, Part XIII) for tax year(s) beginning before 2011?		Yes	X No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			<u> </u>			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 494	12/21/21					
~	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 494)						
	all years listed, answer "No" and attach statement—see instructions.)	2(2)(2) 10		N/A	2b		İ
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years	here		-1, -2		-	
Ī	► 20 , 20 , 20 , 20 , 20	, ,,,,,,					
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise						
-	at any time during the year?		Yes	X No			
b	If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundati	on or					
~	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved					1	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the	•					
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	•			1	1	
	foundation had excess business holdings in 2011.)			N/A	3b	1	Ì
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable	e purnose	s?	,	4a	†	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jed				···		1
~	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning the state of the first day of the tax year beginning the state of the first day of the tax year beginning the state of the first day of the tax year beginning the state of the first day of the tax year beginning the state of the first day of the tax year beginning the state of the first day of the tax year beginning the state of the first day of the tax year beginning the state of the first day of the tax year beginning the state of the first day of the tax year beginning the state of the first day of the tax year beginning the state of the first day of the tax year beginning the state of the first day of the tax year beginning the state of the first day of the tax year beginning the state of the first day of the tax year beginning the state of the first day of the tax year beginning the state of the state of the first day of the tax year beginning the state of	-			4b	1	x
						<u> </u>	F (2044)

Form	1 990-PF (2011) HOOVER FAMI	LY FOUNDATION	35-1	873953			Page 6
Pa	urt VII-B Statements Regard	ding Activities for Which Forr	n 4720 May Be R	equired (conti	nued)		
5a	During the year did the foundation pay	or incur any amount to					
	(1) Carry on propaganda, or otherwise	attempt to influence legislation (section	л 4945(e))?		es X No		
	(2) Influence the outcome of any spec			_	_	1	
	directly or indirectly, any voter regi	stration drive?			es X No	1	
	(3) Provide a grant to an individual for		37	ΠY	es X No	1	
	(4) Provide a grant to an organization		•	·			
	-	ction 4940(d)(2)? (see instructions)		Пу	es X No	Ī	
	(5) Provide for any purpose other than		or educational			1	l'
	purposes, or for the prevention of	• • • • • • • • • • • • • • • • • • • •	, 51 54264151121		es X No	- [
b	If any answer is "Yes" to 5a(1)–(5), did	•	inder the exceptions d	L		1	1
-	Regulations section 53 4945 or in a cu		·		N/A	5b	ŀ
	Organizations relying on a current noti		•		▶	-	
С	If the answer is "Yes" to question 5a(4				. , ,	Ī	
·	because it maintained expenditure res	•	i iioiii tile tax	N/A 🗌 Y	es No	1	ĺ
	If "Yes," attach the statement required			11/11	es 140	1	
60	· · · · · · · · · · · · · · · · · · ·	• •	nov promitime		1	1	1 1
6a	Did the foundation, during the year, re-	ceive any lunus, directly of indirectly, to	pay premiums	\Box	es X No		
	on a personal benefit contract?				es X No	أ. ا	v
b	Did the foundation, during the year, pa	ly premiums, directly or indirectly, on a	personal benefit conti	ract?		6b	<u> </u>
_	If "Yes" to 6b, file Form 8870			О.	. 👽		
	At any time during the tax year, was the	• • •			es X No		
	If Yes, did the foundation receive any				N/A	<u>7</u> b	
P		Officers, Directors, Trustees,	Foundation Man	agers, Highly	Paid Employe	es,	
_	and Contractors						
1	List all officers, directors, trustees, fo	undation managers and their compe	ensation (see instruc	tions).			
			(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(e) Ex	pense account,
	(a) Name an	d address	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred		er allowances
					compensation	├ ─	
	AMES E HOOVER	INDIANAPOLIS	PRESIDENT			ł	
8	60 E 86TH STREET SUITE 5	IN 46240	10.00	21,442	1,023		0
D	AVID C. HOOVER	INDIANAPOLIS	EXECUTIVE D	TRECTOR - IN	DIANA		
8	60 E 86TH STREET SUITE 5	IN 46240	40.00	71,185	29,258	<u> </u>	0
C	YNTHIA K. HOOVER	INDIANAPOLIS	VICE PRESIDE	T		}	
8	60 E 86TH STREET SUITE 5	IN 46240	2.00	0	0	└ ─	0
G:	LEN H. FRIEDMAN	WEST LINN	EXECUTIVE D	TRECTOR - OF	EGON	l	
1	9250 NIXON AVE	OR 97068	40.00	61,236	50,603	<u> </u>	0
2	Compensation of five highest-paid	employees (other than those include	ed on line 1—see ins	tructions). If non	e, enter		
	"NONE."						
			(b) Title, and average		(d) Contributions to	l	
	(a) Name and address of each employ	ee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred		pense account, er allowances
			devoted to position	}	compensation		
N	ONE						
		•					
							
			_ +	† 	<u> </u>	†	
				1		1	
_				 		1	
				1			
			 -	 	 	+	
				1			
Tot	al number of other employees paid over	\$50,000		-1			0
100	ar number of other employees paid over	ψου,υυυ					90-PF (2011)
					F	orm 🗗	<i>3</i> ∪-Г (2011)

Form 990-PF (2011) HOOVER FAMILY		35-1873953	Page 7
		ındation Managers, Highly Paid E	mployees,
and Contractors (continue			
3 Five highest-paid independent contractors			
	person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	•		
			
•	·		
	<u> </u>		
Total number of others receiving over \$50,000 for	professional services		—
Part IX-A Summary of Direct Cha	ıritable Activities		
List the foundation's four largest direct charitable activities during organizations and other beneficiaries served, conferences conve		tion such as the number of	Expenses
1 N/A			
2			
		•	
3			
	•	•	
4			
			<u> </u>
Part IX-B Summary of Program-Part IX-B Summary of Part IX-B Summary of Program-Part IX-B Summary of Part IX-B Summary of Part IX-B S	Related Investments (see ins		1
1 N/A	te foundation during the tax year off lines 1 and		Amount
, 5., 5.	•		
2			
All other program-related investments. See instructions			
3			
		•	
Total Add lines 1 through 3		<u> </u>	

Form 990-PF (2011)

967,907

960,008

3b

4

5

Cash distribution test (attach the required schedule)

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years

Enter 1% of Part I, line 27b (see instructions)

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 income

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

	ondictionical income (see instructions				
1	Distributable amount for 2011 from Part XI,	(a) Corpus	(b)	(c)	(d)
•	line 7	Обіраз	Years prior to 2010	2010	2011
2	Undistributed income, if any, as of the end of 2011:				641,238
а	Enter amount for 2010 only	•			
b	<u> </u>				
3	Excess distributions carryover, if any, to 2011.				
а	From 2006				
b	From 2007 613,666	1			
С	From 2008 81,716				
đ	From 2009 375,702]			
е	From 2010 441,165]			
f	Total of lines 3a through e	1,512,249			
4	Qualifying distributions for 2011 from Part XII,			<u></u>	
	line 4: ▶ \$ 967,907			-	
	Applied to 2010, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election				
	required—see instructions)				
	Applied to 2011 distributable amount				641,238
	Remaining amount distributed out of corpus	326,669	***************************************		
5	Excess distributions carryover applied to 2011				·
	(If an amount appears in column (d), the same				
6	amount must be shown in column (a)) Enter the net total of each column as				
•	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e Subtract line 5	1 020 010			
	Prior years' undistributed income. Subtract	1,838,918			·····
~	line 4b from line 2b				
С	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				
d	Subtract line 6c from line 6b. Taxable		· · · · · · · · · · · · · · · · · · ·		·····
	amount—see instructions				
е	Undistributed income for 2010. Subtract line				
	4a from line 2a. Taxable amount—see				
	instructions				
f	Undistributed income for 2011. Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2012				0
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions)				
8	Excess distributions carryover from 2006 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2012.				
	Subtract lines 7 and 8 from line 6a	1,838,918			
0	Analysis of line 9				
a	Excess from 2007 613,666				
b	Excess from 2008 81,716				
С	Excess from 2009 375,702	L }			
d	Excess from 2010 441,165	[}			
e	Excess from 2011 326, 669				

	rt XIV Private Operating Fou			1/// A =================================		Page 10
•••••	· ····································					
та	If the foundation has received a ruling or		•	ing		
	foundation, and the ruling is effective for		_		10(1)(0)	00.00
	Check box to indicate whether the foundation of		ting foundation descri		42(j)(3) or 494	2(j)(5) I
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	Income from Part I or the minimum	(a) 2011	(b) 2010	(c) 2009	(d) 2008	
	investment return from Part X for					
	each year listed					
b	85% of line 2a					
С	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					
е	Qualifying distributions made directly					
	for active conduct of exempt activities					}
	Subtract line 2d from line 2c	· 				
3	Complete 3a, b, or c for the		1			ļ
	alternative test relied upon:					
а	"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					<u> </u>
С	"Support" alternative test—enter.					
	(1) Total support other than gross	u	1			
	investment income (interest,					
	dividends, rents, payments on			1		
	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)			<u> </u>		
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income					
Pa	urt XV Supplementary Inform		•	the foundation h	ad \$5,000 or mo	re in assets at
	any time during the y		tions.)			
1	Information Regarding Foundation Ma	=				
а	List any managers of the foundation who				•	
	before the close of any tax year (but only	, if they have contribut	ed more than \$5,000).	. (See section 507(d)(2))	
	N/A					
b	List any managers of the foundation who		•		portion of the	
	ownership of a partnership or other entit $\mathbf{N/A}$	y) of which the founda	tion has a 10% or grea	ater interest.		
2	Information Regarding Contribution,	Grant, Gift, Loan, Sc	holarship, etc., Progi	rams:		
	Check here ▶ ☐ if the foundation on	y makes contributions	to preselected charita	ble organizations and	does not accept	
	unsolicited requests for funds. If the four	ndation makes gifts, g	rants, etc (see instruc	tions) to individuals or	organizations under	
	other conditions, complete items 2a, b,					
а	The name, address, and telephone num			ıld be addressed		
	HOOVER FAMILY FOUND.					
	860 E 86TH STREET,)6	
_b	The form in which applications should b SEE STATEMENT	e submitted and inforn	nation and materials th	ney should include:		
С	Any submission deadlines SEE STATEMENT	_ _				
d	Any restrictions or limitations on awards	, such as by geograph	nical areas, charitable	fields, kinds of institution	ons, or other	
	factors.	, 5 5 9	,		•	
	SEE STATEMENT					

3 Grants and Contributions Paid During the		uture Payment		<u></u>
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year SEE STATEMENT 15				
	1			
			i i	694,520
			1	
			1	
			1	
		į.	1	
Total	<u></u>	<u> </u>	▶ 3a	694,520
b Approved for future payment	1		<u> </u>	034,320
N/A			- [
			1	
		}		
		İ		
Total		<u> </u>		
Total		·	▶ 3b	- 000 PE

Part XVI-A Analysis of Income-Producing Active gross amounts unless otherwise indicated.		ed business income	Excluded	by section 512, 513, or 514	(e)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
Program service revenue					(dee instructions)
a	-	 			
b		ļ			
c			+		
de		<u></u>			
ef	-		1 -		
g Fees and contracts from government agencies	-		+ +		
Membership dues and assessments			+		
Interest on savings and temporary cash investments			14	132	
Dividends and interest from securities			14	230,505	
Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal property					
Other investment income					
Gain or (loss) from sales of assets other than inventory			18	632,727	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory			_		
Other revenue: a	_		4		
b FOREIGN TAX REFUND	_		14	93	
С					
d	_				
e					
e			0	863,457	
e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)			0	863,457 13 _	863,45
e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.)	Accomplishin	cent of Evernt		13	
e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the			Purpose	13 s	863,45
e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) 6 ee worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Activity for which income	ne is reported in	column (e) of Part X	Purpose /I-A contrib	13 es outed importantly to the	863,45
e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Activity for which income	ne is reported in	column (e) of Part X	Purpose /I-A contrib	13 es outed importantly to the	863,4
e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt put	ne is reported in	column (e) of Part X	Purpose /I-A contrib	13 es outed importantly to the	863,4
e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt put	ne is reported in	column (e) of Part X	Purpose /I-A contrib	13 es outed importantly to the	863,4
e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt put	ne is reported in	column (e) of Part X	Purpose /I-A contrib	13 es outed importantly to the	863,4
e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt put	ne is reported in	column (e) of Part X	Purpose /I-A contrib	13	863,4
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt put	ne is reported in	column (e) of Part X	Purpose /I-A contrib	13	863,4
e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt put	ne is reported in	column (e) of Part X	Purpose /I-A contrib	13	863,4
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt put	ne is reported in	column (e) of Part X	Purpose /I-A contrib	13	863,4
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt put	ne is reported in	column (e) of Part X	Purpose /I-A contrib	13	863,4
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt put	ne is reported in	column (e) of Part X	Purpose /I-A contrib	13	863,4
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt put	ne is reported in	column (e) of Part X	Purpose /I-A contrib	13	863,4
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt put	ne is reported in	column (e) of Part X	Purpose /I-A contrib	13	863,4
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt put	ne is reported in	column (e) of Part X	Purpose /I-A contrib	13	863,4
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt put	ne is reported in	column (e) of Part X	Purpose /I-A contrib	13	863,4
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt put	ne is reported in	column (e) of Part X	Purpose /I-A contrib	13	863,4
e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt put	ne is reported in	column (e) of Part X	Purpose /I-A contrib	13	863,4
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt put	ne is reported in	column (e) of Part X	Purpose /I-A contrib	13	863,4
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt put	ne is reported in	column (e) of Part X	Purpose /I-A contrib	13	863,4
e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt put	ne is reported in	column (e) of Part X	Purpose /I-A contrib	13	863,4
e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt put	ne is reported in	column (e) of Part X	Purpose /I-A contrib	13	863,4
e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt put	ne is reported in	column (e) of Part X	Purpose /I-A contrib	13	863,4
e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt put	ne is reported in	column (e) of Part X	Purpose /I-A contrib	13	863,4

		1) HOOVER FA				35-18739			Page 13
Part X		Exempt Organiza	tions			·	os With Noncharitab	le	
1 Did				e in any of the follow	ving with any o	ther organization describ	ed	["'	Yes No
						ction 527, relating to polit		11	क्ष्रीती :
	anizations				,	and a point		1.7	. 17.5
_		m the reporting found:	ation to a nor	ncharitable evernat	organization of	•		ľł	- <u>\$</u> .∤* · ·
		• •		· · · · · · · · · · · · · · · · · · ·	•			1:	
(1)	Cash .							1a(1)	<u>X</u> _
(2)	Other as	sets						1a(2)	X
b Oth	ier transa	ctions:							` . 3 k
(1)	Sales of	assets to a noncharita	ble exempt	organization				1b(1)	X
(2)	Purchase	es of assets from a no	ncharitable e	exempt organization				1b(2)	X
(3)	Rental o	f facilities, equipment,	or other ass					1b(3)	X
								1b(4)	X
(~) (E)	Loons	r loon augrantoos	'		• • • • • • • • • • • • • • • • • • • •				$-\frac{x}{x}$
(0)	Luaris or	i loan guarantees						1b(5)	
(6)	Perform	ance of services or me	embership or	tundraising solicita	tions			1b(6)	X
c Sha	aring of fa	scilities, equipment, ma	ailing lists, ot	ther assets, or paid	employees			1c	<u> </u>
d If th	he answe	r to any of the above is	s "Yes," com	plete the following s	schedule. Colur	nn (b) should always sho	w the fair market		
val	ue of the	goods, other assets, o	r services gi	ven by the reporting	foundation. If	the foundation received I	ess than fair market		
						the goods, other assets,			
(a) Lir		(b) Amount involved		of noncharitable exempt			ansfers, transactions, and sharing	arrangeme	nts
N/A			<u></u> _			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
,									
									
			<u> </u>						
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<u>-</u>									
		 							
		 	 			 			
			ļ			<u> </u>			
			ļ						
		 							
		ation directly or indirectly or indirectly or indirectly or indirectly of the				L			es X No
_b If"	'Yes," cor	nplete the following so	hedule.						
		a) Name of organization		(b) Type of or	ganization		(c) Description of relationship		
N/	Α			 					
				·	 -	 			
				 		 			
				 		 			
				 	·				
				<u> </u>					
							the best of my knowledge and bel	ief, it is tr	ie,
1	correct, a	ing complete. Declaration of	preparer (otner	tnan taxpayer) is based	on all information o	f which preparer has any knowle	May the IRS of	iscuss this	return
-			•				with the prepa		
}		\wedge .	// م				(see instruction	ıns)? X	Yes No
Sign		()a. 1/4	2/1/2000		1 7	111/12		=	
Here	-	Cury C	11000			(19/1)	PRESIDENT		
	Sign	nature of officer or trustee			Dat	е / т	ille		
	Print/T	ype preparer's name			Preparer's signal	ure	Date	e	
Paid		, 1t			,				Check i
	DENTA	IS E. KENLEY			DENNIS E	KENTEV	02/	13/13	self-employed
-		, DTDH	י דוגויזע מ	EV C BCCO		· Vanan			
Use On	ly Firm's		R KENL						2405
	Firm's			LL DRIVE)()			52525
		INDI	ANAPOL	IS, IN 40	6280		Phone no. 3:	<u> 17-58</u>	82-300
								Form C	90-PF (201
									,

1804 HOOVER FAMILY FOUNDATION 35-1873953 FYE: 6/30/2012		Federal Statements		2/11/2013
	Statement 1 - Form 990-PF	990-PF, Part I, Line 11 - Other Income	er Income	•
Description FOREIGN TAX REFUND TOTAL		Revenue per Books	Net Investment Income	Adjusted Net Income
15t	Statement 2 - Form 990-PF, F	Part I, Line 16b - Accounting Fees	unting Fees	
Description ACCOUNTING FEES PAYROLL PROCESSING FEES TOTAL	S 4,435 1,317 \$ 5,752	Net Investment \$	Adjusted Net	Charitable Purpose \$ 4,435 1,317 \$ 5,752
Stater	Statement 3 - Form 990-PF, Part	F, Part I, Line 16c - Other Professional Fees	ofessional Fees	
Description INVESTMENT MANAGEMENT FEES TOTAL	Fotal \$ 57,933	Net investment \$ 57,933 \$	Adjusted Net	Charitable Purpose
	Statement 4 - Form 990	orm 990-PF, Part I, Line 18 - 1	- Taxes	
Description EXCISE TAX PERSONAL PROPERTY TAX TOTAL	\$ 10,000 \$ 10,000	Net Investment	Adjusted Net	Charitable Purpose \$ 27 \$ 27

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Federal Statements

35-1873953 FYE: 6/30/2012 Statement 5 - Form 990-PF, Part I, Line 19 - Depreciation

	nent Adj	Income													8 0		Charitable Purpose	\$ 1,896 1,162 1,813
		Depreciation	φ			69			1,832	256	349	2,276	1,720	1,836	8,338 \$	Expenses	Adjusted Net	v _r
			7 \$	ſ	,	7	ഗ	ហ	ហ	ഗ	ιΩ	ഗ	ഹ	ī	ς,	Line 23 - Other Expenses	Net Investment	
		Method	S/L	1	S/L	S/L	S/L	S/L	S/L	S/L	S/L	200DB	200DB	200DB		orm 990-PF, Part I.	Total	\$ 1,896 1,162 1,813
	Prior Year	Depreciation	451		1,775	803	4,084	3,695	916	128	175				12,127	Statement 6 - Fo	}	w.
Description	Cost	Basis	451 \$		1,775	972	4,084	3,695	9,158	1,279	1,746	2,276	1,720	1,836	28,992 \$		tion	orions S
	Date	Acquired	2 DESK CHAIRS 8/31/98 S	\Box	6/28/99 Opetor Filentume	(1)	COMPUTER 6/07/06	(7)	\circ					COMPUTER EQUIPMENT 12/19/11	TOTAL		Description	EXPENSES DUES & SUBSCRIPTIONS OFFICE SUPPLIES ORGANIZATION FEES

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1804 HOOVER FAMILY FOUNDATION 35-1873953 FYE: 6/30/2012

(continued)	
ther Expenses	
t I, Line 23 - O	
m 990-PF, Par	
tatement 6 - For	
ัง	

Description	Total 5 749	Net Investment	Adjusted Net	Ch.	Charitable Purpose
PROPERTY & LIABILITY INSURANC REPAIRS & MAINTENANCE SECURITY SERVICE TELEPHONE	1,342 1,127 180 3,871				1,342 1,127 180 3,871
0,7	\$ 12,140	\$	\$	\$	12,140

Investments
Stock
- Corporate
ine 10b
픱
1 990-PF, Pa
7 - Form
Statement

Fair Market Value	144,206	447,705
Basis of Valuation	COST	COST
End of Year	144,240	428,268
Beginning of Year	\$ 21,717 \$ 24,491	7 6 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
Description	SS ES - 535 (SHARES) 200 SHARES CO - 200 (SHARES) HARES 120 SHARES 120 SHARES 120 SHARES 6 CO - 126 50000 SHARES A - 500 SHARES A - 500 SHARES 1 - 360 SHARES 1 - 360 SHARES CO SHARES 1 - 360 SHARES 1 - 360 SHARES CO SHARES 1 - 360 SHARES CO SHARES 1 - 360 SHARES CO SHARES 1 - 360 SHARES CO SHARES 1 - 360 SHARES CO SHARES 1 - 360 SHARES 1 - 360 SHARES 1 - 360 SHARES CO SHARES 1 - 360 SHARES 1 - 360 SHARES 1 - 360 SHARES 1 - 360 SHARES 1 - 360 SHARES 1 - 360 SHARES 1 - 360 SHARES 1 - 360 SHARES 1 - 360 SHARES 1 - 360 SHARES 1 - 360 SHARES 1 - 360 SHARES 1 - 360 SHARES 1 - 1136 SHARES	COLGATE PALMOLIVE CO - 225 SHARES COLUMBIA FDS ASIA - 38897.011 SHARES COMCAST CORP CL A - 500 SHARES CONOCOPHILLIPS - 500 SHARES CONSTELLATION ENERGY - 225 SHARES

Statement 7 - Form 990-P	F, Part II, Line 10b - Corporate Stock Investments (continued)	porate Stock Inve	stments (continue	. (pa
Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
BREN ASIA - 125000 SH	3,32	\$ 125,000	COST	\$ 138,375
CVS CAREMARK CORF - 785 SHARES DB BREN EEM - 125000 SHARES DELAWARE REM FIND - 10982 504 SHARES	79,66/	125,000	COST	131,009
DENDREON CORP - 300 SHARES DEVON ENERGY CORP - 250 SHARES	0,5	1 0 1	1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
DODGE & COX INTL - 15895.549 SHARES	29,83	3,4	COST	80,20
EDGEWOOD GROWTH - 25176.174 SHARES	2, on 9, 52	89,52	COST	398,602 324,521
EI DU PONT DE NEMOURS CO-1000 SHARES	6, 11 4, 13			
EMERSON ELECTRIC CO - 140 SHARES	7, 58			
EOG RESOURCES INC - 295 SHARES	42			
ORP - 9	3,37			
, , , , , , , , , , , , , , , , , , ,	3,19			
OC	0,50 3,77			
INC - 400 SHARES	9,87			
670 SF	9 1			
GLOBAL FAIMENIS INC - ZOO SHAKES GOLDMAN SACHS GROUP - 235 SHARES	0, 00 0, 00			
BREN EAFE - 150000 SHAF	50,00			
MID CAP -	00			
CONT BUFF EQ - ZSUUUU SHAR RTFOD CAPITAL APPRECIATION	20, UU	07.83	COST	84.90
OGE DYNAMIC - 9614.586	7,08	137,082	COST	154,218
L INC - 550 SHAR	22,54			
HOBO REN SFX - Z/3000 SHARES HUMANA INC - 220 SHARES	2/3,000 16,197			
400 SHARES	7,73		!	,
ISHAKES MSCI EAFE - 784Z SHAKES TSHARES MSCI IADDN - 2748Q SHARES		386,544 272 449	COST	391,786 258 671
SSELL MIDCAP - 18	154,048	54,04	COST	റെ
IVY GLOBAL - 6506.795 SHARES JOHN HANCOCK EMG - 13439.612 SHARES	43,28	154,690	COST	127,945

(continued)
porate Stock Investments
Line 10b - Cor
- Form 990-PF, Part II
Statement 7

Fair Market Value	69,47 84,11 98,69	276,705	322,727 397,664 544,459	572,651
Basis of Valuation	COST COST COST	COST	COST	COST
End of Year	72,98 34,29 02,14 72,54	275,000 275,000 659,943	429,839 413,693 549,641	549,075
Beginning of Year \$ 34,751 20,970 150,000	34,29 34,29 78,00 72,54	1 8 7 9 7 9 1 9 1 9 9 9 9 9 9 9 9 9 9 9 9 9	29, 83 12, 66 12, 66 48, 63 17, 40 63, 51 6, 25	0 60860114
NSON & JOHN NSON CONTRO BREN ASIA BREN EAFE	JEM BREN EAFE - 130000 SHAKES JPM INTREPID AMERICA - 10830.827 SHS JPM LG CAP- SEL FUND-20504.721 SHARE JPM MARKET EXPANSION - 19160.528 SHS JPM MID CAP GROWTH - 4942.703 SHARES JPM MID CAP-SEL FUND-14736.684 SHARE	QARN SPX - 275000 SHARES REN SPX - 300000 SHARES US-SEL FUND- 25601.173 SHZ ORGAN TAX AWARE - 35062.502 IPER NETWORKS INC - 875 SHZ LOGG CO - 125 SHARES RESEARCH CORP - 325 SHARES NAR CORP - 400 SHARES	R - 46368. R FUND - 2 CL A - 70 - 1500 SHA 75 SHARES - 20741.31 - 2738 SHAR	MS CONT BUFF EQ - 300000 SHARES NEUBERGER BERMAN - 55168.644 SHARES NEXTERA ENERGY INC - 250 SHARES NIKE INC B - 250 SHARES NORELLUS SYSTEMS INC - 175 SHARES OCCIDENTAL PERTOLEUM CO - 435 SHARES ORACLE CORP - 1200 SHARES PACCAR INC - 675 SHARES

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1804 HOOVER FAMILY F 35-1873953 FYE: 6/30/2012

Ū	Fair Market Value	\$ 83,121 538,031	160,553	241,631 576,677	314,476	133,206	124,811 124,163 265,693
stments (continued	Basis of Valuation	COST	COST	COST	COST	COST	COST COST COST
rporate Stock Inves	End of Year	\$ 73,004 546,054	155,144	161,880 533,893	306,805	156,245	130,420 130,000 228,698
F, Part II, Line 10b - Corporate Stock Investments (continued	Beginning of Year	4,08 2,90 5,56	11,512 20,376 49,306 8,933	0,00 7,99 1,92	786 087 788 194	38,780 18,780 32,612 9,469 11,013 10,480 32,068	1,94 0,57 0,59
Statement 7 - Form 990-PF	Description	PFIZER INC - 2500 SHARES POWERSHARES DB FUND - 3228 SHARES PRIMECAP ODYSSEY FUNDS - 35654.787	IAL - 4(S SHARES GROWTH : - 590 SE	SG BREN EAFE - 150000 SHARES SPDR GOLD TRUST - 1557 SHARES SPDR S&P 500 ETF - 4237 SHARES SPRINT NEXTEL CORP - 2950 SHARES	C - 225 SHARES - 300 SF - 20730. SHARES ING - 4C	TE CONNECTIVITY LID - 225 SHARES TIME WARNER INC - 1825 SHARES TYCO INTERNATIONAL LID - 500 SHARES UNITED TECHNOLOGIES CORP -605 SHARES UNITEDHEALTH GROUP INC - 250 SHARES US BANKCORP DEL - 700 SHARES VANGUARD MSCI - 3336 SHARES VERIFONE SYSTEMS INC - 200 SHARES VERIFON COMMUNICATIONS - 1046 SHARES WALT DISNEY CO - 800 SHARES	PANIES INC - - 700 SHARES NC - 600 SHA MUT FUNDS - T CRUDE - 13 ESTATE - 145

Federal Statements

35-1873953 FYE: 6/30/2012

7	Fair Market Value	\$ 10,532,028		Fair Market Value	υ,	385, 263	154,854	143,764	254,760	123,306	95,102	s <u>1,532,925</u>		Net FMV	\$ 8,527
stments (continued	Basis of Valuation		Investments	Basis of Valuation		COST	COST	COST	COST	COST	COST		nd Equipment	End Accumulated Depreciation	\$ 12,686 \$ 12,686
Part II, Line 10b - Corporate Stock Investments (continued	End of Year	\$ 10,410,130	0c - Corporate Bonc	End of Year	\$ 371,100	387,018	154,004	145,635	255,250	122,702	101,483	\$ 1,537,192	0-PF, Part II, Line 14 - Land, Building, and Equipment	End Cost / Basis	\$ 21,213 \$ 21,213
- 1	Beginning of Year	\$ 9,011,981	Statement 8 - Form 990-PF, Part II, Line 10c - Corporate Bond Investments	Beginning of Year	\$ 407,363	1,003,408	291,270 409,661 75,375	145, 635	75,189			\$ 2,956,589		Beginning Net Book	\$ 11,033 \$ 11,033
Statement / - Form 990-PF,	Description	TOTAL	Statement 8 - Form	Description	EATON VANCE MUT FUNDS - 48415.791 SH	SHORT DURATION BOND - 3508	DREYFUS/LAUREL FUNDS - 19062.191 SHS JPM INTL CURRENCY INCOME - 14167.77	C SEL -	м - 75000 S - 22787.1	ΰ		TOTAL	Statement 9 - Form 99	Description	TOTAL

35-1873953 FYE: 6/30/2012 **Federal Statements**

Statement 10 - Form 990-PF, Part III, Line 3 - Other Increases

Description	Amount	
STOCK FUND DIFFERENCE	\$39,8	57
TOTAL	\$ 39,8	57

Statement 11 - Form 990-PF, Part III, Line 5 - Other Decreases

Description	 Amount
PRIOR YEAR OUTSTANDING CHECKS THAT CLEARED	\$ 38,500
TOTAL	\$ 38,500

2/11/2013

2/11/2013

35-1873953

Federal Statements

FYE: 6/30/2012

Statement 12 - Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

Description

APPLICATION AND INFORMATION ARE AVAILABLE ON THE HOOVER FAMILY FOUNDATION WEBSITE HTTP://GOSW.ORG/HFF. A COPY OF THE GUIDELINES AND HOW TO APPLY INFORMATION ARE AVAILABLE ON THE WEBSITE.

Statement 13 - Form 990-PF, Part XV, Line 2c - Submission Deadlines

Description

PERIODIC APPLICATION DEADLINES ARE MARCH 1ST, JULY 1ST AND NOVEMBER 1ST.

Statement 14 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

SEE THE HOOVER FAMILY FOUNDATION WEBSITE FOR RESTRICTIONS AND LIMITATIONS ON AWARDS. HTTP://GOSW.ORG.HFF

Federal Statements

35-1873953 FYE: 6/30/2012

statement 15 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the

Name	Add	Address		,
Address	Relationship	Status	Purpose	Amount
ADALANTE MUJERES	2420 19TH A	3		,
FORT GROVE OR 97116		CHARITY		8,000
ALBERTINA KERR CENTERS	424 NE 22ND	AVE		
PORTLAND OR 97232	NONE	CHARITY		000′9
ALLIANCE FOR RESPONSIBLE PET O	OWNER 503 LOCKERBIE CIRCLE	E CIRCLE N DR		
INDIANAPOLIS IN 46202	NONE	CHARITY		2,000
ASPIRE INDIANA	9615 E 148TH	ST, STE 1		
NOBLESVILLE IN 46219	NONE	CHARITY		6,500
BETTER PEOPLE	3711 NE MLK	JR BLVD		
PORTLAND OR 97211		ΙX		7,500
BIG BROTHERS BIG SISTERS	1827 NE 44TF	44TH AVE, STE 100		
		CHARITY		7,500
BOONE COUNTY COMMUNITY CLINIC	404 W CAMP S	ST		
LEBANON IN 46052		CHARITY		6,550
BOSMA INDUSTRIES	8020 ZIONSVI	IONSVILLE RD		
INDIANAPOLIS IN 46268		CHARITY		10,000
BOYS & GIRLS AID SOCIETY	019 SW BOUNI	BOUNDARY CT		
PORTLAND OR 97239	NONE	CHARITY		2,000
BUTLER UNIVERSITY	4600 SUNSET	AVE		
INDIANAPOLIS IN 46208				10,500
CALDERA	224 NW 13TH	AVE BOX 304		
PORTLAND OR 97209	NONE	CHARITY		000'9
CAMP FIRE COLUMBIA	619 SW 11TH	AVE		
PORTLAND OR 97205		CHARITY		5,000
CAMPTOWN	5341 W 86TH	ST		
INDIANAPOLIS IN 46268	NONE	CHARITY		3,000
CHILDREN'S CANCER ASSOC	433 NW 4TH A	4TH AVE STE 100		
	NONE	CHARITY		5,000
CHILDREN'S CENTER FOR CLACKAMAS CO	S CO 1713 PENN LANE	AE.		
OREGON CITY OR 97045		CHARITY		7,500
CHILDREN'S MUSEUM	3000 N MER	DIAN ST		
INDIANAPOLIS IN 46208		CHARITY		3,000
CHILKENS KELLEF NOKSEKY	8423 LOMBAKI	E +		C C
PORTLAND OR 97203	NONE	CHARLT'Y		006'/

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FYE: 6/30/2012

35-1873953

5,000 2,000 10,000 15,000 10,000 Amount Statement 15 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Purpose Year (continued) COALITION FOR HOMELESS INTERVENTION 3737 N MERIDIAN ST #401 212 W 10TH ST, STE B260 Status CHARITY CHARITY CHARITY CHARITY CHARITY Address 502 N TREMOUNT 8902 E 38TH ST 604 E 38TH ST PO BOX 2620 Relationship NONE NONE NONE NONE COMMUNITY ALLIANCE FAR EASTSIDE INDIANAPOLIS IN 46208 INDIANAPOLIS IN 46205 COLLEGE MENTORS FOR KIDS INDIANAPOLIS IN 46202 INDIANAPOLIS IN 46222 CLACKAMAS SERVICE CENTER CLACKAMAS OR 97015 Address Name CHRISTAMORE HOUSE COBURN PLACE

10,000

3934 NE MLK BLVD, STE 202

CHARITY

NONE

INDIANAPOLIS IN 46226

COMMUNITY CYCLING CENTER

PORTLAND OR 97212	NONE	CHARITY	2,000
DAMAR SERVICES	v	6067 DECATUR BLVD	
INDIANAPOLIS IN 46241	NONE	CHARITY	2,000
DAY NURSERY	9	615 N ALABAMA ST, STE 300	
INDIANAPOLIS IN 46204	NONE	CHARITY	10,000
DE LA SALLE N CATHOLIC HIGH SCHOOL 7528 N FENWICK AVE	HOOL 7	528 N FENWICK AVE	
PORTLAND OR 97217	NONE	CHARITY	6,000
DIRTY DOZEN HUNTING AND FISHING		2415 E 39TH ST	
INDIANAPOLIS IN 46205	NONE	CHARITY	3,000
DOMESTIC VIOLENCE NETWORK	o	9539 N VALPARAISO CT	
INDIANAPOLIS IN 46268	NONE	CHARITY	7,500
DOVE RECOVERY HOUSE	7	14 N HIGHLAND AVE	
INDIANAPOLIS IN 46202	NONE	CHARITY	2,000
DRESS FOR SUCCESS OREGON	 1	1532 NE 37TH AVE	
PORTLAND OR 97232	NONE	CHARITY	8,000
DYSLEXIA INSTITUTE OF INDIANA	80	8395 KEYSTONE CROSSING	
INDIANAPOLIS IN 46240	NONE	CHARITY	15,000
ELDERS IN ACTION	Т	1411 SW MORRISON ST	
PORTLAND OR 97205	NONE	CHARITY	6,000
ETHOS	2	2 N KILLINGSWORTH AVE	
PORTLAND OR 97217	NONE	CHARITY	3,000

Federal Statements

FYE: 6/30/2012

Statement 15 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

	Amount	15,000		3,000	10,000		-1,000	7,000		3,000		10,000		000 -8		10,000		7,500		10,000		15,000		10,000	(((((((((((((((((((000's		000,01	10.000	000000000000000000000000000000000000000	5.040
ŀ	Purpose						SUMMER ENRICHMENT CAMP																	1	UR						
Address	Relationship Status	615 N ALABAMA ST #320 NONE CHARITY	1648 SH	ÄΕ	n	1615 S BART	!	105 SE TAYLOR ST, #205 NONE CHARITY	2440 W OHIO		4550 N ILLIN		3951 N MERII		1033 E WASHINGTON ST	NONE CHARITY	450 W OHIO ST	NONE CHARITY	950 N MERID	NONE CHARITY	615 N ALABAN	CHARITY	3901 N MERI	CHARITY	50 W FALL CREEK PKWY N	NE CHALKTY	9449 PRIORI	NONE SOLO E 38TH ST	1100	1620 NE BROZ] ;
Name	Address	FAMILIES FIRST INDIANA INDIANAPOLIS IN 46204	FELIGE HIYWOT CENTER	IN 46218		FOUNTAIN SQUARE ACADEMY		GIRLS INC NORTHWEST OR PORTLAND OR 97214	HAWTHORE SOCIAL SERVICE ASSOCIATION	INDIANAPOLIS IN 46222	HERITAGE PLACE	~	TAL	INDIANAPOLIS IN 46208	HORIZON HOUSE	OLIS	INDIANA HISTORICAL SOCIETY	INDIANAPOLIS IN 46202	IU SCHOOL OF OPTOMETRY		INDIANAPOLIS PARKS FOUNDATION	INDIANAPOLIS IN 46204	INFORMATION & REFERRAL NETWORK	INDIANAPOLIS IN 46208		TN 46208	OF CENTRAL	INDIANAPOLIS IN 46240	TNDTANDOLIS IN 46226	Z	PORTLAND OR 97232

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Statement 15 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)
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	Amount		10,000	5,000		4,500	5,000	-	3,000		3,000	6,000		10,000		1,000		12,000		7,000	0	3,000	7,500	•	2,000		7,500	0,000		000
	Purpose																													
Address	Relationship Status	1525 N RITTE	NONE CHAKLTY 605 NW COUCH ST		425 SE 6TH A	NONE CHARITY S 9911 SE MT SCOTT BLVD	ONE	6548 ORINOCO RD	NONE	8550 WOODFIE	NONE 941 E 86TH ST STE 107	CHARITY	426 SPRINGWO		911 E 86TH ST, STE 31		7701 E 21ST ST		2316 SE WIL		300 N GRAHAN	2	1430 SW BROADWAI #200 NONE CHARITY	6300 SW NICOL RD	NONE CHARITY	3934 NE ML	NONE CHARITY 3126 SF ANKFNY ST]	2124 N WILL]	
Name	Address	LY SERVICE	INDIANAPOLIS IN 46ZIG MACDONALD CENTER	<u>o</u>		PORTLAND OR 9/214 NORRISON CHILD & FAMILY SERVICES	OR 97220	MSD OF PERRY TOWNSHIP	INDIANAPOLIS IN 46227	TOWNSHIP	INDIANAPOLIS IN 46240	INDIANAPOLIS IN 46240		CARMEL IN 46032		S IN 46240	NOBLE OF INDIANA	IN 46219	VATIVES	:22			NORTHWEST FILDT FORUECT PORTLAND OR 97201	OREGON EPISCOPAL SCHOOL	97223	OMEN	PORTLAND OR 97212	PORTLAND OR 97214	ENTER	טוניניט מי מוגיי דשמימי

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FYE: 6/30/2012

Statement 15 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

	Amount		2,000	5,000		6,000	U 0	000 '6	6,400		8,000		9,000		6,380		10,000		10,000		6,000	•	8,000	1	005'/	0	3,000	0	10,000	000 7		3,000	
	Purpose																																
Address	Relationship Status	BOX 3300 NW 185TH #125	NONE CHARITY	3230 NE COLUMBIA BLVD NONE CHARITY	PO BOX 42610	ļ	4816 SE 92NI	NONE 2901 E BURNSIDE ST	NONE CHARITY	1200 E MADISON AVE #400		PO BOX 11620	NONE CHARITY	8604 ALLISONVILLE RD #248	NONE CHARITY	2815 E 65TH ST, STE 200	NONE CHARITY	1121 SOUTHEASTERN AVE	NONE CHARITY	PO BOX 1777		133 NW 6TH	NONE CHARITY	615 N ALABAN	NONE	2045 RAMA DE		901 SHELBY S	ZE 1114 OH	TEK //34 CAPITOL HWI NONE CAPITOL HWI	33 F 33RD C1		
Name	Address	PORTLAND ANIMAL WELFARE TEAM	PORTLAND OR 97229	PORTLAND TAIKO PORTLAND OR 97211	PORTLAND WOMEN'S CRISIS LINE	PORLAND OR 97242		PROJECT OUEST-CENTER	PORTLAND OR 97214	REACH OUT & READ		ROSE HAVEN	PORTLAND OR 97211	SAFE SITTER	INDIANAPOLIS IN 46250	SCHOOL ON WHEELS	INDIANAPOLIS IN 46220	SECOND HELPINGS	INDIANAPOLIS IN 46202	r_	OREGON CITY OR 97045	SISTERS OF THE ROAD	PORTLAND OR 97209	SOCIAL HEALTH ASSOC OF IN		SOCIEDAD AMIGOS DE COLUMBIA	INDIANAPOLIS IN 46219	SOUTH SIDE COMMUNITY SERVICES	INDIANAPOLIS IN 46203	SOUTHWEST COMMONITY HEALTH CENTER OF 07219	FORTHAND OR 9/219		

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35-1873953 FYE: 6/30/2012 Statement 15 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Relationship Status Purpose Amo	A Relatio 2 NONE 850 4 NONE 1912 84 NONE 620 NONE 1400 2 NONE 90 B NONE 333 4 NONE 3415 NONE 124 NONE 124 NONE 124 NONE 124 NONE 124 NONE 917 NONE 917 NONE 917		
NONE CHALLO CENTER SOID DR MIK JR ST	2 NONE 850 4 NONE 850 NONE 620 NONE 1400 2 NONE 333 4 NONE 3415 NONE 7500 NONE 7500 NONE 3910		Amount
INDIANAPOLIS IN 46204 NONE IN	4 NONE 850 4 NONE 1912 NONE 620 NONE 1400 2 NONE 333 4 NONE 3415 NONE 4500 NONE 4500 NONE 124 NONE 124 NONE 124 NONE 3910 NONE 3910 NONE 124		
INDIANAPOLIS IN 46204 NONE	4 NONE 1912 NONE 620 NONE 1400 2 NONE 90 B NONE 3415 NONE 4500 NONE 3910 NONE 124 NONE 124 NONE 124 NONE 917 NONE 917 NONE 917 NONE 917	FILOOR	10,000
ALMABLE URBAN NEIGHBORHOODS ALMABLE URBAN NEIGHBORHOODS LIEBRAK FOUNDATION BOOK STETH ANG, #1025 BORTLAND OR 97204 NONE INDIANAPOLIS IN 46202 NONE BOOK STETH ANG, #1025 CHARITY CHERITY BOERRE RALLERY NONE INDIANAPOLIS IN 46202 NONE CHARITY ASSOCIATIONO	HOODS HOONE ONNE CHARIT 620 SW FIFTH AVE, CHARIT 1400 N MERIDIAN SI CHARIT 333 N PENNSYLVANIT 3415 SE POWELL BLA CHARIT HOONE PO BOX 2 CHARIT A500 SW HUMPHREY E CHARIT A500 SW TI465 CHARIT 124 NE 181ST AVE NONE 124 NE 181ST AVE NONE LON 3910 SE STARK ST CHARIT INISTRIES PO BOX 11465 CHARIT 1 NONE 917 SW OAK ST #406 NONE NONE NONE CHARIT 1 NONE NONE NONE CHARIT CHARIT NONE NONE NONE NONE CHARIT ONONE NONE CHARIT CHARIT NONE NONE CHARIT CHARIT ONONE NONE CHARIT CHARIT NONE NONE CHARIT CHARIT ONONE ONONE CHARIT CHARIT CHARIT		8,000
HORTLAND OR 97211 NONE	NONE CHARIT 620 SW FIFTH AVE, NONE CHARIT 1400 N MERIDIAN SJ CHARIT 333 N PENNSYLVANIR 3415 SE POWELL BLV NONE CHARIT PO BOX 2 CHARIT PO BOX 2 CHARIT 124 NE 181ST AVE NONE CHARIT 124 NE 181ST AVE NONE CHARIT 124 NE 181ST AVE NONE CHARIT 1		•
DEBREAL FOUNDALILON CHARLTY CHARLTY	NONE	L C C C	6, 500
PEREZ ROJECT NONE ELECTRICAL ST. 1400 N MERIDIDAN ST. 1410 N MERIDIDAN ST. 1410 NONE ENDIANAPOLIS IN 46202 NONE MARKITURS CRALLERY MARKITURS OF 97036 NONE CHARITY CHARITY CHARITY CHARITY CHARITY NING INC NONE CHARITY CHAR	2 NONE 1400 N MERIDIAN ST 100NE NONE 333 N PENNSYLVANIA 3415 SE POWELL BLVD NONE PO BOX 153 NONE NONE 124 NE 181ST AVE NONE NONE 124 NE 181ST AVE NONE NONE 124 NE 181ST AVE NONE NONE 124 NE 181ST AVE CHARITY 124 NE 181ST AVE CHARITY 124 NE 181ST AVE CHARITY 1 NONE 1 CHARITY 1 NONE 1 NONE 1 CHARITY 1 NONE 1 CHARITY 1 NONE 1 CHARITY 1 NONE 1 CHARITY 1 NONE 1 NONE 1 CHARITY 1 NONE 1 CHARITY 1 NONE 1 CHARITY 1 NONE 1 CHARITY 1 NONE 1 CHARITY 1 NONE 1 CHARITY 1 NONE 1 CHARITY 1 NONE 1 CHARITY 1 NONE 1 CHARITY 1 NONE 1 CHARITY 1 NONE 1 CHARITY 1 NONE 1 CHARITY 1 NONE 1 CHARITY 1 NONE 1 CHARITY 1 CHARITY 1 NONE 1 CHARITY 1 NONE 1 CHARITY 1 CHARITY 1 NONE 1 CHARITY 1 C	1025	c
INDIANAPOLIS IN 46202 NONE CHARITY GEEZER GALLERY NONE 333 N PENNSYLVANIA ST 900 INDIANAPOLIS IN 46204 NONE CHARITY LIUM FAMILY SERVICES NONE 3415 SE POWELL BLVD PORTLAND OR 97202 HORNINGLY EN ANY OF JOHNSON CO HORNINGLY ROLL ON ONE CHARITY ROLL ON ONE STAIL CHARITY ROLL ON ONE CHARITY	2 NONE		000'0
CHARLITY	NONE NONE 333 N PENNSYLVANIA 3415 SE POWELL BLVD NONE PO BOX 153 CHARITY 4500 SW HUMPHREY BL CHARITY 4500 SW HUMPHREY BL CHARITY 124 NE 181ST AVE NONE NONE 124 NE 181ST AVE NONE 124 NE 181ST AVE CHARITY CHARITY 1 NONE 17 SW OAK ST #406 NONE NONE 1817 E 67TH ST NONE NONE NONE CHARITY CHARITY CHARITY CHARITY NONE NONE CHARITY CHARITY CHARITY CHARITY ONONE NONE CHARITY CHARITY CHARITY ONONE NONE CHARITY CHARITY		7,500
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1804 HOOVER FAMILY FOUNDATION 35-1873953 FYE: 6/30/2012		Federal Statements	S	2/11/2013
Statement 15 - I	Form 990-PF, Part X	V, Line 3a - Grants ar <u>Year (continued)</u>	Statement 15 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)	,
Name	Ac	Address		
Address	A A	Status	Purpose	Amount
CASCADIA BEHAVIORAL HEALTHCARE PORTLAND OR 97207 TOTAL	NONE 19TH AVE CHARITY	AVE CHARITY		694,520
				15

2/11/2013

35-1873953

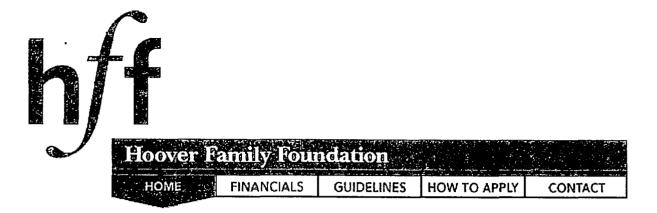
Federal Statements

FYE: 6/30/2012

Indirect Depreciation

Statement 16 - Form 4562, Line 6 - Section 179 Expense

Description of Property	 Cost	Expense			
COMPUTER EQUIPMENT COMPUTER EQUIPMENT	\$ 2,276 1,720	\$	2,276 1,720		
COMPUTER EQUIPMENT	 1,836		1,836		
TOTAL	\$ 5,832	\$	5,832		



The mission of the Hoover Family Foundation is to support non-profit organizations that foster the development of individual self-sufficiency. This intent is based on the community interest and volunteer involvement of the founders and major funders. The family believes that private sector

Our Mission:

The Hoover Family Foundation helps non-profit tax-exempt organizations in social service and education areas improve the quality of life for, and foster the self-sufficiency of, the individuals whom they serve.

groups can help the growth of individuals through valuesinfused education and human service support activities. Furthermore we believe that improving an individual's capabilities and circumstances is possible at any age.

The purpose of the funding is to provide direct services to individuals by supporting non-profit agencies efforts. These agencies also may need support to aid them in providing these services, or to improve their own functioning. Leveraging of the foundation's contributions through other community support to the grantee is highly encouraged.

The foundation board and staff have worked with grantmakers and grantseekers, both local and national, to improve the effectiveness of their own and other's philanthropic activities. All of the principals of the foundation are personally involved in building meaningful relationships with grantee organizations. Through our involvement we strive to increase community accomplishments and benefit.

The primary purposes of the charitable giving by the foundation are:

■ To increase the self-sufficiency and quality of life for individuals through enriched education and human service

assistance; and

■ To increase the ability of organizations to provide excellence in their commitment to the community.

Typically half of the grants are awarded for educational programs, one-quarter for social service programs and the other quarter provided assistance in both areas. Youth represented over half of the recipients of the funding while adults/seniors and all individuals were each less than a quarter. Many types of organizations received support. Human services, health, arts, youth and education were the most frequent recipients.

We are please to provide this Web site describing the foundation's contributions and financial information to our partner organizations, and in doing so we note with great pleasure the successes that they have achieved. Examples of the grants distributed are given, along with a list of all the grants made by location in the latest fiscal year.



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The Hoover Family Foundtation Web site was designed and produced by Jonathan Wills at Wills Design.



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Hoover Family Fo	0)114407312(8)18 66
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HOME FINANCIALS GUIDELINES HOW TO APPLY CONTACT

HFF History

For many years, members of the Hoover family in Indiana volunteered with and contributed to non-profit organizations dedicated to improving the quality of life of individuals. In recent years, these activities have been extended to the Portland, Oregon, metropolitan area. In order to more effectively continue these philanthropic endeavors the Hoover

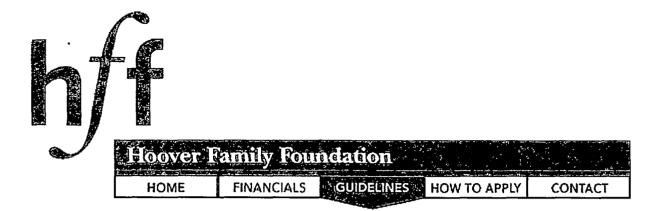
Family Foundation was established in 1992.

The Hoover Family Foundation was created in 1992 by James and Katherine Hoover. Significant additional funding was provided in 1995 through the estate of James' mother Mildred Mickel Hoover, whose husband, Truman Hoover, had been an executive in the pharmaceutical industry.

The main objective of the foundation is to support non-profit organizations that foster the development of individual self-sufficiency. This intent is based on the community interest and volunteer involvement of the founders and major funders. They believed that private sector groups could help the growth of individuals through values-infused education and human service support activities. They felt that improving an individual's capabilities and circumstances is possible at any age.

The purpose of the funding is to provide direct services to individuals by supporting non-profit agencies efforts. These agencies also may need support to aid them in providing these services, or to improve their own functioning. Leveraging of the foundation's contributions through other community support to the grantee is highly encouraged. The foundation funds programs in the Hoover family locations of Indianapolis, Indiana, and Portland, Oregon.

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GUIDELINES FOR GRANT APPLICATIONS

The Hoover Family Foundation was founded in 1992 to assist non-profit tax-exempt organizations in the social service and education areas to improve the quality of life and foster self-sufficiency. The foundation focuses on funding organizations located in and providing services to the residents of the metropolitan areas where the foundation is located -- Portland, Oregon and Indianapolis, Indiana.

Our guidelines are specific: Our Indiana location only funds organizations that provide services in and around Indianapolis. Our Oregon location only funds organizations that provide services within the Urban Growth Boundary of the Portland metropolitan area. (Click here for a map).

Our knowledge of organizations in these areas and the issues facing them is important to us, so we must stand by these geographic restrictions.

Priorities of Interest

- Organizations located and providing services in the Hoover family areas: Portland, Oregon (map), and Indianapolis, Indiana
- Programs that aid poverty level and minority groups
- Programs that foster individual/community self-sufficiency

- matograms manjosis mandady community seg sufficiency
- Effective providing of social services
- Improvement of educational opportunities at all levels

We do not make grants:

- To individuals
- For sectarian or religious purposes
- For capital campaigns
- For event funding
- For multi-year funding
- For college scholarships
- For lobbying or political purposes
- For medical research
- To private foundations or endowment funds
- In support of regular operating budgets
- To provide long-term funding or post-event funding

Evaluation of proposals is based on:

- Ability to fulfill a community need for an under-served population in Portland
- Feasibility and soundness of your implementation plan
- $\blacksquare A$ well-thought-out evaluation plan
- Viability of subsequent long-term funding

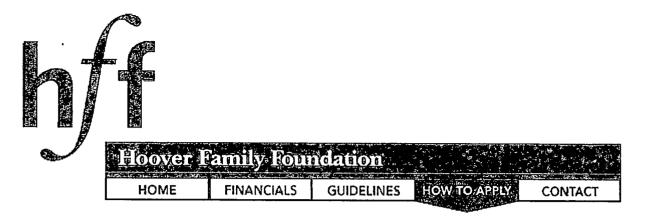
With limited resources and a large number of applications, the foundation is able to fund only a small portion of the

many worthwhile requests submitted. I hose constraints also limit the size of particular grants and the ability to fund on an annual basis.

Application Procedure

Application Deadlines

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<u>Application Procedure</u> <u>Application Deadlines</u>

Grant Application Steps

Step @

Prepare a cover sheet. For a PDF cover sheet click <u>here</u>. For a cover sheet in Word, click <u>Oregon</u> or <u>Indiana</u>, depending on which location you are applying to. The cover sheet includes the following:

- **■** Organization name
- **■** Date of application
- Phone and fax numbers
- E-mail and web site address
- Contact person in your organization
- Brief description of the proposed grant (2-3 sentences)
- Amount requested
- Signature of responsible officer of organization

Step 2

Answer the following questions in a response of three to seven

pages. Please note that we receive many applications that are too short and lack the detail sufficient for serious consideration.

- a) Describe how the proposed program/project will operate
- **b)** What are the basic needs and objectives to be met by this program/project? Include estimates of the number of people to be served.
- c) How does this project foster self-sufficiency for your participants?
- **d)** How does this proposed grant meet the foundations funding priorities?
- **e)** What measurable results/outcomes do you expect to report to the Hoover Family Foundation, and how will these results be measured? Be specific.
- f) Why is your organization the appropriate group to meet these needs and deliver these services? Include discussion of the organization's mission, history, staff strengths, etc.
- g) How will this effort be sustained when the Hoover Family Foundation funding ceases?
- h) What other funders are involved in the support of this effort?

Step 🚱

Attach all of the following items to the grant application:

- ☑ Proposed budget for the grant project, including both the overall project budget and the foundations portion of that budget
- ☑ Current fiscal year's operating budget
- Most recent audited financial statement or IRS 990
- ☑ List of organization's board of directors with affiliations
- ☑ Current 501(c)(3) letter of determination

Step 🕢

Evaluation of proposals is based on:

- ☑ Ability to fulfill a community need for an under-served population in Portland
- Feasibility and soundness of your implementation plan
- A well-thought-out evaluation plan
- □ Viability of subsequent long-term funding

With limited resources and a large number of appeals, the foundation is only able to fund a small portion of the many worthwhile requests received. Those constraints also limit the size of grants and the ability to fund on an annual basis.

Step

Mail three (3) collated copies of the entire completed application (including all attachments) to the appropriate foundation office. Grant requests for Oregon organizations go to the Oregon office, Indiana requests to the Indiana office. Faxes and emails will not be accepted. Please do not send videos or binders. Also do not drop off applications at the Oregon office. We cannot guarantee that the application will be received. Incomplete applications will not be considered.

OREGON

Hoover Family Foundation P.O. Box 594 Lake Oswego, OR 97034-1234

INDIANA

Hoover Family Foundation 860 East 86th Street, Suite 5 Indianapolis, IN 46240-1806

For a copy of the Post-Award Evaluation Form in Word, click here.

For a PDF copy of the Post-Award Evaluation Form, click <u>here</u>.

(Adobe Acrobat Reader is required to view and print this PDF.)

Application Deadlines

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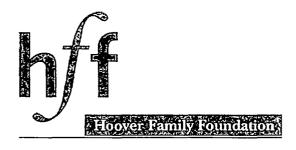


AMOUNT REQUESTED



ORGANIZATION		DATE	
MAILING ADDRESS	·	·	
CITY	STATE	ZIP	
CONTACT PERSON	TITLE		
PHONE	FAX		
EMAIL	WEB ADDRESS		
BRIEF DESCRIPTION OF THE PROPOSED GRANT			

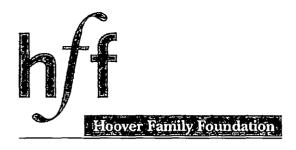
SIGNATURE
ATTACHMENTS
□ Proposal narrative (3–7 pages)
□ Recent audited financial statement or IRS 990
□ Proposed grant budget
□ Current year operational budget
☐ List of board of directors w/affiliation
□ Current 501(c)(3) letter
Please enclose THREE COPIES of the entire completed application including attachments.
Hoover Family Foundation (this address solely for grants requested in Oregon) P.O. Box 594
Lake Oswego, OR 97034-1234



<u>Grant Application Cover Sheet — Indiana</u>

(Click in the gray box and begin typ	ping. The gray will not show when printed.)
Organization	
Contact person	
Title	
Street address (or PO Box number)	
City	
State	
Zip	
Phone number(s)	
Fax number	
Email of contact person	
Date	
Brief description of the proposed grant	
Amount requested	
Signature	
Date	
<u>Attachments</u>	
Proposal narrative (3-7 pages)	
Recent audited financial stateme	ent or IRS 990
☐ Proposed grant budget	

] Current year operational budget	
List of board of directors with affiliation	
Current 501(c)(3) letter	
lease enclose THREE COPIES of the entire completed application including attachments	
lease enclose THREE COPIES of the entire completed application including attachments his address only for grants requested in Indiana:	•
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his address only for grants requested in Indiana:	•

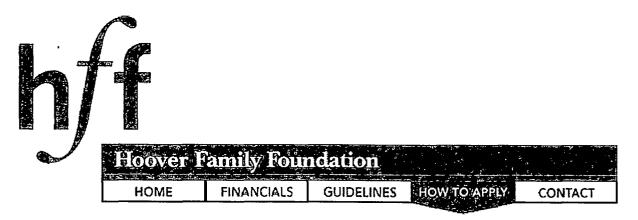


<u>Grant Application Cover Sheet — Oregon</u>

(Click in the gray box and begin ty	ping. The gray will not show when printed.)
Organization	
Contact person	
Title	
Street address (or PO Box number)	
City	
State	
Zip	
Phone number(s)	
Fax number	
Email of contact person	
Date	
Brief description of the proposed grant	
Amount requested	
Signature	
Date	
Attachments	
Proposal narrative (3-7 pages)	
Recent audited financial statem	ent or IRS 990
Proposed grant budget	

Current year operational budget
List of board of directors with affiliation
☐ Current 501(c)(3) letter
Please enclose THREE COPIES of the entire completed application including attachments.
This address only for grants requested in Oregon: Hoover Family Foundation P.O. Box 594 Lake Oswego, OR 97034-1234

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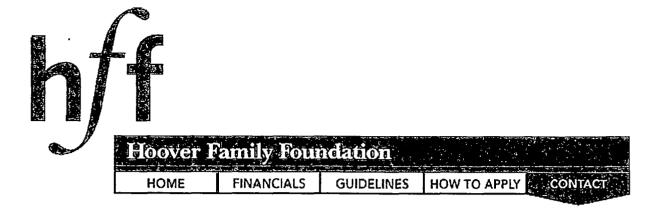


Application Deadlines Application Procedure

Application Deadlines

Grant applications are reviewed three times each year. Completed proposals must be received by or postmarked by the following dates: July 1, November 1 or March 1.

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For more information about the Hoover Family Foundation, contact the office appropriate for your location. **Do not** contact the Indiana office if you are inquiring about grants in Oregon, or vice versa.

Please note that the Oregon office **only** accepts applications from the Portland metropolitan area and the Indiana office **only** accepts applications for their area.

Please refer to this <u>map</u> to clarify the Portland service area. Applications from outside this area are not accepted.

OREGON

Hoover Family Foundation P.O. Box 594 Lake Oswego, OR 97034-1234

Attn: Glen Friedman, Executive Director, Oregon 503-699-1363

INDIANA

Hoover Family Foundation 860 East 86th Street, Suite 5 Indianapolis, IN 46240-1806

Attn: Dave Hoover, Executive Director, Indiana 317-815-9553

To download a copy of the Post-Award Evaluation Form in Word, click <u>here</u>.

For a PDF copy of the Post-Award Evaluation Form, click here.

(Adobe Acrobat Reader is required to view and print this PDF.)

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The Hoover Family Foundation Web site was designed and produced by Jonathan Wills at $\underline{\text{Wills Design}}$.

Department of the Treasury

(99)

Depreciation and Amortization

(Including Information on Listed Property)

► See separate instructions.

► Attach to your tax return.

OMB No 1545-0172

Attachment Sequence No 179

Internal Revenue Service Name(s) shown on return

Identifying number

	HOOVER	FAMILY FOU	NDATION				<u> </u> 35-	<u> 1873</u>	3953
	is or activity to which this form relates	TON				-			
	DIRECT DEPRECIAT		onte Heden C-	ation 470					
Pa	•	•	•			oto Dom			
	Note: If you have a		, complete Pai	t v belore you	ı compi	ete Part	·		500 000
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3	•	•	-					3	2,000,000
4	Reduction in limitation. Subtract li				h			5	500,000
5	Dollar limitation for tax year Subtract III (a) Description		ir iess, enter -u ii ma	(b) Cost (business us			lected cost	-	300,000
6	SEE STATEMENT 1		<u>-</u>		5,832	(6)		832	
	SEE STATEMENT I	<u> </u>			7,032	 -		032	
7	Listed property. Enter the amount	from line 20			7	 			
8	Listed property Enter the amount Total elected cost of section 179 p		to in column (a) lu	oo 6 and 7		Ļ		8	5,832
9	Tentative deduction. Enter the sm	, ,	• • •	ies 6 and 7				9	5,832
9 10	Carryover of disallowed deduction							10	3,032
11				o than mara\ or li	E /		\	11	0
12	Business income limitation. Enter Section 179 expense deduction. A			•	ne 5 (5ee	HISHUCKOI	15)	12	0
13	Carryover of disallowed deduction				▶ 13	T	5	832	
	Do not use Part II or Part III below				13	<u> </u>		022	<u></u>
	rt II Special Depreciat				not inc	dude liste	nd prope	rty \ /	See instructions)
14	Special depreciation allowance fo					Jude liste	a prope	1 ty./	See maddonona)
,~	during the tax year (see instruction		otilei tilali listeu pi	operty) placed in	Service			14	
15	Property subject to section 168(f)							15	
16	Other depreciation (including ACF							16	2,506
	rt III MACRS Depreciat		ide listed propi	erty) (See ins	truction	e 1		10	2,300
	it it in Act to Deprecia	HOT (BO HOT IIICK		ion A	ucuoi				· <u> </u>
 17	MACRS deductions for assets pla	ced in service in tax						17	0
18	If you are electing to group any assets place				harli bara				
		Assets Placed in Se					eciation S	vstem	
		(b) Month and year	(c) Basis for depre				1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(a) Classification of property	placed in service	(business/investment only-see instruct	tuse i	· /e\	Convention	(f) Meth	od	(g) Depreciation deduction
 19a	3-year property	Service	Gray-See Instruct		_		 		
b	5-year property	†		 -	_		 		
	7-year property	-					<u> </u>		
	10-year property	†			_		 		
	15-year property	┪					 		
c	20-year property	-[
	25-year property	-{		25 yr			S/L		
<u>g</u>	Residential rental		1	25 yr		MM	S/L		
41	property			27.5 y		MM	S/L		
	Nonresidential real	 	 			MM	S/I		
,	property		 	39 yr	<u>». </u>	MM	S/L		
		ssets Placed in Serv	vice During 2011	Tay Year Using	the Alter				m
200		1]	Tux Teal Osing	The Alter	TIGHTO DO			<u>"</u>
20a		┪	<u> </u>	12 10			S/I		
	12-year	 	 	12 yr		MM	S/I		
	40-year	etructions)		40 yr	<u>s. </u>	IVIIVI		<u> </u>	L
	art IV Summary (See ins							24	
21	Listed property. Enter amount fro		lmaa 40 1 20 '-		Ima 04 :	C-4		21	
22	Total. Add amounts from line 12	-				Enter nere			2,506
00	and on the appropriate lines of yo				Lions			22	2,300
23	For assets shown above and place			enter the		. [
_	portion of the basis attributable to				23				Form 4562 (2011)
FOr	Panerwork Requesion Act Notice	:. see separate instr	ucuons.						Earm 430 / /2011)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

New January 2012	,								
Department of the Traternal Revenue Se		▶ File a	separate a	pplication for each return.					
		itomatic 3-Month Extension, complet	e only Part	I and check this box		•	X		
		ditional (Not Automatic) 3-Month Ext			form).	•			
		less you have already been granted an							
Electronic filir	ng (e-file). Yo	ou can electronically file Form 8868 if yo	u need a 3-i	month automatic extension of time to f	ile (6 months for				
a corporation r	equired to file	Form 990-T), or an additional (not auto	matic) 3-mo	onth extension of time. You can electro	nically file Form				
-		n of time to file any of the forms listed in		' ' '					
Return for Trar	nsfers Associa	ated With Certain Personal Benefit Conf	tracts, which	n must be sent to the IRS in paper form	nat (see				
		ils on the electronic filing of this form, vi							
Part I		c 3-Month Extension of Time.							
=	equired to file	Form 990-T and requesting an automa	itic 6-month	extension-check this box and complet	е				
Part I only						•	▶ ∐		
		ding 1120-C filers), partnerships, REMIC	S, and trust	ts must use Form 7004 to request an e	extension of time				
to file income t	ax returns.								
				Enter filer'	s identifying num				
Type or		empt organization or other filer, see inst	ructions.		Employer identification number (EIN) of		N) or		
print	V17801	R FAMILY FOUNDATION			 당 3도_107	1070050			
File by the due date for			:		X 35-187				
filing your		eet, and room or suite no If a P.O. box 86TH STREET	, see instruc	ctions. 5	Social security i	iumber (SSN)			
return See			foreign add		<u> </u>				
instructions	-	City, town or post office, state, and ZIP code For a foreign address, see instructions. INDIANAPOLIS IN 46240							
	1110111		10210						
Enter the Retu	rn code for th	e return that this application is for (file a	separate a	pplication for each return)			04		
Application			Return	Application		Re	eturn		
ls For			Code	ls For	C ₁	ode			
Form 990			01	Form 990-T (corporation)			07		
Form 990-BI	L		02	Form 1041-A			08		
Form 990-E	Z		01	Form 4720			09		
Form 990-P	<u> </u>		04	Form 5227	·		10		
Form 990-T	(sec_401(a)	or 408(a) trust)	05	Form 6069	···		11		
Form 990-T	(trust other th	an above)	06	Form 8870			12		
		HOOVER FAMILY FOUNDATE							
		• • • · · · · · · · · · · · · · ·	JITE 5						
 The books a 	are in the care o	f ► INDIANAPOLIS			3	N 46240			
		- 01- 00		_					
•		.7-815-9553	FAX No						
_		not have an office or place of business					▶ ∐		
		turn, enter the organization's four digit (f this is				
for the whole of	• • •	_	the group,	check this box .	ach				
		Ns of all members the extension is for.							
		c 3-month (6 months for a corporation r							
		to file the exempt organization retu	rn for the or	ganization named above. The extension	on is				
	organization's								
▶ [_]	calendar year	r or							
⊾ ₩	4au uaaa ba = 5	nning $07/01/11$, and ending (06/30/	12					
		d in line 1 is for less than 12 months, ch	eck reason.	Initial return Final return	1				
		ounting period or Form 990-BL, 990-PF, 990-T, 4720, c	* 6060	or the tentature toy less and					
3a If this ag	ppiication is it	ル t いけけ ききい・レト, ききい・ドド, ききい・1 , 4/20, (/ 0005, BILL	er me temanye tax, tess ally	1 1				

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

EFTPS (Electronic Federal Tax Payment System). See instructions.

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and

c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using

estimated tax payments made. Include any prior year overpayment allowed as a credit.

nonrefundable credits See instructions.

0

0

<u>3a</u>

3b