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#### DLN: 93491130010053

OMB No 1545-0052

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

Open to Public Inspection

For	cale	endar year 2012, or tax year beginning 01-	01-2012 , and	dend	ling 12-31-	2012			
		undation R SMITH FOUNDATION			A Employer id	entification numbe	er		
1.17	LLITISLI	X SMITH FOODDATION			20-8359918				
Num	ber and	d street (or P O box number if mail is not delivered to street address	s) Room/suite		<b>B</b> Telephone ու	ımber (see ınstructior	s)		
31	00 OAK	LAND ROAD NE			(319) 247-7831				
		n, state, and ZIP code			<b>C</b> If exemption	application is pending	g, check here 🕨 🦵		
CED	AR RAP	IDS, IA 52402							
<b>G</b> C	heck a	all that apply   Finitial return   Finitial return o	of a former public cha	rity	<b>D 1.</b> Foreign o	rganizations, check he	ere 🕨 🗀		
		Final return A mended retu	rn		_	rganizations meeting	·		
		Address change Name change			check hei	e and attach computa	ation		
		ype of organization		_					
		ket value of all assets at end JAccounting method				undation status was t			
of	year (1	from Part II, col. (c),	, cusii , Acci	uui		n 507(b)(1)(A), chec			
		*\$ 93,409 (Part I, column (d) mus	t be on cash basıs.)			ation is in a 60-month n 507(b)(1)(B), chec			
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see	(a) Revenue and expenses per	(b) N	let investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes		
		instructions))	books				(cash basıs only)		
	1	Contributions, gifts, grants, etc , received (attach schedule)	23,364						
	2	Check ► ☐ If the foundation is <b>not</b> required to attach Sch B							
	3	Interest on savings and temporary cash investments	1,497		1,497	1,497			
	4	Dividends and interest from securities							
	5a	Gross rents							
Revenue	b	Net rental income or (loss)							
	6a	Net gain or (loss) from sale of assets not on line 10							
	b   7	Gross sales price for all assets on line 6a  Capital gain net income (from Part IV, line 2)							
	8	Net short-term capital gain							
	9	Income modifications							
	10a	Gross sales less returns and allowances							
	Ь	Less Cost of goods sold							
	c	Gross profit or (loss) (attach schedule)							
	11	Other Income (attach schedule)	12,165			12,165			
	12	Total. Add lines 1 through 11	37,026		1,497	13,662			
	13	Compensation of officers, directors, trustees, etc							
ş,	14	Other employee salaries and wages							
Expenses	15	Pension plans, employee benefits							
<u>a</u>	16a	Legal fees (attach schedule)							
	Ь	Accounting fees (attach schedule)							
E E	1 C	Other professional fees (attach schedule)							
Operating and Administrative	17 18	Interest	<b>%</b> 12				12		
Ē	19	Taxes (attach schedule) (see instructions)  Depreciation (attach schedule) and depletion					12		
를	20	Occupancy							
Ā	21	Travel, conferences, and meetings							
anc	22	Printing and publications							
Ď.	23	Other expenses (attach schedule)				2,588			
at	24	Total operating and administrative expenses.							
Ž		Add lines 13 through 23	2,745		0	2,588	12		
0	25	Contributions, gifts, grants paid	14,566				14,566		
	26	Total expenses and disbursements. Add lines 24 and 25	17,311		0	2,588	14,578		
	27	Subtract line 26 from line 12							
	а	Excess of revenue over expenses and disbursements	19,715						
	ь	Net investment income (If negative, enter -0-)			1,497				
	С	Adjusted net income (if negative, enter -0 -)				11,074			

Savings and temporary cash investments . . . . . .

Accounts receivable 🟲 \_\_\_\_\_

2 3

93,409

End of year

93,409

73,484

		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 page 15 of the								
		ınstructions)								
	7	Other notes and loans receivable (attach schedule)								
\$	_	Less allowance for doubtful accounts -								
sset	8	Inventories for sale or use								
ď	9	Prepaid expenses and deferred charges								
	10a	Investments—U S and state government obligations (attach schedule)								
	b	Investments—corporate stock (attach schedule)								
	С	Investments—corporate bonds (attach schedule)								
	11		estments—land, buildings, and equipment basis 🕨							
		Less accumulated depreciation (attach schedule)								
	12	Investments—mortgage loans								
	13	Investments—other (attach schedule)								
	14	Land, buildings, and equipment basis 🟲			1					
		Less accumulated depreciation (attach schedule)								
	15	Other assets (describe 🟲)								
	16	<b>Total assets</b> (to be completed by all filers—see the								
		ınstructions Also, see page 1, item I)	73,484		93,409	93,409				
	17	Accounts payable and accrued expenses			210					
	18	Grants payable								
ė\$	19	Deferred revenue								
abiliti	20	Loans from officers, directors, trustees, and other disqualified persons								
ap	21	Mortgages and other notes payable (attach schedule)								
Γ	22	Other liabilities (describe 🟲)								
	22	Table Balling (add by a d.7 kborock 22)			210					
_	23	Total liabilities (add lines 17 through 22)			210					
		Foundations that follow SFAS 117, check here F  and complete lines 24 through 26 and lines 30 and 31.								
S		-	73,484		93,199					
Balance	24	Unrestricted	73,464		93,199					
9 (3)	25	Temporarily restricted								
ă	26	Permanently restricted								
Fund		Foundations that do not follow SFAS 117, check here								
Ŧ		and complete lines 27 through 31.								
5 or	27	Capital stock, trust principal, or current funds								
ets.	28	Paid-in or capital surplus, or land, bldg, and equipment fund								
Assets	29	Retained earnings, accumulated income, endowment, or other funds								
	30	Total net assets or fund balances (see page 17 of the	72.404		02.100					
Net		Instructions)	73,484		93,199					
	31	Total liabilities and net assets/fund balances (see page 17 of	72.404		02.400					
		the instructions)	73,484		93,409					
Pa	rt II	Analysis of Changes in Net Assets or Fund Balances								
<u> </u>		Total net assets or fund balances at beginning of year—Part II, column	(a), line 30 (must ag	ree						
_		with end-of-year figure reported on prior year's return)			. 1	73,484				
2		Enter amount from Part I, line 27a			. 2	19,715				
3		Other increases not included in line 2 (itemize)			3	<u> </u>				
4		Add lines 1, 2, and 3		— 	. 4	93,199				
5		Decreases not included in line 2 (itemize)			5	<del>, · ·</del>				
6		Total net assets or fund balances at end of year (line 4 minus line 5)—F		<del>-</del> ne 30 г	. 6	93,199				
		, , , , , , , , , , , , , , , , , , ,			 Forn	n <b>990-PF</b> (2012)				
						· /				

		the kınd(s) of property sold (e g , re ouse, or common stock, 200 shs M		( <b>b</b> ) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a						
		1 (0.5				
(e	e) Gross sales price	(f) Depreciation allowed (or allowable)	1	t or other basıs opense of sale		or (loss) ) mınus (g)
а						
b						
c						
d						
е						
Со	mplete only for assets s	howing gain in column (h) and owne			(I) Gains (Col col (k), but not	(h) gain minus
(i)	FM V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (1) col (j), ıf any		om col (h))
а						
b						
С						
d						
e						
2	-	ne or (net capital loss) {	If gain, also enter If (loss), enter -0 ns 1222(5) and (6	- ın Part İ, lıne 7	2	
	If gain, also enter in F in Part I, line 8 .	Part I , line 8 , column (c) (see instru	ctions) If (loss), e	nter - 0 - }	3	
Part	V Qualification L	Inder Section 4940(e) for R	educed Tax or	Net Investme	nt Income	
as the "Yes,	" the foundation does no	eave this part blank e section 4942 tax on the distributa t qualify under section 4940(e) Do unt in each column for each year, se	not complete this	part		┌ Yes ┍ No
	(a)				(d)	
	e period years Calendar or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncha		Distribution (col (b) divided	
	2011	10,494				
	2010	9,695 21,335				
	2008	21,722				
	2007	21,721				
		21,721				
		21,/ 21				
2	<b>Total</b> of line 1, colum	n (d)			2	
2	A verage distribution		ıde the total on lın	ie 2 by 5, or by	2 3	
	Average distribution the number of years t	n (d)	vide the total on line o if less than 5 yea	rs		
3	A verage distribution the number of years t	n (d)	vide the total on line o if less than 5 yea	rs	3	
3	A verage distribution the number of years t  Enter the net value of  Multiply line 4 by line	n (d)	vide the total on line if less than 5 yea	ne 2 by 5, or by rs	3 4	1
3 4 5	A verage distribution the number of years t  Enter the net value of  Multiply line 4 by line	n (d)	vide the total on line if less than 5 yea	ne 2 by 5, or by rs	3 4 5	1

	990-PF (2012)				age <b>4</b>
Pai	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the	e instr	uctio	ns)	
<b>1</b> a	Exempt operating foundations described in section 4940(d)(2), check here T and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)				
Ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check				15
	here F and enter 1% of Part I, line 27b				
c	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				15
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				15
6	C redits/P ayments				
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)				
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d				
8	Enter any <b>penalty</b> 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				15
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10				
11	Enter the amount of line 10 to be Credited to 2013 estimated tax Refunded Refunded 11				
Pai	t VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	F		Yes	No
	it participate or intervene in any political campaign?	<b>⊢</b>	1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of				
	the instructions for definition)?	• •	1b		No
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials				
_	published or distributed by the foundation in connection with the activities.		4 -		NI -
С.	Did the foundation file Form 1120-POL for this year?	•  -	1c		No
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  \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
е	on foundation managers > \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		No
_	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		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	:	4a		No
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?		4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		No
	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?		6	Yes	
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	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	<b>&gt;</b>				
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 .	L	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section $4942(j)(3)$				
	or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)?				
	If "Yes," complete Part XIV	·	9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	L	10		No

Pa	rt 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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►N/A			
14	The books are in care of ►LYNNE DEVORE Telephone no ►(319	1247-	7831	
	Located at 3100 OAKLAND ROAD NE CEDAR RAPIDS IA  ZIP+4 52402	<i>)</i>	7031	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> — Check here and enter the amount of tax-exempt interest received or accrued during the year	• •		<b>P</b>
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over			
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes", enter the name of the foreign country	1		
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
<b>1</b> a	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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)? Tyes 🔽 No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	ıf 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 🔽 No			
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 page 20 of the 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			
Ь	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)	26		
	to <b>all</b> years listed, answer "No" and attach statement—see instructions)	2b		
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
2-	► 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
L	, , , , , , , , , , , , , , , , , , , ,			
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	26		
4-	If the foundation had excess business holdings in 2012.)	3b		NI-
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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		No

Fal	Statements Rega	rair	ig activities for	VVI	iich Form 4/20	may	, ве кедиігеа ( <i>con</i> i	anu	ea)		
5a	During the year did the foundation	n pay	orincurany amoun	t to							
	(1) Carry on propaganda, or othe	rwise	attempt to influence	e leg	ıslatıon (section 494	45(e	e))?	~ N•	o		
	(2) Influence the outcome of any	spec	ific public election (	see	section 4955), or to	car	ry				
	on, directly or indirectly, any	vote	r registration drive?.				\ \ Yes	~ N	o		
	(3) Provide a grant to an individu	al for	travel, study, or oth	ers	ımılar purposes?		☐ Yes │	~ N•	o		
	(4) Provide a grant to an organiza							<del>-</del>			
	in section 509(a)(1), (2), or (					•	Yes	✓ N	°		
	(5) Provide for any purpose other		- · ·	•			<b>-</b>	<del>-</del>			
_	educational purposes, or for t								°		
b	If any answer is "Yes" to 5a(1)-(										
	Regulations section 53 4945 or i							_	. <u>5b</u>		
	Organizations relying on a curren	t not	ice regarding disast	eras	ssistance check here	· ·					
С	If the answer is "Yes" to question	5a(4	1), does the foundati	on c	laım exemptıon from	the					
	tax because it maintained expend	liture	responsibility for th	e gr	ant <sup>?</sup>		\ \ Yes	_ N	o		
	If "Yes," attach the statement requ	ıred L	by Regulations section	n 53.	4945-5(d).						
6a	Did the foundation, during the yea	ır, re	ceive any funds, dire	ctly	or indirectly, to pay	prer	miums on				
	a personal benefit contract?						Г Yes i	✓ N	o		
b	Did the foundation, during the yea	ır, pa	y premiums, directly	orı	ndirectly, on a perso	nal	benefit contract?		6b		No
	If "Yes" to 6b, file Form 8870.										
7a	At any time during the tax year, v	vas tl	he foundation a party	to a	a prohibited tax shelf	tert	ransaction?	~ N	。		
b	If yes, did the foundation receive	any	proceeds or have an	y ne	t income attributable	to t	the transaction?		7b		
	Information Abou						n Managers, Highly		id Em	ploye	es,
Pa	and Contractors		,		<u> </u>				•		
1	List all officers, directors, trustee	s, foi	undation managers a	nd t	heir compensation (	see i	instructions).				
	(-) Nama and adduces	(b)	Title, and average	•	c) Compensation	_	(d) Contributions to	(e	<b>)</b> Expen	se acc	ount,
	(a) Name and address	ا ا	hours per week evoted to position	(,	If not paid, enter -0-)		mployee benefit plans I deferred compensation	other allowances			
VALAL	e devore 📆		ASURER		0	unc	deterred compensation	_			0
		1 00			Ü		·				Ů
CED	0 OAKLAND ROAD NE AR RAPIDS, IA 52402										
ANIP	wood 📆	1	SIDENT	0			0		0		0
	0 DESOTO ST SW AR RAPIDS,IA 52402	1 00	)								
IESSI	CA RHATIGAN 🕏	SEC	RETARY		0		C	)			0
	RALEIGH LANE	1 00									
	ION,IA 52302										
2	Compensation of five highest-paid	emp	oloyees (other than	hos	e included on line 1—	see	instructions). If none, e	nter	"NONE.	"	
			(b) Title, and avera	ane			(d) Contributions to				
(a)	Name and address of each employ paid more than \$50,000	/ee	hours per week		(c) Compensatio	n	employee benefit plans and deferred		Expen other al		
	paid more than \$50,000		devoted to position	on			compensation		other ar	iowanic	.65
10 N	IE						'				
			1								
			1					1			
								$\vdash$			
			-								
			]								
			1								
	I number of other employees hald o	war	±50.000		1		<u> </u>	t			

Part VIII Information About Officers, Directors, Trusto and Contractors (continued)	ees, Foundation Managers, Highly	Paid Employees,
3 Five highest-paid independent contractors for professional services (	(see instructions). If none, enter "NONE".	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<b>Total</b> number of others receiving over \$50,000 for professional services.	<u> </u>	•
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rele organizations and other beneficiaries served, conferences convened, research papers produ		Expenses
1		
2		
		-
3		
4		
Part IX-B Summary of Program-Related Investments ( Describe the two largest program-related investments made by the foundation during the state of t		A mount
1 N/A	the tax year on lines I and 2	Amount
2		
All other program-related investments See page 24 of the instructions	3	
3		1
		1
Total Add lines 1 through 3		<u> </u>

Pa	rt X Minimum Investment Return (All domestic foundations must complete this part. Fo see instructions.)	reign	foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	0
b	A verage of monthly cash balances	1b	0
c	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	0
e	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	0
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	0
6	Minimum investment return. Enter 5% of line 5	6	0
Par	<b>Distributable Amount</b> (see instructions) (Section 4942(j)(3) and (j)(5) private opercentain foreign organizations check here ►  and do not complete this part.)	atıng	foundations and
1	Mınımum ınvestment return from Part X, line 6	1	
2a	Tax on investment income for 2012 from Part VI, line 5   2a   15		
b	Income tax for 2012 (This does not include the tax from Part VI) 2b	1	
c	Add lines 2a and 2b	2c	15
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
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	0
Par	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	14,578
b	Program-related investments—total from Part IX-B	1b	
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	За	
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	14,578
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see instructions)	5	15
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	14,563
	<b>Note:</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth	ner the	1

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

	olidisti ibuted Tilcolle (see liisti d	ctions)			
		<b>(a)</b> Corpus	(b) Years prior to 2011	<b>(c)</b> 2011	(d) 2012
1	Distributable amount for 2012 from Part XI, line 7	·			0
	Undistributed income, if any, as of the end of 2012				
	Enter amount for 2011 only				
	·				
	Total for prior years 20, 20, 20				
	Excess distributions carryover, if any, to 2012 From 2007				
	From 2008				
	From 2009				
	From 2010				
	Total of lines 3a through e	63,298			
	<del>_</del>	03,230			
4	Qualifying distributions for 2012 from Part				
_	XII, line 4  \$ 14,578				
	Applied to 2011, but not more than line 2a				
b	Applied to undistributed income of prior years (Election required—see instructions)				
C	Treated as distributions out of corpus (Election				
d	required—see instructions)				
	Remaining amount distributed out of corpus	14,578			
	Excess distributions carryover applied to 2012	·			
_	(If an amount appears in column (d), the				
	same amount must be shown in column (a).)				
6	Enter the net total of each column as				
_	indicated below:	77,876			
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	77,070			
b	Prior years' undistributed income Subtract line 4b from line 2b				
C	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable amount				
u	—see instructions				
e	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				0
_	be distributed in 2013				i i
,	A mounts 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.	77,876			
	Subtract lines 7 and 8 from line 6a	77,870			
	Analysis of line 9				
	Excess from 2008 21,722				
	Excess from 2009 21,335				
	Excess from 2010 9,735				
	Excess from 2011 10,506				
е	Excess from 2012 14,578		1		1

1a	If the foundation has received a ruling or d foundation, and the ruling is effective for 2		•			
ь	Check box to indicate whether the organiz	•	_		1942(J)(3) o	r <b>Г</b> 4942( <u>J</u> )(5)
	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each	(a) 2012	<b>(b)</b> 2011	<b>(c)</b> 2010	<b>(d)</b> 2009	(c) lotui
	year listed					
	85% of line 2a					
	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					
	<ol><li>Total support other than gross investment income (interest,</li></ol>					
	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					
Рa	(4) Gross investment income  ort XV Supplementary Information	l on (Complete tl	l nis part only if		n had \$5.000 o	or more in
	assets at any time during	the year—see				
1 a	Information Regarding Foundation Manage List any managers of the foundation who has		re than 2% of the to	otal contributions re	ceived by the found	dation
	before the close of any tax year (but only I					
_						
b	List any managers of the foundation who or ownership of a partnership or other entity)				y large portion of th	ne
<u></u>	Information Regarding Contribution, Grant	. Gift, Loan, Schola	rship, etc., Program	 ns:		
	Check here 🕶 if the foundation only ma				and does not accep	ot
	unsolicited requests for funds If the found	atıon makes gıfts, q	grants, etc (see ins	structions) to individ	duals or organizatio	ns under
	other conditions, complete items 2a, b, c,	and d				
a	The name, address, and telephone numbe	r of the person to w	hom applications sl	hould be addressed		
b	The form in which applications should be s	submitted and infori	mation and materia	ls they should inclu	de	
c	Any submission deadlines					
d	Any restrictions or limitations on awards, factors	such as by geograp	phical areas, charit	able fields, kinds of	institutions, or othe	er

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to Purpose of grant or status of Amount any foundation manager contribution Name and address (home or business) recipient or substantial contributor a Paid during the year SEE ATTACHED CHARITABLE PURPOSE 14,566 VARIOUS CEDAR RAPIDS, IA 52402 14,566 Total. . . **b** Approved for future payment

Form 990-	<u> </u>					Page <b>1</b> 2
	I-A Analysis of Income-Products amounts unless otherwise indicated		usiness income	Excluded by section	. 512 513 or 514	(e)
_	n service revenue	(a) Business code	(b)	(c) Exclusion code	(d) A mount	Related or exemp function income (See
a	and contracts from government agencies riship dues and assessments on savings and temporary cash investments and interest from securities		Amount	14	1,497	instructions )
c d e 12 Subtota 13 Total. A (See w	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Forksheet in line 13 instructions to verify  Relationship of Activities to  Explain below how each activity for wh the accomplishment of the foundation? Instructions )	calculations)  o the Accom  ich income is re	plishment of I	Exempt Purpos  (e) of Part XVI-A c	ontributed importa	11,074 ntly to

Part 2	KVII	Information Re Noncharitable					nsa	ctions	and Relati	onships With			_
1 Did th	e orgar	nization directly or indirectly					organ	ıızatıon de	escribed in section			Yes	No
501(c	) of the	Code (other than section	501(c)(3) or	ganızat	ions) or in s	section 527, rela	ting to	political	organizations?				
<b>a</b> Tran	sfers 1	from the reporting four	ndation to a	nonc	harıtable	exempt orga	nızat	ion of					
(1)	Cash.										1a(1)		No
(2)	Other	assets									1a(2)		No
<b>b</b> Othe	r tran	sactions											
(1)	Sales	of assets to a noncha	rıtable exe	mpt o	rganızatı	on					1b(1)		No
(2)	Purch	ases of assets from a	noncharita	ble ex	xempt org	janization					. 1b(2)		No
(3)	Renta	l of facilities, equipme	nt, or othe	rasse	ets						1b(3)		No
(4)	Reımb	ursement arrangemen	nts								1b(4)		No
(5)	Loans	or loan guarantees.									1b(5)		No
<b>(6)</b> P	erforr	nance of services or m	nembershıp	or fu	ndraising	solicitations					1b(6)		No
<b>c</b> Shar	ıng of	facılıtıes, equipment, i	mailing list	s, oth	erassets	s, or paid emp	loye	es			1c		No
of the	e good y tran	ver to any of the above ds, other assets, or se saction or sharing arra (b) Amount involved	rvices give angement,	n by t show	the report ın columı	ting foundatio	n Ift e oft	the foun the good	dation receive ls, other asset	d less than fair mark	et value ed	•	nts
(4) 2	+	(-),,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(0)					(-, -		,			
							_						
	-						-						
	_						_						
desc	rıbed	idation directly or indii in section 501(c) of the omplete the following s (a) Name of organization	ne Code (oi schedule		nan sectio		orın	sectioi				es F	No
									1				
									+				
Sign Here	the b				2013-05-08			cion of preparei					
		Print/Type preparer's	s name	Prep	arer's Sı	gnature		С	ate		TIN		-
Doid		MARTY L GOSS			MARTY L GOSS			2013-05-08		Check if self- employed ▶			
Paid Prepa	rer	Firm's name 🕨		NOHE	RE & CO	sc				Firm's EIN ►			
Use O				4228	SOUTHI	ΓOWNE DR							
		Firm's address ▶		EAU CLAIRE, WI 547014389 Phone no (7							34-222	5	

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Schedule B		Schedule of Contributo	rs	OMB No 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service		► Attach to Form 990, 990-EZ, or 990-	-PF.	2012
Name of the organizati			Employer id	dentification number
- MILLITISER SMITH FOUNDAT.	LON .		20-83599	18
Organization type (ch	eck one)			
Filers of:	Section:			
Form 990 or 990-EZ	<b>F</b> 501(c)(	) (enter number) organization		
	<b>Г</b> 4947(a)(1)	) nonexempt charitable trust <b>not</b> treated as a	private foundation	
	F 527 politica	al organization		
Form 990-PF	<b>5</b> 01(c)(3)	exempt private foundation		
	<b>~</b> 4947(a)(1)	) nonexempt charitable trust treated as a privi	ate foundation	
	<b>5</b> 01(c)(3)	taxable private foundation		
	tion filing Form 990, 99 any one contributor Ca	90-EZ, or 990-PF that received, during the yea omplete Parts I and II	ar, \$5,000 or more (in money or	
Special Rules				
under sections (	509(a)(1) and 170(b)(	iling Form 990 or 990-EZ that met the 33 <sup>1</sup> /3% s 1)(A)(vi) and received from any one contribu amount on (i) Form 990, Part VIII, line 1h, or (	itor, during the year, a contribut	
during the year,	total contributions of	rganization filing Form 990 or 990-EZ that recommore than \$1,000 for use exclusively for religioses, or the prevention of cruelty to children	gious, charitable,	•
during the year, not total to more the year for an e applies to this or	contributions for use than \$1,000 If this bo exclusively religious, or ganization because it	rganization filing Form 990 or 990-EZ that recexclusively for religious, charitable, etc., purpox is checked, enter here the total contribution charitable, etc., purpose. Do not complete any received nonexclusively religious, charitable	poses, but these contributions on that were received during of the parts unless the <b>General</b> t, etc, contributions of \$5,000 co	did ral Rule
990-EZ, or 990-PF), but	ıt <b>must</b> answer "No"	by the General Rule and/or the Special Rules on Part IV, line 2 of its Form 990, or check the 0-PF, to certify that it does not meet the filing i	e box on line H of its	

Name of organization MILLHISER SMITH FOUNDATION

Employer identification number

20-8359918

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_1_	MILLHISER SMITH AGENCY INC PO BOX 3100  CEDAR RAPIDS, IA 524063100	\$15,000	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)

Name of organization MILLHISER SMITH FOUNDATION

**Employer identification number** 

20-8359918

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

	B (Form 990, 990-EZ, or 990-PF) (2012)		Pa
	<b>organization</b> SMITH FOUNDATION		Employer identification number
			20-8359918
rt III	Exclusively religious, charitable, etc., in that total more than \$1,000 for the year. For organizations completing Part III, enter the contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional sp	Complete columns (a) through (e) e total of exclusively religious, character this information once. See	and the following line entry ritable, etc.,
) No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_			
	Transferee's name, address, and	(e) Transfer of gift d ZIP 4 Rela	ationship of transferor to transferee
) No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_			
	Transferee's name, address, and	(e) Transfer of gift d ZIP 4 Rela	ationship of transferor to transferee
) No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_			
	Transferee's name, address, and	(e) Transfer of gift	ationship of transferor to transferee
) No. rom	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
art I			
$-\mid$			

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## **TY 2012 Compensation Explanation**

Name: MILLHISER SMITH FOUNDATION

Person Name	Explanation
LYNNE DEVORE	
MINA WOOD	
JESSICA RHATIGAN	

## **TY 2012 Other Expenses Schedule**

Name: MILLHISER SMITH FOUNDATION

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FUNDRAISING				
5K RACE EXPENSES	2,588		2,588	
EXPENSES				
MISC EXPENSES	145			

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### **TY 2012 Other Income Schedule**

Name: MILLHISER SMITH FOUNDATION

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
FUNDRAISING	12,165		12,165

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### **TY 2012 Taxes Schedule**

Name: MILLHISER SMITH FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL TAX	12			12

# MS Foundation 2012

# **Contribution Record**

Contribu	Contribution Record			- [			
				_	Private		-
Month	Recipient	Amount A	Address	Charity	Found.	Purpose	<del>-</del> -
Feb	American Cancer Societ	\$ 150 00 40	4080 1st Ave NE Cedar Rapids IA 52402	×		Daffodil Fundraiser	
Feb	Green Square Meals	\$ 200 00 3	200 00 3514 Heatherridge Dr NE Cedar Rapids IA 52402		×	Meals	
Feb	1st Church of the Nazerene	\$ 100 00 3113 1st	113 1st Ave SW, Cedar Rapids IA 52404		×	Rock the Block Fundraiser	
Feb	Families Helping Families	100 00	PO Box 10493 Cedar Rapids IA 52410		×	2012 Contribution	
Feb	Foundation 2	\$ 50 00 1	1714 Johnson Ave NW, Cedar Rapis IA 52405		×	Crisis Outreach program	
Feb	Center Point United Methodist Church	100 00	PO Box 283, Center Point IA 52213		X	Church fundraiser	
Feb	Cedar Rapids Police Dept	\$ 100 00 PO Box		×		Shop with a Cop Program Back to School	
Feb	Catherine McAuley Center	\$ 100 00 866 4th	66 4th Ave SE, Cedar Rapids IA 52403		X	Movin' for McAuley campaign	
Feb	EIA Fellowship of Christian Athletes		1649 Memorial Dr SE, Cedar Rapids IA 52403			Banquet Fundraiser TJG on Board	
Mar	U of IA Palliative Care Team	485 51	PC Box 4550 Iowa City IA 52244		X	Mindi Jackson, Heaven books	
Mar	Special Olympics of Iowa			×		Annual Donation	
Mar	National Czech & Slovak Museum	\$ 200 00 87 16th	7 16th Ave SW Cedar Rapids IA 52404		X	Rebuilding the Future Campaign	
Mar	UI Foundation	5,000 00	5,000 00 One Park Ave Iowa City IA 52244		×	Donation to Vaughn Ins Institute	-
Apr	Andrea Eilertson Cancer Benefit	\$ 350 00 A	Attn Brenda Graver, 205 S Ford St Anamosa IA 52205		×	Cancer benefit	
Apr	Matthew 25 Ministry Hub	200 00	225 K Ave NW, Cedar Rapids IA 52402		×	Tree Sponsor	
May	Four Oaks Foundation		50 00 5400 Kirkwood Blvd SW Cedar Rapids IA 52404			Spring Spruce Up	
May	El Kahır Shirners	\$ 50 00 PO Box	O Box 11683, Cedar Rapids IA 52410	×		Circus Tickets	
May	Linn County Food Bank	2,836 58	10 5th St SE, Cedar Rapids IA 52401		X	Matchy May Food Drive	
Jun	Tanager Place	50 00	2309 C St SW, Cedar Rapids IA 52404		×	Annual Donation	—,
Jun	Cedar Valley Humane Society	2 20 00 1/2	7411 Mt Vernon Rd SE, Cedar Rapids IA 52403		X	Annual Donation	
Jun	Camp Coureagous of Iowa	\$ 200 00 PO Box	O Box 418 Monticello IA 52310-0418		×	2012 Donation	ш,
Aug	Catherine McAuley Center	\$ 200 00 866 4th	66 4th Ave SE, Cedar Rapids IA 52403		×	16th Annl Catherine's Tea	
Aug	City of Ely	250 00	PO Box 248 Ely IA 52227		×	Fall Festival	
Sep	HACAP	\$ 244 00 P	PO Box 490, Hiawatha IA 52233		×	Backpack program	
Oct	Cedar Rapids Police Dept	100 00	PO Box 2593 Cedar Rapids IA 52406	X		Shop with a Cop Xmas 2012	
Oct	Uof IA Palliative Care Team	\$ 2,000 00 PO Box	O Box 4550 Iowa City IA 52244		X	Memorial Hope Rose Jackson	
Oct	Kasey Warren	\$ 100 00 PO Box			×	Cancer benefit	<del></del> -
Oct	United Way	\$ 50 00	317 7th Ave SE Ste 401, Cedar Rapids IA 52401	×		Raining Rose Campaign	
Oct	Linn County Deputy Sheriff	150 00	169 Jacolyn Dr NW, Cedar Rapids IA 52407-4081		×	2012 Holiday Food Baskets	
	Total	\$ 14,566.09					