

### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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	caler	ndar year 2012 or tax year beginning	, 201	2, and ending		, 20
Na	me of fo	oundation MCC	1 +	A Employer	identification numbe	- ~
	<u>ه د</u>	hn h // Cormick //em.	Trust	20-	-62856	18
Nu	mber an	d street (or P O box number if mail is not delivered to street address)	Room	/suite B Telephone	number (see instructio	ns)
		902-35 Ave. South		701-	237-69	83
City	y or tow	n, state, and ZIP code	(100	C If exemp	tion application is pend	ling, check here ▶
		+argo, N. Dak. 58	103			_
G	Check	call that apply: ИП Иnitial return ☐ Initial return	of a former public	charity D 1. Foreig	n organizations, check	here ▶ 🔲
		☐ Final return ☐ Amended r	return	2 Foreig	n organizations meetin	a the 85% test
		Address change  Name char	-		here and attach compi	
		type of organization: Section 501(c)(3) exempt p		section 5	foundation status was 07(b)(1)(A), check here	
	Section	on 4947(a)(1) nonexempt charitable trust   Other tax	able private found	lation	or (b)(1)(A), check here	<b>-</b> L
		narket value of all assets at   J Accounting method	Cash 🗌 A	ccrual F If the fou	ndation is in a 60-mont	h termination
		f year (from Part II, col. (c),			ction 507(b)(1)(B), chec	
		5) ► \$ 3,492, 226 (Part I, column (d) must be	on cash basis )			
P	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books	income	income	purposes
		the amounts in column (a) (see instructions) )	200.13			(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)		· · · - · · · · · · · · · · · · · · · ·		
	2	Check ► ☐ If the foundation is <b>not</b> required to attach Sch. B				
	3	Interest on savings and temporary cash investments	1780	1780	1780	
	4	Dividends and interest from securities .	54,869	54,869	54,869	
	5a	Gross rents	•			
-	b	Net rental income or (loss)	1			
Revenue	6a	Net gain or (loss) from sale of assets not on line 10	178,162		-	!
Э	_b	Gross sales price for all assets on line 6a 434, 395	•	100110		
è	7	Capital gain net income (from Part IV, line 2)		118,162	10000	
ш.	8	Net short-term capital gain		· · · · · · · · · · · · · · · · · · ·	18,857	
	9	Income modifications				
	10a	Gross sales less returns and allowances		· - · · · · ·		-
	b	Less: Cost of goods sold			<del></del>	
	11	Gross profit or (loss) (attach schedule)  Other income (attach schedule)	П(ДП	11104	LIGH	
	12	Total. Add lines 1 through 11	238,995	72000	79 (9)	
_	13	Compensation of officers, directors trustees, etc.	-A-Jo, 17.5	778 <sup>1</sup> 112	17,670	
es	14	Other employee salaries and wages RECEIVED				<u> </u>
Su	15	Pension plans, employee benefits			· · · · · · · · · · · · · · · · · · ·	
Expenses	16a	Legal fees (attach schedule)	18			
Щ	b	Accounting fees (attach schedule)				
<u>v</u>	C	Other professional fees (attach schedule)	<del>-</del>			
at	17	Other professional fees (attach sehedule) Interest				
Operating and Administrative	18	Taxes (attach schedule) (see instructions) . Excise	1056	1056	1056	1056
Ë	19	Depreciation (attach schedule) and depletion .			, <u> </u>	<del> </del>
d	20	Occupancy				· · · · · · · · · · · · · · · · · · ·
٧	21	Travel, conferences, and meetings				
anc	22	Printing and publications				
ğ	23	Other expenses (attach schedule)				
iţi	24	Total operating and administrative expenses.				
əra		Add lines 13 through 23	1056	1056	1056	1056
ğ	25	Contributions, gifts, grants paid	139,000			139,000
_	26	Total expenses and disbursements. Add lines 24 and 25	140,056	1056	1056	140.056
	27	Subtract line 26 from line 12				
	а	Excess of revenue over expenses and disbursements	98839			
	b	Net investment income (if negative, enter -0-)	' /	237,939		
		Adjusted net income (if negative, enter -0-)		1	78,634	
For	Paper	work Reduction Act Notice, see instructions.	Cat No	11289X	Fc	rm <b>990-PF</b> (2012)

SCANNED MAY 2 8 2013

Part II		Balance Sheets Attached schedules and amounts in the description column		Enc	of year
	كبتوس	Balance Sheets Attached schedules and amounts in the description column 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			
	2	Savings and temporary cash investments	317 470	276, 888	276,888
Ì	3	Accounts receivable ►			1 7
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Pledges receivable ►			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions) .			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less. allowance for doubtful accounts ▶			
ts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ą	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments – corporate stock (attach schedule)			
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments – mortgage loans			
	13	Investments—other (attach schedule)	3,003,397	3.142.819	3 215 338
	14	Land, buildings, and equipment: basis ▶	1 -1	<del>,,</del>	
		Less. accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ▶ )			
	16	Total assets (to be completed by all filers-see the		·· -	2 1:21 2 4
		instructions Also, see page 1, item I)	3 320.867	3.419.70L	. 3,442,226
	17	Accounts payable and accrued expenses	7	<del>-, , , , , -</del>	, , , , , , ,
ß	18	Grants payable			
ţį	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ia	21	Mortgages and other notes payable (attach schedule) .			
_	22	Other liabilities (describe ▶ )			
	23	Other liabilities (describe ► )  Total liabilities (add lines 17 through 22)			
ß		Foundations that follow SFAS 117, check here			
Balances		and complete lines 24 through 26 and lines 30 and 31.			
an	24	Unrestricted			
3al	25	Temporarily restricted			
70	26	Permanently restricted			
5		Foundations that do not follow SFAS 117, check here ▶ □			
F		and complete lines 27 through 31.		. 9	
Net Assets or Fun	27	Capital stock, trust principal, or current funds	3,320,867	3.410.700	2
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund		, , , , ,	
SS	29	Retained earnings, accumulated income, endowment, or other funds			
t A	30	Total net assets or fund balances (see instructions) .	3,320,867	3.410.700	2
Ne	31	Total liabilities and net assets/fund balances (see	2 2 2 2 2 2 2	2 (2 2	
	<u> </u>	instructions)	3 320 867	3,419,100	>
	rt III	Analysis of Changes in Net Assets or Fund Balances		,	
1		I net assets or fund balances at beginning of year—Part II, colu	mn (a), line 30 (mus	<u> </u>	
		of-year figure reported on prior year's return)		· · <u>1</u>	3320,867
2		r amount from Part I, line 27a		. 2	7 98 839
3		er increases not included in line 2 (itemize)		3	
4		lines 1, 2, and 3		<u>4</u>	13,419,706
5	Decr	reases not included in line 2 (itemize)   I net assets or fund balances at end of year (line 4 minus line 5)—		5	
6	Гota	net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), li	ne 30 . <b>6</b>	13,419,706
					Form <b>990-PF</b> (2012)

Part	V Capital Gains and I	Losses for Tax on Investr	ment Income			
		kind(s) of property sold (e g , real estate, or common stock, 200 shs MLC Co		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a		, , <u>, , , , , , , , , , , , , , , , , </u>				
b	See ATT	ached Ex A	•			
С						
d						
e						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		n or (loss) (f) minus (g)
a_						
b						
С						
d						
е						
	Complete only for assets show	ing gain in column (h) and owned	by the foundation	on 12/31/69	(I) Gains (Co	I (h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any		t less than -0-) <b>or</b> from col (h))
a		LT Mo	reen Sta	nley	15	9.305
b		ST /	tean Sta	ulev	1	81 857
С			0		_	-
d					•	
е						
2	Capital gain net income or (		also enter in Pa ), enter -0- in Pai		2 /-	18/62
3		or (loss) as defined in section: line 8, column (c) (see instru				18,162 8,857
	Part I, line 8 .	<u> </u>			3	<u>8,85 /                                    </u>
Part	V Qualification Under	r Section 4940(e) for Red	uced Tax on N	let Investment	Income	1
Was tl	s," the foundation does not q	ection 4942 tax on the distribition ualify under section 4940(e). [	Do not complete	this part.		☐ Yes ☐ No
_1_		nt in each column for each ye	ear; see the instru	uctions before m	akıng any entries.	
Cale	(a) Base period years Indar year (or tax year beginning in)	(b) Adjusted qualifying distribution	ns Net value of	(c) f noncharitable-use a		(d) tribution ratio divided by col (c))
	2011				•	
	2010					
	2009					
	2008					
	2007					
2	Total of line 1, column (d)				_2_	
3	•	or the 5-year base period—div		• •	the	
	number of years the founda	ition has been in existence if I	ess than 5 years		3	
4	Enter the net value of nonch	naritable-use assets for 2012	from Part X, line	5	. 4	
5	Multiply line 4 by line 3				. 5	<u> </u>
6	Enter 1% of net investment	income (1% of Part I, line 27)	b)		6	
7	Add lines 5 and 6				. 7	
8	Enter qualifying distribution	s from Part XII, line 4 er than line 7, check the box i	 In Part VI line 1h	and complete	8 sthat part using a 1	1% tax rate See the
	Part VI instructions	or that into 1; officer the beat		, and complete	part doming a	, o tax rate coo thi

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	instr	uctio	ns)	
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	b Domestic foundations that meet the section 4940(e) requirements in Part V, check				
	here ► □ and enter 1% of Part I, line 27b	_			
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-)				
3	Add lines 1 and 2	47.	59		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	<u>47</u>	<u>59                                    </u>	<u> </u>	
6	Credits/Payments:		•		
а	2012 estimated tax payments and 2011 overpayment credited to 2012 6a				
b	Exempt foreign organizations—tax withheld at source 6b				
C	Tax paid with application for extension of time to file (Form 8868)  6c				
_d	Backup withholding erroneously withheld				
7	Total credits and payments. Add lines 6a through 6d				
8	Enter any penalty for underpayment of estimated tax. Check here  if Form 2220 is attached	11.7	~		
9		475	<u> </u>		
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . ▶ 10 Enter the amount of line 10 to be: Credited to 2013 estimated tax ▶ Refunded ▶ 11				
Part				<u> </u>	
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	T	Yes	No	
	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		1		
	Instructions for the definition)?	1b		سا	
	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				
С	Did the foundation file Form 1120-POL for this year?	1c		1	
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		V	
3	If "Yes," attach a detailed description of the activities  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		V	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		L	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		-	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	<u> </u>		
	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 remain in the governing instrument?		<del></del> -	اــــا	
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	6	<u> </u>	<del> </del>	
7 8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	<del>  '</del>	1	l i	
Ja	the states to which the foundation reports of with which it is registered (see instructions)				
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) of each state as required by General Instruction G? If "No," attach explanation .	8b	V	$\vdash$	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		+-		
3	4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes,"		1	'	
	complete Part XIV	9		レ	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		ļ -	<u> </u>	
	names and addresses	10		1	

"Part	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		~
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		-
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	~	
11	Website address ►  The books are in care of ► Maurice McCalmick Telephone no ► 701-		~~~~	901
14	The books are in care of $\blacktriangleright$ Maurice McColmick Telephone no $\blacktriangleright$ 701- Located at $\blacktriangleright$ 218 M.P. Ave., $7argo$ NS ZIP+4 $\blacktriangleright$ 58	43	. <i>].::\4</i>	2.7.8.2
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here.  and enter the amount of tax-exempt interest received or accrued during the year			▶ □
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority	<del></del>	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	<u>L</u>	Ļ
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of the foreign country ▶			
Pari	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<u> </u>
I all	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? .			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes  (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes  (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)			
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	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, that were not corrected before the first day of the tax year beginning in 2012?	1c		~
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions)	01-		<u> </u>
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	2b		
2-	▶ 20 , 20 , 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	†		
Ja	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2012.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		-
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b		

Form	990-PF	(2012)

٠.		_	4	٥
-a	a	е		О

55 During the year did the foundation pay or incur any amount to.  (1) Carry on propagands, or otherwise attempt to influence legislation (section 4945(e))?	<sup>•</sup> Part	t VII-B Statements Re	garding Activities f	for Which Form	4720 May Be I	Require	ed (contin	ued)			
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration driver?  (3) Provide a grant to an individual for travel, study, or other similar purposes?   Yes   No (4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(b)(2); see instructions)   Yes   Pho (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelly to children or animals?   under the exceptions described in Regulations section 53,4945 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance check here   Sb    Organizations relying on a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  If Yes, "attach the statement required by Regulations section 53 4945-5(d).  Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If Yes," to 65, file Form 8870.  Ta At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?   Yes   Pho    If Yes," do the foundation receive any proceeds or have any net income attributable to the transaction?  Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  I List all officers, directors, trustees, foundation managers and their compensation (see instructions).  If yes, "do the foundation receive any proceeds or have any net income attributable to the transaction?  Thus, and Contractors  Thus, and Contractors  Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000   (b) This, and everage b	5a	During the year did the found	dation pay or incur any	y amount to.	<del>-</del>				1 7		
directly or indirectly, any voter registration drive?  (3) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(b)(2)? (see instructions)   ves   PNo   (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  (b) If any answer is "Yes" to Sa(1)-(5), did any of the transactions fall to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  If "Yes," attach the statement required by Regulations section 53.4945–5(d).  But the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes," attach the statement required by Regulations section 53.4945–5(d).  But the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes," to bi, the Form 8870.  At any time during the tax year, was the foundation aparty to a prohibited tax shelter transaction?  It is all officers, directors, trustees, foundation managers and their compensation (see instructions).  It is all officers, directors, trustees, foundation managers and their compensation (see instructions).  It is all officers, directors, trustees, foundation managers and their compensation (see instructions).  It is all officers, directors, trustees, foundation managers and their compensation (see instructions).  If the provided to position and delivered compensation of the provided to position and delivered compensation of the provided provided to position (see instructions).  If the provided in the provided provi		(1) Carry on propaganda, or	otherwise attempt to	influence legislatio	on (section 4945(	∍))? .	☐ Yes	<b>U</b> No			
(3) Provide a grant to an individual for travel, study, or other similar purposes?   ve   No   (4) Provide a grant to an organization other than a charitable, etc., organization described in section 599(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)   ves   BNo   (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?   ves   No   b   fany answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?   Organizations relying on a current notice regarding disaster assistance (see instructions)?   Organizations relying on a current notice regarding disaster assistance (see instructions)?   Organizations relying on a current notice regarding disaster assistance (see instructions)?   If "Yes," attach the statement required by Regulations section 53.4945-5(d).   Did the foundation, during the year, esceive any funds, directly or indirectly, to pay premiums on a personal benefit contract?   Did the foundation during the year, was the foundation a party to a prohibited tax shelter transaction?   ves   PNo   Did the foundation receive any proceeds or have any net income attributable to the transaction?   Tax A larny time during the tax year, was the foundation aparty to a prohibited tax shelter transaction?   ves   PNo   Did the foundation receive any proceeds or have any net income attributable to the transaction?    It is all officers, directors, trustees, foundation managers and their compensation (see instructions).    (a) Name and address   Ves   V		(2) Influence the outcome o	f any specific public e	election (see secti	on 4955), or to c	arry on,	,		İ		
(3) Provide a grant to an individual for travel, study, or other similar purposes?  (4) Provide a grant to an originatation other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)  (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelity to children or animals?  (6) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelity to children or animals?  (7) If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance check here  c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53.4945-5(d).  But the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes" to 6b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?    Ves Proposition   P		directly or indirectly, any	voter registration drive	e?			□Yes	WNo			
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3) or section 490(a)(2) (see instructions)  (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelity to children or animals?  (b) If any answer is "Yes" to 56(1)-(5) (do any of the transactions fall to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?  (c) If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  (d) If "Yes," attach the statement required by Regulations section 53.4945-5(d).  (a) Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  (b) Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  (c) If "Yes," to 60, file Form 8870.  (d) The the dividence of the foundation receive any proceeds or have any net income attributable to the transaction?  (e) Expense account.  (f) The previous process of the foundation aparty to a prohibited tax shelter transaction?  (e) The previous process of the foundation about Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  (a) Name and address of each employee paid more than \$50,000  (b) Tite, and average hours possible of the properties and deferred compensation (ci) Compensation		(3) Provide a grant to an ind	vidual for travel, study	v. or other similar i	ournoses?		=	= .			
section 509(a)(1), (2), or (3), or section 494(d)(2)? (see instructions)  (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  b if any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance check here  c if the answer is "Yes" to question 53(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  c if the answer is "Yes" to question 53(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  d if "Yes," attach the statement required by Regulations section 53.495–5(d).  D id the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes" to 8b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? \[ Yes \] Yes \[ \]						ribed in				ļ	
(5) Provide for any purpose other than religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelity to children or animals?    Yes   No								12 No		- 1	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance check here  of the nanwer is "Yes" to question 53(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53.4945–5(d).  6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes" to 6b, file Form 8870.  7a At any time during the year, was the foundation a party to a prohibited tax shelter transaction? Yes Prob  b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  (b) Title, and average devoted to position (organization) and deferred compensation (their allowances)  Trustee  O  C  C  Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, ente "NONE."						cational		<u></u>	1 1	1	1
b If any answer is "Yes" to 5a(1)+(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  of if the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53.4945–5(d).  But the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  T At at mine during the tax year, was the foundation a party to a prohibited tax sheller transaction?  T At the foundation receive any proceeds or have any net income attributable to the transaction?  T at I information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  (b) Title, and average (i) Compensation (d) Contributions to employee benefit plan and deferred compensation (e) Com			_		•		_	WNO	1 1		
Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance check here  if the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53 4945–5(d).  But the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes," to 6b, file Form 8870.  At any time during the year, was the foundation a party to a prohibited tax shelter transaction?  Per Will Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  (b) Title, and weeds (in organization) (for inployee benefit plans and deferred compensation)  (c) Compensation of five highest-paid employees (other than those included on line 1—see instructions).  (c) Compensation of five highest-paid employees (other than those included on line 1—see instructions).  (d) Contributions to employee benefit plans and deferred compensation (employee benefit plans and deferred compensation)  (e) Expense account the address of each employee paid more than \$50,000  (d) Title, and sweeps (e) Compensation (e) Compensation (e) Compensation (e) Expense account their allowances (e) Compensation (e) Compensation (e) Expense account their allowances (e) Compensation (e) Compensation (e) Expense account their allowances (e) Compensation (e) Compensation (e) Expense account their allowances (e) Compensation (e) Compensation (e) Expense account their allowances (e) Compensation (e) Compensation (e) Expense account their allowances (e) Compensation (e) Compensation (e) Expense account their allowances (e) Compensation (e) Compensation (e) Expense account their allowances (e) Compensat	b		· · · · · · · · · · · · · · · · · · ·			excepti	_		1 1		1
Organizations relying on a current notice regarding disaster assistance check here  If the answer is "Yes" to question 5ad/d, does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?									5b		
c If the answer is "Yes" to Question Sa(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?    Wes, "attach the statement required by Regulations section 53 4945-5(d).   Bud the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?   Wes, "attach the statement required by Regulations section 53 4945-5(d).   Bud the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?   Wes, "at any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?   Wes Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors   Part VIII					·			▶□	100		
because it maintained expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53 4945–5(d).  6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes," did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	С					the tax		_			ł
If "Yes," attach the statement required by Regulations section 53 4945–5(d).							_	П№			
On the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes" to 6b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  If "Yes" to 6b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  (b) Title, and average hours per week devoted to position  Auxilia Managers and their compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, ente "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position of the propose paid more than \$50,000  (c) Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, ente "NONE."		If "Yes," attach the statemen	t required by Regulation	ons section 53 494	15–5(d).					į	
on a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes" to 6b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	6a					emiums	3				
## "Yes" to 6b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?     Yes		on a personal benefit contract	ct?				☐ Yes	<b>W</b> No	1 1		ł
## "Yes" to 6b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?     Yes	b	Did the foundation, during th	e year, pay premiums	, directly or indirec	ctly, on a persona	l benefit	t contract?	,	6b		-
b if "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?  7b   Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address   (b) Title, and average devoted to position   (c) Compensation   (d) Contributions to employee benefit plans and deferred compensation of the allowances.  Steve   (e) Expense account of the plans and deferred compensation   (e) Expense account of the allowances.  Trustee   (e) Expense account of the plans and deferred compensation of the plans and deferred compensation of the highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000   (b) Title, and average hours per week devoted to position   (c) Compensation   (d) Contributions to employee benefit plans and deferred compensation of the allowances of the plans and deferred compensation of the allowances.				-	•						1
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  (b) Title, and average hours per week devoted to position  (c) Trustee  (d) Contributions to employee benefit plans and deferred compensation  (e) Expense account other allowances  (e) Compensation  (f) Trustee  (g) Compensation  (g) Contributions to employee benefit plans  (g) Compensation  (g) Contributions to employee benefit plans  (g) Compensation  (g) Expense account other allowances  (g) Expense acco	7a	At any time during the tax year	, was the foundation a p	party to a prohibited	tax shelter transa	ction?	☐ Yes	<b>⊮</b> No			
and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  (b) Trile, and average hours per week devoted to position  (c) Compensation (if not paid, employee benefit plans and deferred compensation of their allowances)  Steve MCCOMUCK Trustee OOO OC  Tom MCCOMICK Trustee OOO  Maurice MCCOMICK Trustee OOO  Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  (d) Contributions to employee benefit plans and deferred compensation  (d) Contributions to employee benefit plans and deferred compensation  (e) Expense account, other allowances of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  (e) Expense account, other allowances of exploration to employee benefit plans and deferred compensation  (d) Contributions to employee benefit plans and address of each employee paid more than \$50,000  (e) Expense account, other allowances of exploration to employee benefit plans and deferred compensation	b										
1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  (b) Title, and average hours per week devoted to position  STEVE MCOMICK  Trustee  Bismark NDS  Tom MCOMICK  Trustee  O  Compensation (d) Contributions to (e) Expense account, other allowances  (e) Expense account, other allowances  Trustee  O  Compensation (d) Contributions to (	Par	<del></del>		rs, Trustees, Fo	oundation Man	agers,	Highly Pa	aid Er	nploye	ees,	
(a) Name and address  (b) Title, and average hours per week devoted to position  (c) Compensation (fin paid, enter -0-)  (d) Contributions to employee benefit plans and deferred compensation of the highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation of the highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."  (e) Expense account, other allowances  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation of the allowances of employee benefit plans and deferred compensation of the allowances of employee benefit plans and deferred compensation of the allowances of employee benefit plans and deferred compensation of the allowances of employee benefit plans and deferred compensation of the allowances of employee benefit plans and deferred compensation of the allowances of employee benefit plans and deferred compensation of the allowances of employee benefit plans and deferred compensation of the allowances of employee benefit plans and deferred compensation of the allowances of employee benefit plans and deferred compensation of the allowances of employee benefit plans and deferred compensation of the allowances of employee benefit plans and deferred compensation of the allowances of employee benefit plans and deferred compensation of the allowances of employee benefit plans and deferred compensation of the allowances of employee plans and employe				<del></del>							
A same and address   hours per week devoted to position devoted		List all officers, directors, t									
Steve M'Cormick Trustee 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		(a) Name and addres	s (								
Bismarck NS 038 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		0455		devoted to position	enter -0-)	and def	erred compen	sation	- Unier a	iiowani	
Tom McCornick Trustee			MILL	<b>-</b>	$\wedge$	1	0		/	<b>(</b> )	
Maurice McCorMick Tructee  2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, ente "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation (d) Contributions to employee benefit plans and deferred compensation other allowances of the relief plans and deferred compensation of the relief											
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, ente "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  (e) Expense account, other allowances of the reliable to the re			<u> </u>	* ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	0		$\bigcirc$			?	
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, ente "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation other allowances of the remainder of the remai			7			<del> </del>					
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, ente "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefits plans and deferred compensation other allowances of the results		racice / L	OLMICK	IFUCETEE	Ō	1	0			<b>)</b>	
(a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  (e) Expense account other allowances		Targo, NE		• • •		+					
(a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  (e) Expense account other allowances											
(a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  (e) Expense account other allowances		Compensation of five high	est-paid employees	(other than thos	se included on l	ine 1—	see instru	ctions	). If no	ne. e	enter
(a) Name and address of each employee paid more than \$50,000  (b) The and address of each employee benefit devoted to position  (c) Compensation  (d) Compensation  (e) Expense account, other allowances  (e) Expense account, other allowances  (e) Expense account, other allowances	_		,,,	(00000000000000000000000000000000000000					,	, .	
(a) Name and address of each employee paid more than \$50,000  (b) The and address of each employee benefit devoted to position  (c) Compensation  (d) Compensation  (e) Expense account, other allowances  (e) Expense account, other allowances  (e) Expense account, other allowances							(d) Contribut	ions to			
devoted to position compensation		(a) Name and address of each employ	ee paid more than \$50,000			ensation	employee b	enefit			
Total number of other employees paid ever \$50,000				devoted to po	osition				Other a	owa.ii	003
Total number of other employees paid ever \$50,000		<u> </u>									
Total number of other employees paid ever \$50,000											
Total number of other employees paid ever \$50,000											
Total number of other employees paid ever \$50,000		/ / /									
Total number of other employees paid ever \$50,000		/\/a	n L								
Total number of other employees paid ever \$50,000			<del>•</del>								
Total number of other employees paid ever \$50,000											
Total number of other employees paid ever \$50,000											
Total number of other employees paid ever \$50,000		·									
Lotal number of other employees had ever \$50,000						_					
Total number of other employees paid over \$50,000	Total	number of other employees p	aid over \$50,000	<u> </u>	<u> </u>		•	<b>•</b>			
	Total	number of other employees n	and over \$50,000			_					

	•	
Form	990-PF	(2012)

3 Five highest-paid independent contractors for professional services (see instruct	tions). If none, enter "NON	E."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
	<del></del>	
otal 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 activities during the tax year. Include relevant statistical info organizations and other beneficiaries served, conferences convened, research papers produced, etc.	ormation such as the number of	Expenses
1		
	•••••	
2 / / //		
**************************************		
3		
4		
	************	
Part IX-B Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and	12	Amount
1	•••••	
<del></del>		
2 // A		
All other program-related investments. See instructions		
3		

`Part	X Minimum Investment Return (All domestic foundations must complete this part. Fore	ign fo	undations,
	see instructions.)		_
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	3.187.412
b	Average of monthly cash balances	1b	1300,000
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	3.487.412
е	Reduction claimed for blockage or other factors reported on lines 1a and		, , , , , ,
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	3.487.412
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		7
	instructions)	4	52,3()
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	3.435.101
6	Minimum investment return. Enter 5% of line 5	6	171755
Part			1
	foundations and certain foreign organizations check here   and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	171755
2a	Tax on investment income for 2012 from Part VI, line 5   2a   4759		1 1/
b	Income tax for 2012 (This does not include the tax from Part VI) 2b		
С	Add lines 2a and 2b	2c	4759
3	Distributable amount before adjustments Subtract line 2c from line 1	3	166,986
4	Recoveries of amounts treated as qualifying distributions	4	1001100
5	Add lines 3 and 4	5	
6	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	7	166,986
			1 9 4 1 0 4
Part	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	ST (8)	
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	140.056
b	Program-related investments—total from Part IX-B	1b	10,000
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	<u> </u>	_ ·
_	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	140 050
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	<del>ا أ</del>	1 10,039
•	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	IHA NEL
J	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating		ther the foundation
	qualifies for the section 4940(e) reduction of tax in those years.	y will	stret the loundation

Part	XIII Undistributed Income (see instruction	ons)			
1	Distributable amount for 2012 from Part XI,	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
	line 7				166,986
2	Undistributed income, if any, as of the end of 2012				
а	Enter amount for 2011 only .				
b	Total for prior years: 20,20,20	<del></del>			
3	Excess distributions carryover, if any, to 2012				
а	From 2007				
b	From 2008	-			
C	From 2009	1			
d e	From 2011 . <b>12,866</b>	<u> </u>			
f	Total of lines 3a through e	22,866			
4	Qualifying distributions for 2012 from Part XII, line 4: ► \$ 140.056	<u> </u>			
а	Applied to 2011, 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)				
d	Applied to 2012 distributable amount				140,056 22,866
е	Remaining amount distributed out of corpus				(1)
5	Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a).)	22,866			22,866
6	Enter the net total of each column as indicated below:				
a b	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 Prior years' undistributed income Subtract line 4b from line 2b	0			
c d	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  Subtract line 6c from line 6b. Taxable				
	amount—see instructions				
е	Undistributed income for 2011 Subtract line 4a from line 2a Taxable amount—see instructions				
f	Undistributed income for 2012 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2013				4064
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 2007 not applied on line 5 or line 7 (see instructions).				•
9	Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9				
а	Excess from 2008	]			
b	Excess from 2009	]			
c	Excess from 2010 .				1
d	Excess from 2011 .				
۵	Excess from 2012 .	į l	<b> </b>		l l

Part	VIV Private Operating Founds	tions (see instru	ations and Bart	VII A guartian (	<u>, , , , , , , , , , , , , , , , , , , </u>	- Tage 10
		<del></del>			1	
1a	If the foundation has received a ruling foundation, and the ruling is effective fo			private operating		
			_			0) 40.40()(5)
b	Check box to indicate whether the four		operating foundat		ection 4942()(	3) or 4942(J)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	(1) 0044	Prior 3 years	1,0000	(e) Total
	investment return from Part X for	(a) 2012	(b) 2011	(c) 2010	(d) 2009	
L	each year listed	_				<del></del>
b	85% of line 2a  Qualifying distributions from Part XII,					
С	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 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					
С	"Support" alternative test-enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Part	XV Supplementary Information	n (Complete th	is part only if th	ne foundation h	ad \$5,000 or mo	ore in assets at
	any time during the year-	see instruction	s.)			
1	Information Regarding Foundation	Managers:				···
а	List any managers of the foundation					by the foundation
	before the close of any tax year (but o	only if they have co	intributed more th	an \$5,000). (See s	ection 507(d)(2).)	
b	List any managers of the foundation					rge portion of the
	ownership of a partnership or other er			10% or greater int	erest	
		Non	<del></del>			
2	Information Regarding Contribution					
	Check here ▶ ☐ if the foundation				-	•
	unsolicited requests for funds. If the f other conditions, complete items 2a, I		giris, granis, etc	(see instructions)	to individuals of on	gamzations under
	The name, address, and telephone nu		the person to who	m applications of	sould be addresses	<del></del>
	Maurice McCorm The form in which applications should					1-237- 6983
b	The form in which applications should	be submitted and	I information and	materials they sho	uld include	<u> </u>
	,,	h.07	tta	,		
С	Any submission deadlines:	11.	111 8			
d	Any restrictions or limitations on aw	ards, such as by	/ geographical ar	eas charitable fi	elds kinds of inst	itutions or other
u	factors.		on e	ous, onuntable III	side, Kiride Of 11181	madona, or other
		/ V /	レハて			

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During t		ed for Fut	ture Payment	
Recipient  Name and address (home or business)  a Paid during the year	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
Nokomi's Abused Adult Res. Ctr. Teen Challenge Friels of Chimbote Sisters of Presentation Sts. Anne + Joachim Church St. Mary's Cathedral IPII Catholic Schools First Choice Clinic Life Coalition North Dakota State U. St. John's Prep School Bluestem Center TM Symphony Theo Inc.		Public Tax Exempt	Charitable  Religious  11  Educational  11  11  11  11  11	10,000 10,000 15,00 15,00 10,00 10,00 10,00 10,00 10,00 10,00 10,00 10,00 10,00
b Approved for future payment				139,000
Total		<u> </u>		m <b>990-PF</b> (2012)

'Pa	rt X	VI-A Analysis of Income-Producing Ad	ctivities				
_		oss amounts unless otherwise indicated	·	isiness income	Excluded by sect	on 512, 513, or 514	(e)
1		gram service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	<b>(d)</b> Amount	Related or exempt function income (See instructions.)
	a	<del></del>	<u> </u>				
	b c		-		<del>                                     </del>		
	d	· · · · · · · · · · · · · · · · · · ·				-	
	e				·		
	f						
	g	Fees and contracts from government agencies					
2		mbership dues and assessments				-	
3		rest on savings and temporary cash investments			14	1780	
4		idends and interest from securities			14	54869	
5	Net	rental income or (loss) from real estate					
	а	Debt-financed property					
	b	Not debt-financed property					
6	Ne	rental income or (loss) from personal property					
7		er investment income			18	178 162	
8		n or (loss) from sales of assets other than inventory			-	,	
9		income or (loss) from special events					
		ss profit or (loss) from sales of inventory			100		
11	_	er revenue. a Cop Gains Duit			18	4184	
	b						
	C						
	d						
	_				1	l i	
12	e Sui	state! Add columns (b) (d) and (c)					
	Sul	ototal Add columns (b), (d), and (e)				13 7 3	7 00 5
13	Sul <b>To</b> 1	al. Add line 12, columns (b), (d), and (e)				13 239	8,995
<b>13</b> (See	Sul To	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation	ns.)		ot Purposes	13 239	8,495
13 See Pa	Sul To	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp			
13 See Pa Lin	Sul Tot wor	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp			
13 See Pa Lin	Sul Tot Wor rt X	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp			
13 See Pa Lin	Sul Tot Wor rt X	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp			
13 See Pa Lin	Sul Tot Wor rt X	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp			
13 See Pa Lin	Sul Tot Wor rt X	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp			
13 See Pa Lin	Sul Tot Wor rt X	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp			
13 See Pa Lin	Sul Tot Wor rt X	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp			
13 See Pa Lin	Sul Tot Wor rt X	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp			
13 See Pa Lin	Sul Tot Wor rt X	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp			
13 See Pa Lin	Sul Tot Wor rt X	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp			
13 See Pa Lin	Sul Tot Wor rt X	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp			
13 See Pa Lin	Sul Tot Wor rt X	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp			
13 See Pa Lin	Sul Tot Wor rt X	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp			
13 See Pa Lin	Sul Tot Wor rt X	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp			
13 See Pa Lin	Sul Tot Wor rt X	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp			
13 See Pa Lin	Sul Tot Wor rt X	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp			
13 See Pa Lin	Sul Tot Wor rt X	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp			
13 See Pa Lin	Sul Tot Wor rt X	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp			
13 See Pa Lin	Sul Tot Wor rt X	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp			
13 See Pa Lin	Sul Tot Wor rt X	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp			
13 See Pa Lin	Sul Tot Wor rt X	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp			
13 See Pa Lin	Sul Tot Wor rt X	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp			
13 See Pa Lin	Sul Tot Wor rt X	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp			

<sup>2</sup> Part	XVII		n Regarding Trar	nsfers To and Transacti	ons and F	Relationsh	ips With	Nonchai	ritabl		90 10
1	Did t			engage in any of the followi	ng with any	other orga	nization de	escribed	Γ	Yes	No
	ın se	ction 501(c) of th	ne Code (other than	section 501(c)(3) organization	ons) or in se	ection 527,	relating to	political			
	•	nizations?									
а			porting foundation to	a noncharitable exempt or	ganızatıon	of.					
	(1) C	asn Other assets			•				1a(1)	<del></del>	
ь		r transactions:				•	•	•	1a(2)		
•			a noncharitable exe	empt organization					1b(1)		<u></u>
				able exempt organization					1b(2)	$\overline{}$	~
				rassets	•				1b(3)		~
			rrangements						1b(4)		r
		oans or loan gua							1b(5)		~
				nip or fundraising solicitation					1b(6)		
C				sts, other assets, or paid en					_1c		
d	If the	e answer to any	of the above is "Yes	s," complete the following : ces given by the reporting t	schedule. (	Column (b)	should alv	vays show	the	fair m	arket
	value	e in anv transacti	on or sharing arrang	ement, show in column <b>(d)</b>	the value of	ithe agods	ather ass	eived iess ets orser	unan	recei	arket
(a) Line		(b) Amount involved	· · · · · · · · · · · · · · · · · · ·	naritable exempt organization	· —	ption of transfe					
		,	.,,		(4) 2000		, transactic	no, and sna	ing and	ungeme	
										•	
		-			-		-				-
	_										_
	+				<del> </del>					_	
	-				<del> </del>		<del></del>			_	
	-+	<del>_</del> <del>_</del>		· · · · · · · · · · · · · · · · · · ·	-			_			
-				· · · · · · · · · · · · · · · · · · ·	+						
				· · · · · · · · · · · · · · · · · · ·	<del>                                     </del>						_
				<del> </del>							
2a				iliated with, or related to, o			pt organiz	ations		_	
				ther than section 501(c)(3))	or in sectio	n 527?			Yes		No
b	If "Ye	s," complete the	e following schedule								
_		(a) Name of organ	nization	(b) Type of organization	1		(c) Description	on of relation	ship		
						<u>.</u>				_	
			_								-
		<del></del>				<del></del>	<u>-</u>				
			<del></del>	<del>.</del>			_				
	Unde	r penalties of periury 1	declare that I have examine	d this return, including accompanying	schedules and	statements and	to the best of	my knowlede	ne and h	nelief it	is true
Sign	сопе	ct, and complete. Decl	aration of preparer (other the	n taxpayer) is based on all information	of which prepa	arer has any kno	wledge			_	
Here		V/ Ten:	Mysil	15-15-13	Tru	too		May the IR: with the pr	eparer	shown t	oelow
		aure of officer or trus	stee	Date Title	110	.> , ~ (		(see instruct	tions)? [	Yes[	]No
Paid		Print/Type preparer	's name	Preparer's signature		Date	O.L	P1	ΓΙΝ		
Prepa	arer							k lif if it is employed			
Use (		Firm's name ▶					Firm's EIN		_		
		Firm's address ▶					Phone no		_		
									~~		

х



## Vanguard Flagship Services®

Matthew T. Young, Registered Representative: 800-345-1344, Ext. 2559

Total value of all accounts as of December 31, 2012

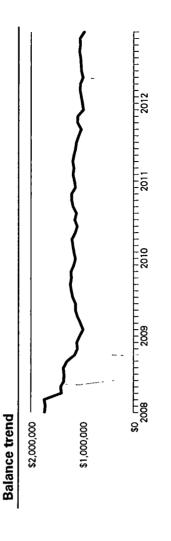
\$974,606.48

### Statement overview

Accounts	Value on 12/31/2011	Value on 12/31/2012
M. G. Mccormick, T. D. Mccormick, S. D. McCormick Trustees John L. McCormick Memorial Tr UA 08-30-1988		
Trust account	\$987,948.89	\$974,606.48

Asset mix				Value on 12/31/2012
	7	87.6% Stocks		\$853,649 58
		0.0% Bonds	Bonds	0000
		12.4%	12.4% Short-term reserves	120,956.90
	壐	0.0% Other	Other	00 0
			.6\$	\$974,606.48

Your asset mix percentages are based on your holdings as of the prior month-end



investment return (market change, dividends, interest, capital gains)

Since December 31, 2007: \$169,227.94

For more information on your account, including tools to help you set up a target asset allocation, log on to vanguard com



Vanguard, P O Box 2600, Valley Forge, PA 19482-2600



December 31, 2012, year-to-date statement View your statements online at vanguard.com.

## Vanguard Flagship Services®

Matthew T. Young, Registered Representative: 800-345-1344, Ext. 2559

# Changes coming to your 2012 tax forms

mutual fund tax forms will be mailed and posted online by mid-January Starting this tax season, Form 1099-B includes cost basis information funds will be reported on Form 1099-DIV rather than 1099-INT Most for mutual fund sales Also, tax-exempt interest dividends for mutual See vanguard com/taxcenter for more details



UA 08-30-1988 902 3RD AVE *S* 902 3RD OD 68103-1707 TOHN F WCCORMICK MEMORIAL TR B D WCCORMICK TRUSTEES M G MCCORMICK TO WCCORMICK

306B 000000307 147407 C2 - 4 - 4765 - 31945 - 4



### Account Summary

Active Assets Account 176-013131-022

M MCCORMICK S MCCORMICK T MCCORMICK CO-TTEES JOHN L MCCORMICK MEMORIAL

### Brokerage Account Householding Anniversary Date: 11/5/02

Housenolding Anniversary Date: 11/5/02 Investment Objectives †: Capital Appreciation, Income

# CHANGE IN VALUE OF YOUR ACCOUNT

	This Period (12/1/12-12/31/12)	This Year (1/1/12-12/31/12)
Total Beginning Value(Includes accrued Interest)	\$2,525,978.42	\$1,228,568.00
Contributions	J	45,327.47
Withdrawals	1	
Security Transfers	-	1,081,687.72
Net Contributions/Withdrawals	]	\$1.127.015.19
Change in Value	16,640.82	187,036.05
Total Ending Value(includes accrued interest)	\$2.542.619.24	\$2 542 619 24

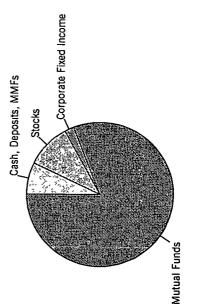
# CHANGE IN VALUE OVER TIME

This graph compares the total value of your account to the net amount invested. Net investment is the total amount invested minus the total amount withdrawn.

\	\	· ` `	``\			DEC 2012
			\	`		DEC 2011
						DEC 2010
					\ \;	DEC 2008
2.75 2.47	2.19	1.91	1.64	1.36	1.08	DEC
	suc	إإاإإ	W (	(\$)		

This exhibit may not include transactions for investments in Annuities or where Morgan Stanley Smith Barney LLC is not the custodian. This may affect the reported Net Invested Capital. If we are not the custodian Total Market Value - Net Invested Capital Since 12/31/08 there may also be a delay in the reporting of your Market Value. Please speak to your Financial Advisor if you have any questions. † See the Expanded Disclosures for more information about investment objectives. Please review for accuracy and inform us if your investment objectives change.

## ALLOCATION OF HOLDINGS



	Market Value Percent	Percentage %
Cash, Deposits, MMFs*	\$180,931.19	7.1
Stocks	252,876.50	6.6
Corporate Fixed Income	50,459.06	2.0
Mutual Funds	2,058,352.49	81.0
TOTAL VALUE	\$2,542,619.24	100.0%

This allocation represents holdings on a trade date basis, and projected settled Cash/Deposits/MMF balances; and may differ from Asset Allocation reports you might receive. These classifications are not intended to serve as a suitability analysis. \* Bank Deposits are eligible for FDIC rules apply and deposits are not SIPC insured. Cash and securities (including Money Market Funds) are eligible for SIPC coverage. Please see Expanded Disclosures.

# Morgan Stanley Smith Barney LLC. Member SIPC.

## Morgan Stanley

#BWNJGWM

00004397 05 MB 1.410 05 TR 00093 MSADT243 100000

M MCCORMICK S MCCORMICK T MCCORMICK CO-TTEES JOHN L MCCORMICK MEMORIAL

TRUST DTD 08/30/1988

FARGO ND 58103-1707 902 3RD AVE S

Your Branch

2000 44TH ST SOUTH STE 402

Telephone: 701-492-2400 FARGO, ND 58103

Alt. Phone: 888-820-7188 Fax: 701-492-2411

262520 E4STOARM 76E400

Client Interaction Center

800-869-3326

24 Hours a Day, 7 Days a Week

Access your accounts online

www.morganstanley.com/online

TOTAL VALUE LAST PERIOD (as of 11/30/12)

\$2,525,978.42

NET CONTRIBUTIONS/WITHDRAWALS

16,640.82 \$2,542,619.24

TOTAL VALUE OF YOUR ACCOUNT

Your Financial Advisor Team

The Northern Valley Group 701-492-2400

Your Financial Advisors

**Deborrah Carstensen** 

Associate Vice President

Deborrah.Carstensen@morganstanley.com

701 492-2409

Jeffrey Collins

Jeffrey.M.Collins@morganstanley.com First Vice President

701 492-2401

(as of 12/31/12) (Total Values include accrued interest) CHANGE IN VALUE

CLIENT STATEMENT | For the Period December 1-31, 2012