

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



DLN: 93493134067633

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2012

OMB No 1545-0047

Department of the Treasury

Open to Public The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection A For the 2012 calendar year, or tax year beginning 01-01-2012 , 2012, and ending 12-31-2012 D Employer identification number B Check if applicable THE VAN WERT COUNTY FOUNDATION Address change 34-0907558 Doing Business As Name change ☐ Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number 138 E MAIN ST Terminated (419) 238-1743 City or town, state or country, and ZIP + 4 VAN WERT, OH 45891 Amended return Application pending **G** Gross receipts \$ 23,589,499 Name and address of principal officer H(a) Is this a group return for LARRY L WENDEL affiliates? ┌ Yes 🗸 No 138 E MAIN ST VAN WERT, OH 45891 **H(b)** Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) **▽** 501(c)(3) **┌** 501(c)() **◄** (insert no) ☐ 4947(a)(1) or ☐ 527 Tax-exempt status H(c) Group exemption number ► Website: ► VANWERT COM/FOUNDATION L Year of formation 1925 M State of legal domicile OH Part I Summary Briefly describe the organization's mission or most significant activities THE MISSION IS TO RECEIVE AND INVEST CONTRIBUTIONS TO FURTHER THE MENTAL, MORAL, INTELLECTUAL OR PHYSICAL WELFARE AND ADVANCEMENT OF CITIZENS OF VAN WERT COUNTY, OHIO AND SUCH OTHER AREAS AS DIRECTED BY A DONOR Activities & Governance Check this box দ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . . 4 Number of independent voting members of the governing body (Part VI, line 1b) . 4 15 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 5 6 Total number of volunteers (estimate if necessary) 7a 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 . **b** Net unrelated business taxable income from Form 990-T, line 34 **7**b **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . 1,888,137 1,247,539 Program service revenue (Part VIII, line 2g) . 9 2,018,032 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 3,628,186 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 491,572 659,796 11 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 4,397,741 5,535,521 Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . 13 1,285,995 1,551,959 0 14 Benefits paid to or for members (Part IX, column (A), line 4) \cdot . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 237,076 210,878 Expenses 5 - 10)16a Professional fundraising fees (Part IX, column (A), line 11e) . . 0 b Total fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright 0$ 17 251,226 240,864 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,774,297 2,003,701 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses Subtract line 18 from line 12 $\,$. 2,623,444 3,531,820 (Assets or defined despes) **Beginning of Current End of Year** Year 20 37,583,855 41,633,059 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) 117,950 94,211 Net assets or fund balances Subtract line 21 from line 20 37,465,905 41,538,848 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of

my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

	K	*****			2013-05-14			
Sign	7	Signature of officer		Date				
Here	k	LARRY WENDEL EXECUTIVE SECRETAR	Y					
	7	Type or print name and title						
Doid	Type	Print/Type preparer's name RODNEY L STOLLER	Preparer's signature	Date 2013-05-14	Check If self-employed	PTIN		
raiu Preparei	r	Firm's name AREND LAUKHUF	& STOLLER INC					
Use Only		Firm's address ► 685 FOX ROAD S	JITE 101		Phone no (419) 238-0658		
		VAN WERT, OH	1 5891					

May the IRS discuss this return with the preparer shown above? (see instructions) .

Form	1990 (2012)					Page						
Par		ment of Program Servi f Schedule O contains a resp			ш							
1	Briefly describ	e the organization's mission										
					IE MENTAL, MORAL, INTELLEC ND SUCH OTHER AREAS AS D							
2		zation undertake any significa 990 or 990-EZ?	ant program s	ervices during the ye	ar which were not listed on							
	If "Yes," descr	ibe these new services on Sc	hedule O									
3	_	Did the organization cease conducting, or make significant changes in how it conducts, any program services?										
	If "Yes," descr	ibe these changes on Schedu	ıle O									
4	expenses Sec) organization	s are required to repo	three largest program services, a ort the amount of grants and allo							
4a	(Code) (Expenses \$	333,074	ıncludıng grants of \$	309,502) (Revenue \$)						
	SCHOLARSHIPS I MONITORING QU		WERT,PAULDING	i, and other counties i	IN OHIO WHERE THE FOUNDATION HAS	SIGNIFICANT INVOLVEMENT						
	(Code) (Expenses \$	1,183,767	ıncludıng grants of \$	1,173,311) (Revenue \$)						
	ALLOCATIONS TO ADVANCEMENT (O CHARITABLE ORGANIZATIONS AND DE CITIZENS OF VAN WERT COUNT	TO GOVERNMEN Y, OHIO AND SUC	NTAL UNITS TO FURTHER CH OTHER AREAS AS DIRE	THE MENTAL, MORAL, INTELLECTUAL OR CTED BY THE DONOR INCLUDED ARE A ERFORMING ARTS FOUNDATION, AND H	ALLOCATIONS TO AND						
	(Code) (Expenses \$	81,591	ıncludıng grants of \$	69,146) (Revenue \$)						
70	•	N ALLOCATES FUNDS TO PROVIDE	ŕ		, , ,							
	Other prograr	m services (Describe in Sche	dule O)									
	(Expenses \$	•	udıng grants o	f\$) (Revenue \$)						
4e	Total program	n service expenses 🕨	1,598,432	<u>.</u>								

Part TV	Check	list of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 📆	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV^{\square}	9	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X^{\bullet}	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

αı	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V	•	Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 3		163	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	1		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
•	gaming (gambling) winnings to prize winners?	1c		
a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered			
	by this return	1		
)	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
ı	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Νo
	If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i>	3b		
1	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
•	If "Yes," enter the name of the foreign country 🕨			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
1	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
:	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	_		
_	Does the organization have annual arras assents that are assent that are assent that the table of the control o	5c		N.
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
•	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	1		NI -
	file Form 8282?	7c		N c
•	These, indicate the number of forms 3232 med during the year	1		
•	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		Νo
l	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		No
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
		8		No
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		Νo
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	Yes	
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources	1		
•	against amounts due or received from them)	-		
1	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
•	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states	-		
	in which the organization is licensed to issue qualified health plans	-		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes" has it filed a Form 7.20 to report these payments? If "No" provide an explanation in Schedule 0	14h	1	

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax 15			
	year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
-	ation B. Bellinian / This Continue D. magnests information about 1977			$\overline{}$
<u> </u>	ection B. Policies (This Section B requests information about policies not required by the Internal R	<u>evenı</u>	<u>ie Coa</u>	e.)
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	Yes	e.) No
	Did the organization have local chapters, branches, or affiliates?	evenu 10a		
10a				No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b		No No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		No No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a 12a 12b	Yes Yes Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No No

- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection Indicate how you made these available. Check all that apply
 - Own website Another's website Vpon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►VAN WERT COUNTY FOUNDATION 138 E MAIN ST VAN WERT, OH (419) 238-1743

<u>Part VIII</u> Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ♦ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per	P os more			not	checl		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list	pers	person is both an officer		from the	from related	other			
	any hours for related		a dır	_				organızatıon (W- 2/1099-	organızatıons (W- 2/1099-	compensation from the
	organizations	Individual trustee or director	<u>=</u>	Officer	Key employee		Former	MISC)	MISC)	organization
	below	불	<u> </u>	윤	<u>e</u>	얼등	3			and related
	dotted line)	[중호	to≘		팋	® or				organizations
]ੇ ਛੁੱ	9 1		ě	ă				
			Institutional Trustee		"	l Š				
			g.			Highest compensated employee				
(1) CHARLES F KOCH	1 00	<u> </u>				_				
TRUSTEE		X						0	0	0
(2) THAD LICHTENSTEIGER	1 00	,,								
TRUSTEE		X						0	0	0
(3) BRUCE C KENNEDY	1 00	,,								
TRUSTEE		X						0	0	0
(4) BRIAN RENNER	1 00	,,								
TRUSTEE		X						0	0	0
(5) MICHAEL GEARHART	1 00	,,								
TRUSTEE		X						0	0	0
(6) C ALLAN RUNSER	1 00	,,								
TRUSTEE		X						0	0	0
(7) GARY L CLAY	1 00								0	0
TRUSTEE		X						0	U	U
(8) MICHAELT CROSS	1 00	×						0	0	0
TRUSTEE		_ ^						U	O	
(9) ANDREW CZAJKOWSKI	1 00	×						0	0	0
TRUSTEE		_ ^						Ü	Ü	
(10) PAUL SVABIK	1 00	×						0	0	0
TRUSTEE		_ ^						Ů	Ü	
(11) ROBERT C YOUNG	1 00	×						0	0	0
TRUSTEE		_ ^						Ů	Ü	
(12) MICHAEL ZEDAKER	1 00	×						0	0	0
TRUSTEE								ŭ	Ŭ	
(13) FRANCIS W PURMORT III	1 00	×						0	0	0
TRUSTEE								Ŭ	Ŭ	
(14) GERALD D THATCHER	1 00	x						0	0	0
TRUSTEE								ŭ	Ŭ	
(15) LARRY GREVE	1 00	×						0	0	0
TRUSTEE								<u> </u>	Ŭ	
(16) LARRY L WENDEL	40 00			×				69,000	0	10,079
EXEC SEC				Ĺ				33,000	Ŭ	

Part VIII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title		and Title A verage hours per week (list any hours A verage more than one box, ur person is both an offi and a director/truste							Report compen from organizat	able sation the ion (W-	(E) Reportable compensation from related organizations (W	- 0	ted f other ation he	
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-	MISC)	2/1099-MISC)		ganizati relate organiza	ed
												+		
1b c	Sub-Total							*						
d	Total (add lines 1b and 1c) .			` ·	٠.	٠.		·		69,000				10,079
2	Total number of individuals (in \$100,000 of reportable compe					liste	d abov	e) w	ho receive	d more th	ian			
3	Did the organization list any f o	ormer officer du	ector o	r truc	tee	kev	emnlo	VAA	or highest	compen	sated employee		Yes	No
_	on line 1a? If "Yes," complete S						• •	•				3		No
4	For any individual listed on line organization and related organ													
5	Did any person listed on line 1	a receive or acc	rue coi	 mpen	• satio	• on fro	om an	• v unr	elated orga	• • anızatıon	or individual for	4		No
	services rendered to the organ											5		No
Se	ection B. Independent Co	ntractors												
1	Complete this table for your fix compensation from the organiz	ve highest comp											ax year	
		(A) lame and business						-	_		(B) cription of services		(C Comper)
												\blacksquare		
												-		

Part V	<u> </u>	Statement o Check if Schedu	f Revenue ule O contains a respor	nse to any question	in this Part VIII . (A) Total revenue	(B) Related or	(C) Unrelated	(D) Revenue
						exempt function revenue	business revenue	excluded from tax under sections 512,513,or 514
s છ	1a	Federated camp	paigns 1a					
Contributions, Giffs, Grants and Other Similar Amounts	ь	Membership du	es 1b					
اللِّ ق	С	Fundraising eve	ents 1 c					
iffs ar /	d	Related organiz	ations 1d					
9 :: ⊞ ::	e	Government grants	s (contributions) 1e					
Sis	f f	All other contribution	ons, gifts, grants, and 1f	1,247,539	ł			
buti the		similar amounts no	ot included above					
i di	g	1a-1f \$	ons included in lines	4,849				
Contand	h	Total. Add lines	s 1a-1f	· · · •	1,247,539			
<u> </u>				Business Code				
Program Serwce Revenue	2a							
æ	Ь							
MCe	С							
Š	d							
Ē	e	^ II oth on man man						
Ş	f	All other progra	am service revenue					
	g		s 2a – 2f					
	3		ome (including dividen ar amounts)		792,411			792,411
	4		tment of tax-exempt bond					
	5	Royalties						
	_	_	(ı) Real	(II) Personal				
	6a	Gross rents Less rental	780,154 120,358					
	-	expenses						
	C	Rental income or (loss)	659,796					
	d	Net rental incor	me or (loss)		659,796			659,796
	7a	Gross amount from sales of assets other	(1) Securities 20,569,120	(II) Other 200,275				
	ь	than inventory Less cost or other basis and	17,929,720	3,900				
	l c	sales expenses Gain or (loss)	2,639,400	196,375				
	d	Net gain or (los			2,835,775	194,923		2,640,852
ıne	8a	Gross income for events (not included) \$						
Other Revenue		of contributions See Part IV, lin	reported on line 1c) se 18 a					
the	ь	Less direct ex	penses b					
٥	c 9a		(loss) from fundraising rom gaming activities is 19	events 🛌				
	ь	Less direct ex	a penses b					
	С 10а	Net income or (Gross sales of returns and allo		vities				
	Ь		a oods sold b					
	c	Net income or (Miscellaneous	(loss) from sales of inv	entory p - Business Code				
	11a	miscellaneous	s Nevellue	Dusiliess Code				
	ь							
	c							
	d	All other revenu	ue					
	e	Total. Add lines		🕨				
	12	Total revenue.	See Instructions .	🕨	F F25 F24	104.033		4.002.050
	J			•	5,535,521	194,923		4,093,059

	IX Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns All			lete column (A)	
	Check if Schedule O contains a response to any question in this Pa	rt IX			<u> </u>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	1,162,856	1,162,856		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	389,103	389,103		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16		,		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	69,000	10,350	58,650	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	86,028	16,178	69,850	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	8,194	1,401	6,793	
9	Other employee benefits	34,866	5,899	28,967	
10	Payroll taxes	12,790	2,189	10,601	
11	Fees for services (non-employees)	, , ,	,	,]	
а	Management				
b	Legal				
c	Accounting	42,550		42,550	
d	Lobbying	12,330		12,330	
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	133,386		133,386	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on	133,386		133,300	
	Schedule O)	2,170		2,170	
12	Advertising and promotion	1,938		1,938	
13	Office expenses	5,770		5,770	
14	Information technology				
15	Royalties				
16	Occupancy	7,521		7,521	
17	Travel	4,569		4,569	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	1,303		1,303	
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	18,112	10,456	7,656	
23	Insurance	10,408	13,.30	10,408	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)	10,100		10,100	
а	REPAIRS & MAINTENANCE	10,255		10,255	
b	DUES AND SUBSCRIPTIONS	2,227		2,227	
c	MISCELLANEOUS	999		999	
d	INTERNET FEES	519		519	
e	All other expenses	440		440	
25	Total functional expenses. Add lines 1 through 24e	2,003,701	1,598,432	405,269	
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here Friffollowing SOP 98-2 (ASC 958-720)	2,003,701	1,370,432	703,203	

Part X Balance Sheet

Par	t X	Balance Sheet Check if Schedule O contains a response to any question in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	253,700	1	84,886
	2	Savings and temporary cash investments	1,344,054	2	380,844
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		_	
s:	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		5	
लू				6	
Assets	7	Notes and loans receivable, net	4,084	7	3,584
_	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 5,491,488			
	ь	Less accumulated depreciation	· · ·	10c	4,776,761
	11	Investments—publicly traded securities	31,526,528	11	36,332,952
	12	Investments—other securities See Part IV, line 11	33,476	12	29,218
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	25,864	15	24,814
	16	Total assets. Add lines 1 through 15 (must equal line 34)	37,583,855	16	41,633,059
	17	Accounts payable and accrued expenses	1,124	17	1,174
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
<u>\$</u>	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
ख़		persons Complete Part II of Schedule L		22	
-	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule	116,826	25	93,037
	26	D	117,950	26	94,211
	26	Total liabilities. Add lines 17 through 25	117,930	20	94,211
φ		lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets		27	
<u> </u>	28	Temporarily restricted net assets		28	_
豆	29	Permanently restricted net assets		29	
r Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34.			
٥	30	Capital stock or trust principal, or current funds		30	
∯.	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Assets	32	Retained earnings, endowment, accumulated income, or other funds	37,465,905	32	41,538,848
Net /	33	Total net assets or fund balances	37,465,905	33	41,538,848
ž	34	Total liabilities and net assets/fund balances	37,583,855	34	41,633,059
		. otal natinged and net assets/initia buildiness	J.,365,635	J-4	-1,000,009

Par	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		5,5	535,521
2	Total expenses (must equal Part IX, column (A), line 25)	2			003,701
3	Revenue less expenses Subtract line 2 from line 1	3			531,820
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				
5	Net unrealized gains (losses) on investments	5			165,905 541,123
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		41,	538,848
Par	t XIII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. $ abla$
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed or	1		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both	arate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigl audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	n			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	е	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	require	3b		

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493134067633

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Total

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

2012

Open to Public Inspection

			(see instructions))	Yes	No	Yes	No	Yes	No			
(i) Nan suppo organiz	rted	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section	(iv) Is to organization col (i) listo your gove docume	on in ted in rning	(v) Did you the organi in col (i) o suppor	zation of your	(vi) Is organizat col (i) org in the U	ion in janized		mon	nount o etary port
h	Provide	the followir	ng information about	the supporte	ed organiza	ition(s)						
			lled entity of a perso							11g(iii)	
	(ii) A fa	mily memb	er of a person descri	bed in (i) ab	ove?					11g(ii	_	
			governing body of th	· ·		_				11g(i)		
		•	rectly or indirectly o	ontrols, eith	er alone or	together with	persons de	scribed in (ii))		Yes	No
g		ugust 17, 2 g persons?	2006, has the organi	zation accep	oted any gr	ft or contributi	on from any	of the				
-	check th	nis box									,	Γ
f	section	509(a)(2)	received a written de		•	,	J				. , ,	,
е Г			ox, I certify that the on managers and otl									
	the box	that descri	y supported organız bes the type of supp b Type II c	orting organ	ızatıon and	l complete line	s 11e thro	ugh 11h				
11 厂			ganized and operated									
10			ganızed and operated									
		_	janization after June				-		,			
			oss investment inco	•	-		•	` '				
9	_		ities related to its ex					•	-		_	55
8 9		-	described in sectior at normally receives			-	-	hutions mam	harchir	n faec s	and area	
_	describe	ed in sectio	n 170(b)(1)(A)(vi).	(Complete P	art II)		-			3 = 3	l	
7 F		•	at normally receives	_					rom the	e genera	al public	c
6			local government or	•	al unit dec	cribed in sect	ion 170(h)/	1)(Δ)(v)				
5	_	•	erated for the benefi A)(iv). (Complete P	_	or univers	sity owned or d	perated by	a governmen	tai unit	aescrit	ea in	
			ty, and state	+ of p calla == -			المعالم ما المعاملات	5.0010.000.000	+	docari		
4	A medic	al research	n organization operat	ted in conjun	ction with	a hospital des	cribed in se	ction 170(b)((1)(A)(iii). Ent	er the	
з Г			perative hospital se	,,,,,,		•	on 170(b)(1)(A)(iii).				
2		-	I in section 170(b)(1					-/(-/(/(-/-				
1 F		•	on of churches, or as	•			•	•				
he organi			blic Charity Star e foundation becaus						nstruci	tions.		
Dort T	Popes	m for Du	blic Charity Sta	tue (All or	220172100	os must som	nlata thic	34-0907		hone		
HE VAN WEI	RI COUNTY	FOUNDATION										

instructions

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do not 1,038,199 1,889,647 1,185,019 1,888,137 1,247,539 7,248,541 include any "unusual grants ") 7 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 1,038,199 1,889,647 1,185,019 1,888,137 1,247,539 7,248,541 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 2,646,037 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column **Public support.** Subtract line 5 from 4,602,504 line 4 Section B. Total Support Calendar year (or fiscal year (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 **(e)** 2012 (f) Total beginning in) 🟲 1,888,137 1,038,199 1,889,647 1,185,019 1,247,539 7,248,541 Amounts from line 4 Gross income from interest, dividends, payments received on 1,395,746 1,572,565 securities loans, rents, royalties 1,142,305 1,184,256 1,335,084 6,629,956 and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support (Add lines 7 13,878,497 through 10) Gross receipts from related activities, etc (see instructions) 12 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check Section C. Computation of Public Support Percentage 14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) 14 33 160 % Public support percentage for 2011 Schedule A, Part II, line 14 15 15 32 860 % 16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported ►V organization b 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2012 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt

	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
	business under section 513			-			
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
<i>7</i> a	and 3 received from disqualified						
	persons						
b	Amounts included on lines 2 and 3						
_	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	Unrelated business taxable income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated						
11	business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support. (Add lines 9, 10c,						
	11, and 12)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					<u> </u>
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,		
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

THE FOUNDATION HAS A REPRESENTATIVE GOVERNING BOARD OF TRUSTEES REPRESENTING THE BROAD INTEREST OF THE PUBLIC, MAINTAINS A CONTINUOUS AND BONA FIDE PROGRAM FOR SOLICITATION OF FUNDS FROM THE GENERAL PUBLIC, GOVERNMENTAL UNITS, AND PUBLIC CHARITIES, AND PROVIDES FACILITIES, SERVICES AND SCHOLARSHIPS DIRECTLY FOR THE BENEFIT OF THE GENERAL PUBLIC ON A CONTINUING BASIS

Explanation

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493134067633

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions.

Supplemental Financial Statements

Open to Public Inspection

	me of the organization E VAN WERT COUNTY FOUNDATION		Employer identification number
,,,,	L VAIN WERT COUNTY FOUNDATION		34-0907558
Pa	rt I Organizations Maintaining Donor Ad		nds or Accounts. Complete if the
	organization answered "Yes" to Form 990	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	19	(b) I unus and other accounts
2	Aggregate contributions to (during year)	354,823	
3	Aggregate grants from (during year)	311,091	
4	Aggregate value at end of year	234,444	
5	Did the organization inform all donors and donor advis	ors in writing that the assets held in dono	r advised
	funds are the organization's property, subject to the or		✓ Yes
6	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the bene conferring impermissible private benefit?		
Pa	rt II Conservation Easements. Complete if	the organization answered "Yes" to	Form 990, Part IV, line 7.
2	Purpose(s) of conservation easements held by the org Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a	or education) Preservation of an I	ertified historic structure
	easement on the last day of the tax year	Г	Hald at the Field of the Vaco
_	Total number of conservation easements	-	Held at the End of the Year
a b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified histo	oric structure included in (a)	2c 2c
d	Number of conservation easements included in (c) acc	` ` _	20
u	historic structure listed in the National Register	quired after 0/17/00, and not on a	2d
3	Number of conservation easements modified, transfer the tax year ▶	red, released, extinguished, or terminated	d by the organization during
4	Number of states where property subject to conservat	ion easement is located ►	<u>_</u>
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring, inspection, hand	ling of violations, and Yes No
6	Staff and volunteer hours devoted to monitoring, inspe	ecting, and enforcing conservation easem	ents during the year
7	Amount of expenses incurred in monitoring, inspecting	g, and enforcing conservation easements	during the year
8	Does each conservation easement reported on line 2(and section 170(h)(4)(B)(II)?	d) above satisfy the requirements of sect	(ion 170(h)(4)(B)(i)
9	In Part XIII, describe how the organization reports co balance sheet, and include, if applicable, the text of th the organization's accounting for conservation easeme	e footnote to the organization's financial :	
Par	t III Organizations Maintaining Collection Complete if the organization answered "Y	s of Art, Historical Treasures, o	or Other Similar Assets.
1a	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar assesservice, provide, in Part XIII, the text of the footnote	116 (ASC 958), not to report in its reven ets held for public exhibition, education, o	r research in furtherance of public
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar assesservice, provide the following amounts relating to thes	ets held for public exhibition, education, o	
	(i) Revenues included in Form 990, Part VIII, line 1		► \$
	(ii) Assets included in Form 990, Part X		► \$
2	If the organization received or held works of art, histor following amounts required to be reported under SFAS		
а	Revenues included in Form 990, Part VIII, line 1		▶ \$

b Assets included in Form 990, Part X

▶\$___

3	Using the organization's acquisition, access	ion and other record	c chac	k any of the	following that	aro a cignificant i	Assets (d	
	collection items (check all that apply)	ion, and other record	s, cliec _	_	_	_	ise of its	
а	Public exhibition		d	Loan or	exchange prog	rams		
b	Scholarly research		е Г	Other				
c	Preservation for future generations							
4	Provide a description of the organization's co Part XIII	ollections and explain	n how th	ney further t	he organization	n's exempt purpos	e in	
5	During the year, did the organization solicit						–	
Do.	assets to be sold to raise funds rather than to rt IV Escrow and Custodial Arrang						Yes	No
	Part IV, line 9, or reported an ar					a res to form	1 990,	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	lian or other intermed	diary foi	r contributio	ns or other ass	sets not	√ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	I and complete the f	ollowing	g table	-			
					-		Amount	
С	Beginning balance				-	1c	3	<u>,716,211</u>
d	Additions during the year				-	1d		298,566
е	Distributions during the year				-	1e		184,497
f	Ending balance				L	1f	3	,830,280
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?				☐ Yes	✓ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the e	explana	tion has bee	en provided in F	Part XIII		Γ
Pa	rt V Endowment Funds. Complete							
_		(a)Current year	(b)Prio			(d)Three years bac		years back
1a	Beginning of year balance	37,275,393		36,851,396	32,789,703 1,061,863			36,819,915 585,705
b	Contributions	922,895		1,637,816	1,061,86.	1,639,43	08	585,705
С	Net investment earnings, gains, and losses	4,699,155		185,974	4,281,222	5,864,6	52	-9,239,647
d	Grants or scholarships	1,274,683		1,056,737	915,262	727,08	85	1,325,551
е	Other expenditures for facilities and programs	10,456		10,968	10,938	10,74	14	10,287
f	Administrative expenses	307,900		332,088	355,190	355,92	27	450,786
g	End of year balance	41,304,404	3	37,275,393	36,851,396	32,789,70	03	26,379,349
2	Provide the estimated percentage of the cur	rent year end balance	e (lıne 1	lg, column (a)) held as			
а	Board designated or quasi-endowment 🕨							
_	Permanent endowment ▶ 100 000 %							
Ь	i cimanent chaovinche p							
b c	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c sho	uld equal 100%						
	Temporarily restricted endowment From The percentages in lines 2a, 2b, and 2c shows Are there endowment funds not in the posse		tıon tha	t are held a	nd admınıstere	d for the		T
С	Temporarily restricted endowment From The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by	ssion of the organiza		t are held a	nd admınıstere	_	Yes	_
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by (i) unrelated organizations	ssion of the organiza					Ba(i)	No
с За	Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by (i) unrelated organizations	ssion of the organiza						_
С За	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by (i) unrelated organizations	ssion of the organiza	on Sch	 edule R? .			Ba(i) Ba(ii)	No
c 3a b	Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by (i) unrelated organizations	ssion of the organiza	on Sch	· · · · · · · · · · · · · · · · · · ·			Ba(i) Ba(ii)	No
c 3a b	Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c sho. Are there endowment funds not in the posse organization by (i) unrelated organizations	ssion of the organiza	on Schowment	· · · · · · · · · · · · · · · · · · ·	her (b) Cost or o	other (c) Accumula	3a(i) 3b ted (d) E	No
c 3a b 4 Par	Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by (i) unrelated organizations	ssion of the organiza	on Schowment	edule R? . t funds X, line 10 (a) Cost or ot	her (b)Cost or o	other (c) Accumula	3a(i) 3b ted (d) E	No No
b 4 Par	Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by (i) unrelated organizations	ssion of the organiza	on Schowment	edule R?t funds X, line 10. (a) Cost or ot oasis (investme	her (b)Cost or cent) basis (oth	other (c) Accumula depreciation	3a(i) 3b ted (d) E	No No No
3a b 4 Par	Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by (i) unrelated organizations	ssion of the organiza	on Schowment	edule R?t funds X, line 10. (a) Cost or ot pasis (investment)	her (b)Cost or cent) basis (oth	ther (c) Accumula depreciation (648)	3a(i)	No No Book value
c 3a b 4 Pai	Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by (i) unrelated organizations	ssion of the organiza	on Schowment	edule R?t funds X, line 10. (a) Cost or ot pasis (investment)	her (b)Cost or cent) basis (other, 277 107	cother (c) Accumula depreciation (648 (239 334 335	3a(i) 3a(ii) 3b ted (d) E	No No No No No No No No No No No No No N
b 4 Par	Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by (i) unrelated organizations	ssion of the organiza	on Schowment	edule R?t funds X, line 10. (a) Cost or ot pasis (investment)	her (b)Cost or cent) basis (other, 277 107	cother (c) Accumula depreciation (648 (239 334 335	3a(i) 3b ted (d) E	No No No Book value 3,878,925 583,001 306,121

Part VII Investments—Other Securities. See	Form 990, Part X, line 12	2.	
(a) Description of security or category	(b)Book value		d of valuation
(including name of security)		Cost or end-of	-year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See			
(a) Description of investment type	(b) Book value		d of valuation - year market value
		Cost of elia-of	- year market value
Part IX Other Assets. See Form 990, Part X, col (B) line 13)			
(a) Descrip			(b) Book value
(a) Descrip	CIOII		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	L.	
Part X Other Liabilities. See Form 990, Part X (a) Description of liability	, line 25. (b) Book value		
-	(S) DOOK VALUE		
Federal income taxes			
DEFERRED REAL ESTATE DAMAGES	85,482		
DUE TO WRIGHT TRUST	7,555		
DESIGNATED TO OTHER BENEFICIARIES			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	22.22		
2. Fin 48 (ASC 740) Footpote In Part XIII provide the tex	93,037		

Par	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue	per Ret	urn
1	Total revenue, gains, and other support per audited financial statements	1	6,188,519
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities]	
c	Recoveries of prior year grants	1	
d	Other (Describe in Part XIII)]	
e	Add lines 2a through 2d	2e	652,998
3	Subtract line 2e from line 1	3	5,535,521
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)]	
c	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	5,535,521
Par	Reconciliation of Expenses per Audited Financial Statements With Expenses	s per R	eturn
1	Total expenses and losses per audited financial statements	1	2,003,701
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities]	
b	Prior year adjustments]	
c	Other losses		
d	Other (Describe in Part XIII).............2d]	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	2,003,701
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)]	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	2,003,701

Part XIII Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
EXPLANATION FOR UNREPORTED CONTRIBUTIONS OR ASSETS	LINE 1B	THE VAN WERT COUNTY FOUNDATION IS THE TRUSTEE FOR SIX CHARITABLE REMAINDER TRUSTS THE FOUNDATION HAS A SIGNIFICANT REMAINDER INTEREST IN EACH OF THE CHARITABLE REMAINDER TRUSTS EACH CHARITABLE REMAINDER TRUST FILES ITS OWN FEDERAL TAX FORM 5227
INTENDED USES FOR ENDOWMENT FUNDS	LINE 4	ENDOWMENT FUNDS ARE INVESTED SO THAT THE INCOME CAN BE USED TO FURTHER THE MENTAL, MORAL, INTELLECTUAL OR PHYSICAL WELFARE AND ADVANCEMENT OF CITIZENS OF VAN WERT COUNTY, OHIO AND SUCH OTHER AREAS AS DIRECTED BY DONORS
REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER	, , , , , , , , , , , , , , , , , , , ,	CHANGE IN VALUE OF CHARITABLE REMAINDER TRUSTS 111,875

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990

OMB No 1545-0047

DLN: 93493134067633

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

lame of the organization						Employer identification	on number
THE VAN WERT COUNTY FOUNDAT	ION					34-0907558	
Part I General Information	on on Grants and	d Assistance				•	
 Does the organization maintain the selection criteria used to av Describe in Part IV the organiz 	ward the grants or as	sistance?					▽ Yes □ No
Part II Grants and Other A Form 990, Part IV, lin							es" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							
2 Enter total number of section 5		ment organizations lis	ted in the line 1 table .			<u> </u>	27
3 Enter total number of other orga						_	1

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d) A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) SCHOLARSHIPS TO STUDENTS	223	303,502			
(2) SENIOR/SECRETARIAL AWARDS	6	6,000			
(3) COMMUNITY CONCERT EXPENSE		69,146			
(4) FAIR AWARDS	325	10,455			

Part IV Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Complete this part to provide the information required in Part 1, line 2, Part 111, Column (b), and any other additional information						
Identifier	Return Reference	Explanation				
	LINE 2	THE VAN WERT COUNTY FOUNDATION MAINTAINS EXPENDITURE RESPONSIBILITY FOR ANY GRANT FUNDS AWARDED TO ENTITIES OTHER THAN GOVERNMENTAL UNITS OR 501(C)(3) ORGANIZATIONS REPORTS AND DOCUMENTATION ARE OBTAINED FROM THESE ENTITIES TO ENSURE FUNDS ARE SPENT ACCORDING TO THE PURPOSE DESIGNATED				

Schedule I (Form 990) 2012

Software ID: **Software Version:**

EIN: 34-0907558

Name: THE VAN WERT COUNTY FOUNDATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of	(b) EIN	(c) IRC Code section (d) Amount of cash	(e) A mount of non-	(f) Method of	(g) Description of	(h) Purpose of grant				

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CULVER EDUCATIONAL FOUNDATION1300 ACADEMY RD 153 CULVER,IN 46511	35-0868071	3	16,000				SCHOLARSHIP
FIRST PRESBYTERIAN CHURCH110 W CRAWFORD VAN WERT, OH 45891	34-4428937	3	62,240				GENERAL USE
FIRST UNITED METHODIST CHURCH113 W CENTRAL AVE VAN WERT,OH 45891	34-4451869	3	14,250				GENERAL & RECITALS
OSU EXTENSION OF VAN WERT COUNTY1055 S WASHINGTON ST VAN WERT, OH 45891	31-6025986	GOV	10,500				4-H PROGRAM CAMP
OSU EXTENSION OF VAN WERT COUNTY1055 S WASHINGTON ST VAN WERT,OH 45891	31-6025986	GOV	9,500				RESEARCH
PLEASANT TOWNSHIP CEMETARY10968 WOODLAND AVE VAN WERT,OH 45891	34-6401609	GOV	8,000				MAINTENANCE
SIGMA CHI FOUNDATIONS1714 HINMAN AVE EVANSTON,IL 60201	36-2208386	3	8,000				GENERAL USE
VAN WERT AREA BOYCHOIR649 S WASHINGTON ST VAN WERT,OH 45891	51-0509463	3	5,500				DIRECTOR & PIANIST
VAN WERT AREA PERFORMING ARTS CTR 10700 ST RT 118 VAN WERT,OH 45891	87-0753478	3	75,000				O PERATIO NAL GRANT
VAN WERT AREA PERFORMING ARTS CTR 10700 ST RT 118 VAN WERT,OH 45891	87-0753478	3	27,981				OPERATIONAL PURPOSES
VAN WERT CITY SCHOOLS 205 W CRAWFORD VAN WERT,OH 45891	34-6401505	GOV	12,842				NEEDY CHILDREN
VAN WERT CITY SCHOOLS 205 W CRAWFORD VAN WERT,OH 45891	34-6401505	GOV	17,000				MUSIC PROGRAMS
VAN WERT CITY SCHOOLS 205 W CRAWFORD VAN WERT,OH 45891	34-6401505	GOV	25,000				TENNIS COMPLEX
VAN WERT CITY SCHOOLS 205 W CRAWFORD VAN WERT,OH 45891	34-6401505	GOV	25,000				ATHLETIC COMPLEX
VAN WERT CITY SCHOOLS 205 W CRAWFORD VAN WERT,OH 45891	34-6401505	GOV	111,069				TENNIS COMPLEX
VAN WERT CO AIRPORT AUTHORITY1400 LEESON AVE VAN WERT,OH 45891	34-1232118	GOV	6,000				HOT AIR AFFAIR
VAN WERT COUNCIL ON AGING220 FOX RD VAN WERT,OH 45891	34-1158231	GOV	20,000				BUILDING CAMPAIGN
VAN WERT COUNTY HOSPITAL1250 S WASHINGTON ST VAN WERT,OH 45891	34-4429514	GOV	17,775				MATERNITY WARD/GENL
VAN WERT COUNTY HOSPITAL1250 S WASHINGTON ST VAN WERT,OH 45891	34-4429514	GOV	100,000				EMERGENCY ROOM
VAN WERT COUNTY SALVATION ARMY1180 S WASHINGTON ST PO BOX 791	13-5562351	3	9,000				FOOD & EMERG ASSIST
VAN WERT, OH 45891 VAN WERT PARK DISTRICT 1185 PROFESSIONAL DR VAN WERT, OH 45891	34-6401507	3	58,527				PARK IMPROVEMENTS
VAN WERT RECREATIONAL & PARKS DEPT515 E MAIN ST VAN WERT, OH 45891	34-6401506	GOV	17,334				HIESTAND WOODS
VAN WERT SERVICE CLUB PO BOX 161 VAN WERT,OH 45891	20-5216697	4	10,406				SCHOLARSHIPS/BANQUET
VANTAGE CAREER CENTER818 N FRANKLIN VAN WERT, OH 45891	34-1146218	GOV	68,130				GED TEST, EDUC PROG
WASSENBURG ART CENTER643 S WASHINGTON ST VAN WERT,OH 45891	34-1377187	3	113,593				OPERATION OF ART CTR
YMCA241 W MAIN ST VAN WERT,OH 45891	34-4428264	3	77,150				GENERAL/DEBT/MAINT
YWCA408 E MAIN ST VAN WERT, OH 45891	34-4430540	3	30,630				GENERAL
YWCA408 E MAIN ST VAN WERT,OH 45891	34-4430540	3	10,000				LIGHT FIXTURES

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493134067633

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury
Internal Revenue Service

SCHEDULE 0

(Form 990 or 990-EZ)

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

2012

OMB No 1545-0047

Open to Public Inspection

Name of the organization
THE VAN WERT COUNTY FOUNDATION

Employer identification number

34-0907558

ldentifier	Return Reference	Explanation
RELATED PARTY INFORMATION AMONG OFFICERS	FORM 990, PAGE 6, PART VI, LINE 2	BRUCE KENNEDY BUS RELATIONSHIP- LARRY GREVE LARRY GREVE BUS RELATIONSHIP-BRUCE KENNEDY
ORGANIZATION'S PROCESS USED TO REVIEW FORM 990	FORM 990, PAGE 6, PART VI, LINE 11B	A COPY OF THE 990 WAS PROVIDED TO THE EXECUTIVE SECRETARY PRIOR TO FILING BEFORE FILING THE 990, THE EXECUTIVE SECRETARY REVIEWS THE 990 WITH THE CPA IN DETAIL A GENERAL REVIEW IS PERFORMED AT THE BOARD MEETING IN JUNE BY THE FULL GOVERNING BOARD
ENFORCEMENT OF CONFLICTS POLICY	FORM 990, PAGE 6, PART VI, LINE 12C	EACH TRUSTEE, PRINCIPAL OFFICER AND MEMBER OF A COMMITTEE TO WHOM THE BOARD OF TRUSTEES HAS DELEGATED POWERS ANNUALLY SIGNS A STATEMENT THAT AFFIRMS THAT SUCH PERSON HAS RECEIVED A COPY OF THE POLICY, HAS READ AND UNDERSTANDS THE POLICY, HAS AGREED TO COMPLY WITH THE POLICY, AND UNDERSTANDS THAT THE FOUNDATION IS CHARITABLE AND IN ORDER TO MAINTAIN ITS FEDERAL TAX EXEMPTION IT MUST ENGAGE PRIMARILY IN ACTIVITIES WHICH ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES COMPLIANCE IS MONITORED AT LEAST ANNUALLY DISCIPLINARY AND CORRECTIVE ACTION IS TAKEN FOR ANY VIOLATIONS OF THE CONFLICT OF INTEREST POLICY
COMPENSATION PROCESS FOR TOP OFFICIAL	FORM 990, PAGE 6, PART VI, LINE 15A	THE EXECUTIVE COMMITTEE REVIEWS THE PERFORMANCES AND SALARIES OF ALL EMPLOYEES AND RECOMMENDS ANY SALARY ADJUSTMENTS TO THE BOARD OF TRUSTEES ANY SALARY AJUSTMENTS ARE APPROVED BY THE BOARD OF TRUSTEES
GOVERNING DOCUMENTS DISCLOSURE EXPLANATION	FORM 990, PAGE 6, PART VI, LINE 19	THE FOUNDATION'S TAX RETURN, GOVERNING DOCUMENTS, FINANCIAL STATEMENTS, AND CONFLICT OF INTEREST POLICY ARE AVAILABLE FOR REVIEW UPON REQUEST TO THE TRUSTEES OR EXECUTIVE SECRETARY COPIES ARE MADE IF REQUESTED
RECONCILIATION OF CHANGES - OTHER	FORM 990, PART XI, LINE 9	CHANGE IN VALUE OF CHARITABLE REMAINDER TRUSTS 111,875
OTHER CHANGES IN NET ASSETS EXPLANATION	FORM 990, PART XI, LINE 9	CHANGE IN VALUE OF CRT NOT IN 990 (SEE SCH D) 111,875

SCHEDULE R Related Or

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

THE VAN WERT COUNTY FOUNDATION

DLN: 93493134067633

2012

OMB No 1545-0047

Open to Public

Employer identification number

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

				34-09075	58			
Part I Identification of Disregarded Entities (Comp	lete ıf the organızatıo	n answered "Yes" t	o Form 990, P	art IV, line 33.)				
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets		(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Organi or more related tax-exempt organizations during to	i zations (Complete i the tax year.)	f the organization a	answered "Yes	'' to Form 990, P	art IV,	, line 34 because i	t had o	ne
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sec	tion (e) Public charity (if section 501)	status (c)(3))	(f) Direct controlling entity	Section (13) co en	ontrolle tity?
(1) VAN WERT AREA PERFORMING ARTS FOUND	PERF ARTS	ОН	3	11A		VW CO FOUN	Yes Yes	No
138 E MAIN ST								
VAN WERT, OH 45891 87-0753478								
For Paperwork Reduction Act Notice, see the Instructions for Form 990). 	Cat No 501	35Y			Schedule R (For	m 990) 2	2012

(a) Name, address, and EIN o related organization	f	(b) Primary activity	(c) Legal domicile (state or foreign country)	entity	(e) Predominant Income(related, unrelated, excluded from tax under sections 512-	(f) Share of total income	(g) Share of end-of-yea assets	(h Disprop r allocat	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	ral or	(k) Percentae ownersh
					514)			Yes	No		Yes	No	
V Identification of Related Or line 34 because it had one or r	ganizations Taxa nore related organi	ble as a Corpo zations treated a	ration s a cor	or Trust (poration or	Complete if t	the organi the tax ye	zatıon ar ar.)	swere	ed "Ye	s" to Form	990,	Part	IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domıcıle (state or foreign country)		(d) Direct controlli entity	(e) Type of entro (C corp, S corp, or trust)		otal Share e of	(g) e of end- year ssets		(h) ercentage wnership	Section (b) conti	(13)	
		,,			,						Yes		No

Part	V Transaction	s With Related Organizations (Complete if the organizations	ion answered "Ye	es" to Form	990, Part IV, line	e 34, 35b, or 36.)			
No.	ote. Complete line 1	fany entity is listed in Parts II, III, or IV of this schedule						Yes	No
1 Duri	ng the tax year, dıd t	ne orgranization engage in any of the following transactions with one o	or more related orga	ınızatıons lıs	ted in Parts II-IV?				
a R	eceipt of (i) interest	(ii) annuities (iii) royalties or (iv) rent from a controlled entity					1a		No
b G	ift, grant, or capital o	ontribution to related organization(s)					1b	Yes	
c G	ift, grant, or capital c	ontribution from related organization(s)					1c	Yes	
d L	oans or loan guarant	es to or for related organization(s)					1d		No
e L	oans or loan guarant	ees by related organization(s)					1e		No
							1f		No
	ividends from related						\vdash		
_	ale of assets to relat						1g 1h		No No
		m related organization(s)					1i		No
	-	h related organization(s)					1j		No
j Le	ease of facilities, equ	pment, or other assets to related organization(s)					1)		
k L	ease of facilities, equ	ipment, or other assets from related organization(s)					1k		No
I Pe	erformance of service	s or membership or fundraising solicitations for related organization(s)				11		No
m Pe	erformance of service	s or membership or fundraising solicitations by related organization(s)				1m		No
n Sh	narıng of facılıtıes, eq	uipment, mailing lists, or other assets with related organization(s)					1n		No
o S	haring of paid employ	ees with related organization(s)					10	Yes	
n P	aimhiireamant naid t	o related organization(s) for expenses					1p	Yes	
-	·	y related organization(s) for expenses					1q		No
q R	embursement paid i	y related organization(s) for expenses					-4		
r 0	ther transfer of cash	or property to related organization(s)					1r		No
s 0	ther transfer of cash	or property from related organization(s)					1s		No
I f	the answer to any of	the above is "Yes," see the instructions for information on who must	complete this line,	ıncludıng cov	vered relationships a	and transaction thresholds			
	,	(a) Name of other organization	() Trans	b) saction (a-s)	(c) Amount involved	(d) Method of determining am	ount II	nvolved	
(1) VAN '	WERT AREA PERFORMING	ARTS FOUND	В		75,560				
(2) VAN '	WERT AREA PERFORMING	ARTS FOUND	С		2,227				
(3) VAN '	WERT AREA PERFORMING	ARTS FOUND	0		27,981				
(4) VAN '	WERT AREA PERFORMING	ARTS FOUND	Р		1,761				

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross)

revenue) that was not a related organization See instructions re	garding exclu	sion for ce		nent	partnerships				`	,		_	
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512- 514)	org	(e) all partners section 501(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
												1	

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier Return Reference Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493134067633 OMB No 1545-0172 Depreciation and Amortization (Including Information on Listed Property) Department of the Treasury Internal Revenue Service (99) See separate instructions. ► Attach to your tax return. Sequence No 179 Business or activity to which this form relates **Identifying number** INDIRECT DEPRECIATION Name(s) shown on return THE VAN WERT COUNTY FOUNDATION 34-0907558 Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 500,000 1 Total cost of section 179 property placed in service (see instructions) • • • • • • 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 2,000,000 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0- · · · · · · Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married 5 (b) Cost (business use 6 (a) Description of property (c) Elected cost only) 6 7 Listed property Enter the amount from line 29 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 Tentative deduction Enter the smaller of line 5 or line 8 · · · · · · · · 9 Carryover of disallowed deduction from line 13 of your 2011 Form 4562 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2013 Add lines 9 and 10, less line 12 . | 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 Property subject to section 168(f)(1) election 15 MACRS Depreciation (Do not include listed property.) (See instructions.) MACRS deductions for assets placed in service in tax years beginning before 2012 · · · · · · 17,242 If you are electing to group any assets placed in service during the tax year into one or more general Section B—Assets Placed in Service During 2012 Tax Year Using the General Depreciation System (c) Basis for (b) Month and depreciation (a) Classification of (d) Recovery (g)Depreciation year placed in (business/investment (e) Convention (f) Method deduction period property service only—see instructions) 19a 3-year property 839 5 0 НΥ **b** 5-year property S/L 84 c 7-year property 10.993 7 0 ΗY S/I 786 d 10-year property e 15-year property f 20-year property S/L g 25-year property 25 yrs 27 5 yrs MM S/L h Residential rental property 27 5 yrs ММ S/L ΜМ i Nonresidential real 39 yrs property ΜМ Section C—Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System 20a Class life S/L **b** 12-year 12 yrs S/L **c** 40-year MMS/L 40 yrs **Summary** (see instructions) Part IV 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter

23 For assets shown above and placed in service during the current year, enter the

23

here and on the appropriate lines of your return Partnerships and S corporations—see instructions • •

18,112

22

Part V

Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable. **epreciation and Other Information (Caution:** See the instructions for limits for passenger automobiles.

24a Do you have evider	nce to support	the business/inve	estment u	ıse claıme	d? ┌ Yes	Гпо		24	lb If "Y	es," is	the ev	idence	written?	,	s L	0
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage		i) r other sıs	(busines	(e) deprecia s/investr e only)		(f) Recovery period	Met	g) thod/ ention		(ŀ Depred dedu	iation/		(i) Electe section cost	179
25Special depreciation allo		• •	y placed	ın service	during the	tax year	and u	used more	e than							
50% in a qualified busi	•									25						
26 Property used more	e than 50% I	in a qualified b	usiness	use	T						1			$\overline{}$		
		%									+			+		
		%														
27 Property used 50%	orless in a		ness us	е	1				lo //		_					
		%							S/L - S/L -		+			4		
		%							S/L -		+			_		
28 Add amounts in co	olumn (h), lır	es 25 through	27 En	ter here	and on lu	ne 21,	page	1	28							
29 Add amounts in co	olumn (ı), lın	e 26 Enterhe	re and o	n line 7,	page 1								29			
	. , , ,				mation	on U	se o	of Veh	icles							
omplete this section	for vehicles	used by a sol	e propri	etor, par	tner, or o	ther "n	nore	than 5%	owne	r," or	relate	ed per	son			
f you provided vehicles to	your employee	es, first answer th	e questio	_	_			n except		mpletir T						
30 Total business/inv			ng the		a) icle 1	Vehi	b) cle 2	l ve	(c) shicle 3	3 1	(c Vehic	-		e) icle 5		f) icle 6
year (do not inclu	de commutir	ig miles) .	•	- 7011		1					• • • • • • • • • • • • • • • • • • • •		1		1	
31 Total commuting i	miles driven	during the yea	r .													
32 Total other persor	nal(noncomm	nutina) miles d	rıven										+			
33 Total miles driven	•									-+			+			
through 32	· · ·	· · ·														
34 Was the vehicle a	vaılable for p	ersonal use		Yes	No	Yes	No	Yes	N	0 1	es/	No	Yes	No	Yes	No
during off-duty ho	urs? .															
35 Was the vehicle u	sed primarily	by a more tha	ın 5%											1		
owner or related p	erson? .													↓		
36 Is another vehicle	available fo	r personal use	?.													
Section Sectio	ns to determ														not mo	re tha
37 Do you maintain a employees?			hat prof	nibits all	personal	use of	vehi	cles, in	cluding	comr	nutın	g, by	your	Y	'es	No
employees.						• •	•		• •			•				
38 Do you maintain a employees? See the												your •				
39 Do you treat all us	e of vehicles	s by employee	s as per	rsonal us	se?											
40 Do you provide movehicles, and reta				oyees,o	btaın ınfo	rmatio	n fro	m your	employ	ees a	bout	the us	se of			
41 Do you meet the r	eauirements	concernina ai	ialified a	automoh	ıle demor	nstratio	n us	e? (See	ınstru	ctions) -					
Note: If your answ	-							=			-					
	rtization	, , , , , , , , , , , , , , , , , , , ,	. 15 10.	, do 110	e compre			7 101 1110			110102					
Allio	T CIZACIOII	(b)			_	Т			Т	(e)						
(a)		Date			c) tızable		((d) Code	Αn	nortiza	ition		Λmo	(f) ortizati	on for	
Description of c	osts	amortization			ount			ection		period				his ye		
40.4		begins	2225		,				_ p∈	ercent	aye					
42 A mortization of co	sts that beg	ins during you	r 2012	tax year	(see ins	tructioi	ns)									
						-			-							
										-						
43 A mortization of co	sts that beg	an before your	2012 t	ax year			•			· L	43					
44 Total. Add amount	ts ın column	(f) See the ins	structio	ns for wh	nere to re	port					44					

Form 4562
Department of the Treasury
Internal Revenue Service (99)

Department of the See separate instructions. As Filed Data
Department of the Treasury
Internal Revenue Service (99)

Department of the Treasury
Internal Revenue Service (99)

Department of the Treasury
Internal Revenue Service (99)

See separate instructions. Attach to your tax return.

DLN: 93493134067633

OMB No 1545-0172

2012

Attachment
Sequence No 179

Business or activity to which this form relates

FARMS-VAN WERT & PAULD CO'S Name(s) shown on return THE VAN WERT COUNTY FOUNDATION 34-0907558 **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I. 500,000 1 Total cost of section 179 property placed in service (see instructions) • • • • • • 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 2,000,000 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0- · · · · · · · Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married 5 (b) Cost (business use 6 (a) Description of property (c) Elected cost only) 6 7 Listed property Enter the amount from line 29 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 Tentative deduction Enter the smaller of line 5 or line 8 · · · · · · · · 9 Carryover of disallowed deduction from line 13 of your 2011 Form 4562 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2013 Add lines 9 and 10, less line 12 . | 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 Property subject to section 168(f)(1) election 15 MACRS Depreciation (Do not include listed property.) (See instructions.) MACRS deductions for assets placed in service in tax years beginning before 2012 · · · · · · 24.483 If you are electing to group any assets placed in service during the tax year into one or more general Section B—Assets Placed in Service During 2012 Tax Year Using the General Depreciation System (c) Basis for (b) Month and depreciation (a) Classification of (d) Recovery (g)Depreciation year placed in (business/investment (e) Convention (f) Method deduction period property service only—see instructions) 19a 3-year property **b** 5-year property c 7-year property d 10-year property **e** 15-year property f 20-year property S/L g 25-year property 25 yrs 27 5 yrs MM S/L h Residential rental property 27 5 yrs ММ S/L ΜМ i Nonresidential real 39 yrs property ΜМ Section C—Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System 20a Class life S/L **b** 12-year 12 yrs S/L **c** 40-year ММ S/L 40 yrs **Summary** (see instructions) Part IV 21 Listed property Enter amount from line 28 · · · · · · · · · · · 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions • • 22 24,483 23 For assets shown above and placed in service during the current year, enter the 23

Identifying number

Part V

Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable. **epreciation and Other Information (Caution:** See the instructions for limits for passenger automobiles.

24a Do you have evider	nce to support	the business/inve	estment u	ıse claıme	d? ┌ Yes	Гпо		24	lb If "Y	es," is	the ev	idence	written?	,	s L	0
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage		i) r other sıs	(busines	(e) deprecia s/investr e only)		(f) Recovery period	Met	g) thod/ ention		(ŀ Depred dedu	iation/		(i) Electe section cost	179
25Special depreciation allo		• •	y placed	ın service	during the	tax year	and u	used more	e than							
50% in a qualified busi	•									25						
26 Property used more	e than 50% I	in a qualified b	usiness	use	T						1			$\overline{}$		
		%									+			+		
		%														
27 Property used 50%	orless in a		ness us	е	1				lo //		_					
		%							S/L - S/L -		+			-		
		%							S/L -		+			_		
28 Add amounts in co	olumn (h), lır	es 25 through	27 En	ter here	and on lu	ne 21,	page	1	28							
29 Add amounts in co	olumn (ı), lın	e 26 Enterhe	re and o	n line 7,	page 1								29			
	. , , ,				mation	on U	se o	of Veh	icles							
omplete this section	for vehicles	used by a sol	e propri	etor, par	tner, or o	ther "n	nore	than 5%	owne	r," or	relate	ed per	son			
f you provided vehicles to	your employee	es, first answer th	e questio	_	_			n except		mpletir T						
30 Total business/inv			ng the		a) icle 1	Vehi	b) cle 2	l ve	(c) shicle 3	3 1	(c Vehic	-		e) icle 5		f) icle 6
year (do not inclu	de commutir	ig miles) .	•	- 7011	1010 1	1					• • • • • • • • • • • • • • • • • • • •		1		1	
31 Total commuting i	miles driven	during the yea	r .													
32 Total other persor	nal(noncomm	nutina) miles d	rıven										+			
33 Total miles driven	•									-+			+			
through 32	· · ·	· · ·														
34 Was the vehicle a	vaılable for p	ersonal use		Yes	No	Yes	No	Yes	N	0 1	es/	No	Yes	No	Yes	No
during off-duty ho	urs? .															
35 Was the vehicle u	sed primarily	by a more tha	ın 5%											1		
owner or related p	erson? .													↓		
36 Is another vehicle	available fo	r personal use	?.													
Section Sectio	ns to determ														not mo	re tha
37 Do you maintain a employees?			hat prof	nibits all	personal	use of	vehi	cles, in	cluding	comr	nutın	g, by	your	Y	'es	No
employees.						• •	•		• •			•				
38 Do you maintain a employees? See the												your •				
39 Do you treat all us	e of vehicles	s by employee	s as per	rsonal us	se?											
40 Do you provide movehicles, and reta				oyees,o	btaın ınfo	rmatio	n fro	m your	employ	ees a	bout	the us	se of			
41 Do you meet the r	eauirements	concernina ai	ialified a	automoh	ıle demor	nstratio	n us	e? (See	ınstru	ctions) -					
Note: If your answ	-							=			-					
	rtization	, , , , , , , , , , , , , , , , , , , ,	. 15 10.	, do 110	e compre			7 101 1110			110100					
Allio	T CIZACIOII	(b)				Т			Т	(e)						
(a)		Date			c) tızable		((d) Code	Αn	nortiza	ition		Λmo	(f) ortizati	on for	
Description of c	osts	amortization			ount			ection		period				his ye		
40.4		begins	2225		,				_ p∈	ercent	aye					
42 A mortization of co	sts that beg	ins during you	r 2012	tax year	(see ins	tructioi	ns)									
						-			-							
										-						
43 A mortization of co	sts that beg	an before your	2012 t	ax year			•			· L	43					
44 Total. Add amount	ts ın column	(f) See the ins	structio	ns for wh	nere to re	port					44					



Recipient's Name: VAN WERT COUNTY FOUNDATION

2012 YEAR-END TAX SUMMARY

Edward Jones Account Number: 451-14700-1-7

Printed on March 22, 2013

Page 2 of 7

The information provided for the proceeds from the broker and barter exchange transactions on your year-end tax summary is not a Form 1099. This information is not reported to the IRS.

Proceeds From Broker and Barter Exchange Transactions

Long-Term Transactions	•						Long Term
Description / CUSIP / Stock or Other Symbol	o.						
Activity Type Quantity Sold	Date of Acquisition	Date of Sale or Exchange	Stocks, Bonds, etc Gross Proceeds Less Commissions	Cost or Other Basis	Wash Sale Loss Disallowed	Gain/Loss	Federa! Income Tax Wrthheld
CAPITAL WORLD GROWTH & INCOME / 140543406 / CWGFX 34.26000 Various 06/18/2012	1 & INCOME / 1405434 34.26000 Various	06 / CWGFX 06/18/2012	1,130.93	1,113.84	00:00	17 09	0.00
EATON VANCE LARGE CAP VALUE / 277905642 / EILVX Sale 2,097.18300 12/29/2008 06/18/20	CAP VALUE / 277905642 / EILVX 2,097.18300 12/29/2008 06/18/20	/ EILVX 06/18/2012	37,938.04	30,495.42	00'0	7,442.62	0.00
FUNDAMENTAL INVESTORS / 360802409 / AFIFX Sale 921,57100 Various 0	302409 / AFIF Various	X 06/18/2012	34,181.08	25,300.43	0.00	8,880.65	0,00
-HARTFORD-DIVIDEND-&-GROWTH-/-416649606-/-HDGIX_ Sale 1,705.30200 Vanous 06/18/20	/_416649606_/ Vanous	/_HDG(X 06/18/2012	33,662.67	23,904 93	00 0	9,757 74	0.00
ING GLOBAL REAL ESTATE / 44980Q302 / IGLIX Sale 160.51100 05/09/2011	E / 44980Q302 / IGLIX 160,51100 05/09/2011 06/18/2012	(06/18/2012	2,621.14	2,731.13	5.57	-109.99	0.00
PIONEER FUNDAMENTAL VALUE CL Y / 72387X406 / CVFYX Sale 1,823.60500 12/29/2008 06/18/2012	LY / 72387X4 12/29/2008	406 / CVFYX 06/18/2012	32,624.30	26,273.96	0.00	6,350.34	0.00
VANGUARD SMALL CAP GROWTH ETF / 922908595 / VBK Safe 9.00000 12/29/2008 06/18/2012	OWTHETF / 922908 9.00000 12/29/2008	595 / VBK 06/18/2012	721.89	354 96	00'0	366 93	0.00
VANGUARD GROWTH ETF / 922908736 / VUG Sale 49.00000 09/18/2011	/ 922908736 / VUG 49.00000 08/18/2011	06/18/2012	3,284.96	2,764.58	0.00	520.38	0.00
VIRTUS FOREIGN OPPORTUNITIES / 92828R834 / JVXIX 30.77700 12/29/2008 06/18/20	TUNITIES / 92828R834 30 77700 12/29/2008	1 / JVXIX 06/18/2012	713.11	517.79	0.00	195.32	0.00
Totals			146,878.12	113,457.04	5.57	33,421.08	0.00

VAN WERT COUNTY FOUNDATION Recipient's Name:

2012 YEAR-END TAX SUMMARY

Page 2 of 6

Printed on March 22, 2013 Edward Jones Account Number: 451-08129-1-2

The information provided for the proceeds from the broker and barter exchange transactions on your year-end tax summary is not a Form 1099. This information is not reported to the IRS.

Proceeds From Broker and Barter Exchange Transactions

Long-Term Transactions	actions							Long Term
Description / OUSIP / Stock of Other Symbol	Stock of Other Symbx	lo lo						
Activity Type	Quantity Sold	Date of Acquisition	Date of Sale or Exchange	Stocks, Bonds, etc. Gross Proceeds Less Commissions	Cost or Other Basis	Wash Sale Loss Disalbwed	Gain/Loss	Federal Income Tax Withheld
(SHARES BARCLAYS TIPS BOND FD / 464287176 / TIP	YS TIPS BOND FC	7 46428717	3 / TIP					
Sale	550.00000 Various	Various	06/06/2012	65,910.60	63,114.00	00:00	2,796.60	0.00
Cash in Lieu	0.09431	0.09431 10/24/2011 07/03/2012	07/03/2012	11.29	10.82	0.00	0.47	0.00
Subtotal	550.09431			65,921,89	63,124.82	0.00	2,797.07	0.00
VANGUARD HIGH DIV YIELD ETF / 921946406 / VYM	DIV YIELD ETF /	921946406 /	VYW					
Cash in Lieu	0 37625	0 37625 11/09/2011 07/03/2012	07/03/2012	18.11	16.29	0.00	1.82	0.00
Totals				65,940.00	63,141,11	0.00	2,798.89	0.00

THE VAN WERT COUNTY FOUNDATION 138 East Main Street Van Wert, Ohio, 45891 Telephone (419) 238-1743

Fax (419) 238-3374

E-Mail: info@vanwertcountyfoundation.org

HIGH SCHOOL INFORMATION (Required for first time scholarship applicants)

NAME:	DATE:
ADDRESS:	
PHONE:	
COUNTY OF RESIDENCE during senior year of High School:	
NAME OF HIGH SCHOOL AND GRADUATION DATE:	and the property of the second
CIRCLE number of years you were in High School Marching	Band 1 2 3 4
DID YOU ATTEND VANTAGE? Yes or No (please circle)	
IF SO - What area of study:	
LIST HIGH SCHOOL VARSITY SPORTS YOU PARTICIPATED IN	AND YEARS LETTERED IN EACH :

ADDITIONAL ITEMS THAT MUST BE INCLUDED WITH THIS APPLICATION:

- (A) High School Transcript
- (B) Please furnish a small picture
- (C) By submitting this application and high school transcript you will automatically receive the college scholarship application form during the spring of your freshman year.

SCHOLARSHIP GUIDELINES

REVISED MARCH, 2007

- 1. A maximum of three (3) grants will be made to a student earning a baccalaureate degree in four years. However, a student whose course of study <u>requires</u> five (5) years to earn a baccalaureate degree may be awarded a fourth grant.
- 2. Students who have completed their freshman year in college are eligible to have their application considered **provided** they have a 2.75 accumulative grade point average.
- 3. Students who have been granted a scholarship must maintain a 3.0 accumulative grade point average to warrant continuation of the scholarship grant.
- 4. A first time applicant with above sophomore standing must have a 3.0 accumulative grade point average.
- 5. An applicant must be a full time student enrolled in a minimum of 12 quarter or 12 semester hours per term. Special consideration may be given to part-time students.
- 6. Scholarship grants, in general, will not be awarded to students whose parent's annual income is in excess of \$65,000.00. This figure may be modified depending upon the number of children in college.
- 7. Honor scholarships may be awarded to those who exceed the income standard stated above and whose accumulative point average is 3.2 or above.
- 8. An applicant must have been a resident of Van Wert, Paulding, or Allen Counties when they graduated from one of the following eligible High Schools:

Antwerp Local School

Delphos Jefferson

Lincolnview Local Schools

Vantage Vocational School

Wayne Trace Local School

Crestview Local Schools

Delphos St. Johns

Paulding Local Schools

Van Wert High School

Parkway Local School and Spencerville Local School - Only Van Wert County Residents Eligible

 An applicant who receives a diploma through the General Education Development testing program is eligible for a scholarship provided they attended one of the eligible high

schools. Home-schooled students are also eligible.

THE VAN WERT COUNTY FOUNDATION

138 East Main Street · Van Wert, Ohio, 45891 Telephone (419) 238-1743 Fax (419) 238-3374 Email: <u>vwcf@ bright.net</u>

COLLEGE SCHOLARSHIP APPLICATION FORM

ADDRESS COUNTY RESIDENCE TOWNSHIP PHONE EMAIL STUDENTS STATUS Single Married NAME OF COLLEGE TERMS Quarter or Semester (please circle) ADDRESS GRADE NEXT SEPTEMBER Soph., Jr., Sr., 5 th year (please circle) COURSE OF STUDY 2.4,5 YR PROGRAM EXPECTED DATE OF GRADUATION MEMBER OF WHAT CHURCH (Scholarships available for members of certain churches) PARENTS NAME ADDRESS PHONE PARENTS STATUS MARRIED, DIVORCED, SEPARATED, WIDOWED (Please circle) PLACE OF EMPLOYMENT FATHER: MOTHER: # OF DEPENDENT CHILDREN IN COLLEGE DURING 2013-14 ACADEMIC YEAR ITEMS THAT MUST ACCOMPANY THIS APPLICATION: 1) Copy of Parents (or students if Independent) IRS Form 1040 - Pages 1 and 2. Both parents form if filing separately are required. If student is claiming Independent-form must show student claiming themselves 2) Small picture if not previously submitted. 3) College Transcript for first time applicant - spring term grade sheet thereafter. 4) High School Information Form if not previously submitted.	STUDENT NAME	<u>DATE</u>
PHONE Single Married Married Single Married Married Single Married	ADDRESS	
ADDRESS GRADE NEXT SEPTEMBER Soph., Jr., Sr., 5 th year (please circle) COURSE OF STUDY EXPECTED DATE OF GRADUATION MEMBER OF WHAT CHURCH (Scholarships available for members of certain churches) PARENTS NAME ADDRESS PHONE PARENTS STATUS MARRIED, DIVORCED, SEPARATED, WIDOWED (Please circle) PLACE OF EMPLOYMENT FATHER: MOTHER: FOF DEPENDENT CHILDREN IN COLLEGE DURING 2013-14 ACADEMIC YEAR ITEMS THAT MUST ACCOMPANY THIS APPLICATION: 1) Copy of Parents (or students if Independent) IRS Form 1040 - Pages 1 and 2. Both parents form if filing separately are required. If student is claiming Independent-form must show student claiming themselves 2) Small picture if not previously submitted. 3) College Transcript for first time applicant - spring term grade sheet thereafter.	COUNTY RESIDENCE	TOWNSHIP
ADDRESS GRADE NEXT SEPTEMBER Soph., Jr., Sr., 5 th year (please circle) COURSE OF STUDY 2, 4, 5 YR PROGRAM EXPECTED DATE OF GRADUATION MEMBER OF WHAT CHURCH (Scholarships available for members of certain churches) PARENTS NAME ADDRESS PHONE PARENTS STATUS MARRIED, DIVORCED, SEPARATED, WIDOWED (Please circle) PLACE OF EMPLOYMENT FATHER: MOTHER: # OF DEPENDENT CHILDREN IN COLLEGE DURING 2013-14 ACADEMIC YEAR ITEMS THAT MUST ACCOMPANY THIS APPLICATION: 1) Copy of Parents (or students if Independent) IRS Form 1040 - Pages 1 and 2. Both parents form if filing separately are required. If student is claiming Independent-form must show student claiming themselves 2) Small picture if not previously submitted. 3) College Transcript for first time applicant - spring term grade sheet thereafter.	PHONE	EMAIL
ADDRESS GRADE NEXT SEPTEMBER Soph., Jr., Sr., 5 th year (please circle) COURSE OF STUDY 2, 4, 5 YR PROGRAM EXPECTED DATE OF GRADUATION MEMBER OF WHAT CHURCH (Scholarships available for members of certain churches) PARENTS NAME ADDRESS PHONE PARENTS STATUS MARRIED, DIVORCED, SEPARATED, WIDOWED (Please circle) PLACE OF EMPLOYMENT FATHER: # OF DEPENDENT CHILDREN IN COLLEGE DURING 2013-14 ACADEMIC YEAR ITEMS THAT MUST ACCOMPANY THIS APPLICATION: 1) Copy of Parents (or students if Independent) IRS Form 1040 - Pages 1 and 2. Both parents form if filing separately are required. If student is claiming Independent-form must show student claiming themselves 2) Small picture if not previously submitted. 3) College Transcript for first time applicant - spring term grade sheet thereafter.	STUDENTS STATUSSingle Married	
COURSE OF STUDY 2, 4, 5 YR PROGRAM EXPECTED DATE OF GRADUATION MEMBER OF WHAT CHURCH (Scholarships available for members of certain churches) PARENTS NAME ADDRESS PHONE PARENTS STATUS MARRIED, DIVORCED, SEPARATED, WIDOWED (Please circle) PLACE OF EMPLOYMENT FATHER: MOTHER: # OF DEPENDENT CHILDREN IN COLLEGE DURING 2013-14 ACADEMIC YEAR ITEMS THAT MUST ACCOMPANY THIS APPLICATION: 1) Copy of Parents (or students if Independent) IRS Form 1040 - Pages 1 and 2. Both parents form if filing separately are required. If student is claiming Independent-form must show student claiming themselves 2) Small picture if not previously submitted. 3) College Transcript for first time applicant - spring term grade sheet thereafter.	NAME OF COLLEGE	TERMS Quarter or Semester (please circle)
EXPECTED DATE OF GRADUATION MEMBER OF WHAT CHURCH (Scholarships available for members of certain churches) PARENTS NAME ADDRESS PHONE PARENTS STATUS MARRIED, DIVORCED, SEPARATED, WIDOWED (Please circle) PLACE OF EMPLOYMENT FATHER: MOTHER: # OF DEPENDENT CHILDREN IN COLLEGE DURING 2013-14 ACADEMIC YEAR ITEMS THAT MUST ACCOMPANY THIS APPLICATION: 1) Copy of Parents (or students if Independent) IRS Form 1040 - Pages 1 and 2. Both parents form if filing separately are required. If student is claiming Independent-form must show student claiming themselves 2) Small picture if not previously submitted. 3) College Transcript for first time applicant - spring term grade sheet thereafter.	ADDRESS	
MEMBER OF WHAT CHURCH (Scholarships available for members of certain churches) PARENTS NAME ADDRESS PHONE PARENTS STATUS MARRIED, DIVORCED, SEPARATED, WIDOWED (Please circle) PLACE OF EMPLOYMENT FATHER: MOTHER: # OF DEPENDENT CHILDREN IN COLLEGE DURING 2013-14 ACADEMIC YEAR ITEMS THAT MUST ACCOMPANY THIS APPLICATION: 1) Copy of Parents (or students if Independent) IRS Form 1040 - Pages 1 and 2. Both parents form if filing separately are required. If student is claiming Independent-form must show student claiming themselves 2) Small picture if not previously submitted. 3) College Transcript for first time applicant - spring term grade sheet thereafter.	GRADE NEXT SEPTEMBER Soph., Jr., Sr., 5 th year (pleas	se circle)
MEMBER OF WHAT CHURCH (Scholarships available for members of certain churches) PARENTS NAME ADDRESS PHONE PARENTS STATUS MARRIED, DIVORCED, SEPARATED, WIDOWED (Please circle) PLACE OF EMPLOYMENT FATHER: MOTHER: # OF DEPENDENT CHILDREN IN COLLEGE DURING 2013-14 ACADEMIC YEAR ITEMS THAT MUST ACCOMPANY THIS APPLICATION: 1) Copy of Parents (or students if Independent) IRS Form 1040 - Pages 1 and 2. Both parents form if filing separately are required. If student is claiming Independent-form must show student claiming themselves 2) Small picture if not previously submitted. 3) College Transcript for first time applicant - spring term grade sheet thereafter.	COURSE OF STUDY	2, 4, 5 YR PROGRAM
PARENTS NAME PARENTS STATUS MARRIED, DIVORCED, SEPARATED, WIDOWED (Please circle) PLACE OF EMPLOYMENT FATHER: MOTHER: FOF DEPENDENT CHILDREN IN COLLEGE DURING 2013-14 ACADEMIC YEAR ITEMS THAT MUST ACCOMPANY THIS APPLICATION: 1) Copy of Parents (or students if Independent) IRS Form 1040 - Pages 1 and 2. Both parents form if filing separately are required. If student is claiming Independent-form must show student claiming themselves 2) Small picture if not previously submitted. 3) College Transcript for first time applicant - spring term grade sheet thereafter.	EXPECTED DATE OF GRADUATION	
PHONE	MEMBER OF WHAT CHURCH (Scholarships available for mer	mbers of certain churches)
PARENTS STATUS MARRIED, DIVORCED, SEPARATED, WIDOWED (Please circle) PLACE OF EMPLOYMENT FATHER: MOTHER: # OF DEPENDENT CHILDREN IN COLLEGE DURING 2013-14 ACADEMIC YEAR ITEMS THAT MUST ACCOMPANY THIS APPLICATION: 1) Copy of Parents (or students if Independent) IRS Form 1040 - Pages 1 and 2. Both parents form if filing separately are required. If student is claiming Independent-form must show student claiming themselves 2) Small picture if not previously submitted. 3) College Transcript for first time applicant - spring term grade sheet thereafter.	PARENTS NAME	
PARENTS STATUS MARRIED, DIVORCED, SEPARATED, WIDOWED (Please circle) PLACE OF EMPLOYMENT FATHER:	ADDRESS	
# OF DEPENDENT CHILDREN IN COLLEGE DURING 2013-14 ACADEMIC YEAR ITEMS THAT MUST ACCOMPANY THIS APPLICATION: 1) Copy of Parents (or students if Independent) IRS Form 1040 - Pages 1 and 2. Both parents form if filing separately are required. If student is claiming Independent-form must show student claiming themselves 2) Small picture if not previously submitted. 3) College Transcript for first time applicant - spring term grade sheet thereafter.	PHONE	
# OF DEPENDENT CHILDREN IN COLLEGE DURING 2013-14 ACADEMIC YEAR ITEMS THAT MUST ACCOMPANY THIS APPLICATION: 1) Copy of Parents (or students if Independent) IRS Form 1040 - Pages 1 and 2. Both parents form if filing separately are required. If student is claiming Independent-form must show student claiming themselves 2) Small picture if not previously submitted. 3) College Transcript for first time applicant - spring term grade sheet thereafter.	PARENTS STATUS MARRIED, DIVORCED, SEPARATED,	WIDOWED (Please circle)
 Copy of Parents (or students if Independent) IRS Form 1040 - Pages 1 and 2. Both parents form if filing separately are required. If student is claiming Independent-form must show student claiming themselves Small picture if not previously submitted. College Transcript for first time applicant - spring term grade sheet thereafter. 	PLACE OF EMPLOYMENT FATHER:	MOTHER:
 Copy of Parents (or students if Independent) IRS Form 1040 - Pages 1 and 2. Both parents form if filing separately are required. If student is claiming Independent-form must show student claiming themselves Small picture if not previously submitted. College Transcript for first time applicant - spring term grade sheet thereafter. 	FOF DEPENDENT CHILDREN IN COLLEGE DURING 2013-14 A	CADEMIC YEAR
separately are required. If student is claiming Independent-form must show student claiming themselves 2) Small picture if not previously submitted. 3) College Transcript for first time applicant - spring term grade sheet thereafter.	ITEMS THAT MUST ACCOMPANY THIS APPLICATION	√:
3) College Transcript for first time applicant - spring term grade sheet thereafter.		
	• • • • • • • • • • • • • • • • • • • •	
	• • • • • • • • • • • • • • • • • • • •	
4) Tigh School information Form if not previously submitted.	4) High School information Form if not previously	Submitted.
COMMENTS REGARDING UNUSUAL FAMILY FINANCIAL SITUATION:	COMMENTS REGARDING UNUSUAL FAMILY FINANCIAL SITU	JATION:

GRANT GUIDELINES THE VAN WERT COUNTY FOUNDATION

The Van Wert County Foundation was incorporated under the laws of the State of Ohio on September 15, 1925.

The said corporation is formed for the purpose of receiving charitable contributions, investing the same, and using the income to further the mental, moral, intellectual or physical welfare and advancement of citizens of Van Wert County, Ohio, and such other areas as directed by a donor.

While the Foundation endeavors to maintain a degree of flexibility in its grants the following limitations should be noted.

- 1. Grants are made to organizations accorded a tax-exempt 501 © (3) public charity status by the Internal Revenue Service and to governmental units.
- 2. Grants are not made to individuals except those who are accepted as a part of the college scholarship program.
- 3. The Foundation does not provide grants for projects that taxpayers or commercial interests normally support.
- 4. The Foundation does not support religious activities or programs that serve specific religious groups or denominations.

Grant proposals should include:

- (a) A description of the project and what will be accomplished.
- (b) A description of the population to be served.
- (c) A documented line-item budget for the proposed grant.
- (d) Information about the organization seeking funds including its tax-exempt status.

Grants are considered in June and December each year. Grant applications <u>must</u> be received by May 15 for June consideration and November 15 for December consideration.

Grant proposal should be sent to: Larry L. Wendel, Executive Secretary

Van Wert County Foundation

138 East Main Street Van Wert, Ohio, 45891

GRANT APPLICATION FORM THE VAN WERT COUNTY FOUNDATION

DATE		
	OF ORGANIZATION ERS OF ORGANIZATION	President
		Vice-President
		Secretary
		Treasurer
1)	•	idation has the responsibility to verify that an organization porated not for profit, I.R.S. exempt and has a 501 © (3)
	Are you so classified? Yes	. No
	Please provide evidence of Please provide Federal I.D.	this for your organization.
2)	State the purpose of your o	organization.
3)	What population group do	you serve? (age, sex, special interest)?
4)	What geographic area do y	ou serve?
5)	Approximately how many o	different individuals will be served?
6)	What specific use or progra	am will be made of the requested funds?

7)	Total budget for program being funded? \$
8)	How is this program currently funded? List other organizations that are financially supporting this program.
9)	Please include a copy of your latest operating budget and a balance statement.
10)	Amount requested from The Van Wert County Foundation? \$
11)	Please indicate the date by which you would need these funds?
12)	How should check by made payable?
13)	What type of recognition will The Van Wert County Foundation receive?
14)	Please return by <u>May 15 or November 15</u>
	Name of Submitter
	Address Telephone
Grant	proposal should be sent to: Larry L. Wendel, Executive Secretary Van Wert County Foundation 138 East Main Street Van Wert, Ohio, 45891



2012 YEAR-END TAX SUMMARY

Recipient's Name: VAN WERT COUNTY FOUNDATION

Printed on March 22, 2013

Page 2 of 8

Edward Jones Account Number: 451-14701-1-6 The information provided for the proceeds from the broker and barter exchange transactions on your year-end tax summary is not a Form 1099. This information is not reported to the IRS.

Proceeds From Broker and Barter Exchange Transactions

		Shanson						of sec	Ţ
Description / CUSIP / Stock or Other Symbol	or Other Symbol							In a least	=
Activity Type Quan	Quantity Sold	Date of Acquisition	Date of Sale or Excharige	Stocks, Bonds, etc. Gross Praceeds Less Commissions	Cost or Other Basis	Wash Sale Loss Disallowed	Gamloss	Federal Income Tax Withheld	
CAPITAL WORLD GROWTH & INCOME / 140543406 / CWGFX Sale 06/18/2012	NTH & INCOME / 140 103.40500 Various	E / 1405434 Various	06 / CWGFX 06/18/2012	3,413.39	3,691,38	277 99	-277.99	0.00	
COLUMBIA MARSICO 21ST CENTURY / 19765J400 / NMYAX Sale 16,507.56600 Various 01/13/2012	1ST CENTURY / 1976 16,507.56600 Various	Y / 19765J4(Various	00 / NMYAX 01/13/2012	207,830.26	156,628.02	00'0	51,202.24	0.00	
EATON VANCE LARGE CAP VALUE / 277905642 / EILVX Sale 4,878,86600 12/12/2008 06/18/20	CAP VALUE / 277905642 / EILVX 4,878.86600 12/12/2008 06/18/2012	277905642 12/12/2008	/ EILVX 06/18/2012	88,258.69	70,992.16	00.00	17,266.53	0.00	
FUNDAMENTAL INVESTORS-/-360802409-/- AFIFX	TORS-/-360802409-/- 2,139.11900 Various	2409-/. AFIF Various	X. 08/18/2012	79,339.91	81,834.50	54.50	-2,494.59	0.00	'
HARTFORD DIVIDEND & GROWTH / 416649606 / HDGIX Sale 3,907.84500 Various 06/18/20	& GROWTH / 416649 3,907.84500 Various	416649606 / Various	/ HDGIX 06/18/2012	77,140.86	54,803 27	000	22,337.59	0.00	
ING GLOBAL REAL ESTATE / 44980Q302 / IGLIX Sale 407 98900 05/09/2011	(ATE / 44980) 407 98900	TE / 44980Q302 / IGLIX 407 98900 05/09/2011 06/18/2012	(06/18/2012	6,662.46	6,942,48	12,55	-280.02	0.00	
PIONEER FUNDAMENTAL VALUE CLY / 72387X406 / CV Sale 4,182.00300 Various 06/18/20	AL VALUE CL Y / 723 4,182.00300 Various	Y / 72387X/ Various	106 / CVFYX 06/18/2012	74.816.03	60,259.90	0.00	14,556.13	0.00	
VANGUARD MID CAP GROWTH ETF / 922909538 / VOT Sale 47.00000 05/09/2011 06/18/2	ROWTH ETF 47,00000	WTH ETF / 922909538 47.00000 05/09/2011	8 / VOT 06/18/2012	2,975.10	3,229.83	00.0	-254.73	0.00	
VANGUARD GROWTH ETF / 922908736 / VUG Sale 128.00000 08/18/2011	ETF / 922908 128.00000	= / 922908736 / VUG 128.00000 08/18/2011	06/18/2012	8,581 12	7,221.75	0,00	1,359 37	0.00	Į
VIRTUS FOREIGN OPPORTUNITIES / 9282BR834 / JVXI) Sale 11.62800 12/12/2008 06/18/20	OBTUNITIES 111.62600	31UNITIES / 92828R834 / JVXIX 111.62800 12/12/2008 06/18/2012	/ JVXIX 06/18/2012	2,586 37	2,048.34	000	538 03	0.00	
Totals			•	551,604.19	447,651.63	345,04	103,952.56	0.00	

Page 5 of 57

Amended Date: 2/22/13

THE VAN WERT COUNTY FOUNDATION ATTN: LARRY L WENDEL EXEC SEC 138 EAST MAIN STREET VAN WERT, OH 45891

Your Financial Advisor: SARGENTANIBAL 4660 S HAGADORN RD STE 300 EAST LANSING MI 48823 (517) 351-6084

Account Number: 4325-2491

Year-End Account Summary

This information is NOT provided to the internal Revenue Service, but is being provided to you for courtesy purposes. Please consult with your Financial Advisor or Tax Advisor regarding specific questions.

For non covered transactions, we provide supplemental cost basis information, when it is available, to assist you with completing your tax return, however, THIS INFORMATION IS NOT PROVIDED TO THE INTERNAL REVENUE SERVICE.

SHORT TERM GAINS OR LOSSES (Box 1c) FOR COVERED SECURITIES (Box 6) Proceeds from Broker and Barier Exchange Transactions for 2012	ES (Box 1c) FOR	COVERED (SECURITIE r 2012	S (Box 6)			SUPPLEMENTAL INFORMATION	INFORMATION
Description (Box 8) Stack or Other Symbol (Box 1d)	Quantity Sold (Box 1e)	Unit Price	Date of Acquisition (Box 1b)	Date of Sale or Exchange (Box 1a)	Sales Price (Box 2a)*	Cost or Other Basis (Box 3)	Gain or Loss Amount	Transaction
FRANKLIN INVS SECS TR SHORT INTER U S GOVT SECS FD ADVISOR CL CUSIP 353612864	1.0630	10.34000	07/03/12	07/30/12	11.00	10.98	0.02	SALE
FRANKLIN US GOVT SEC ADV CLASS CUSIP 353496821	140,5300	6.94000	07/03/12	07/30/12	975.28	969,65	5.63	SALE
ING GLOBAL REAL ESTATE FUND CL I CUSIP 44980Q302	75.4950	17.26000	01/03/12	07/30/12	1,303.05	1,292,59	10,46	SALE
LOOMIS SAYLES FDS II INVT GRADE BD FD CL Y CUSIP 543487136	52.1530	12.49000	07/05/12	07/30/12	651.40	644.08	7.32	SALE
OPPENHEIMER INTL BD FD CLASS Y CUSIP 68380T509	371,4860	6.44000	01/04/12	07/30/12	2,392.35	719.96	1,672.39	SALE
PIONEER BOND FUND CL Y CUSIP 723622403	732.7310	9.75000 V	VARIOUS	07/30/12	7,144.10	2,465.32	4,678.78	SALE
TCW FDS INC TOTAL RETURN BD FD CL I SHS CUSIP 87234N880	88,8410	10.05000	07/03/12	07/30/12	892,86	875.96	16.90	SALE

₹000

3

_ 6 6

Page 6 of 57

Amended Date: 2/22/13

Your Your THE VAN WERT COUNTY FOUNDATION SARGE ATTN LARRY L WENDEL EXEC SEC 4660 S 138 EAST MAIN STREET STE 30 VAN WERT, CH 45891

Your Financial Advisor: SARGENT/ANIBAL 4660 S HAGADORN RD STE 300 EAST LANSING MI 48823 (517) 351-6084

Account Number: 4325-2491

Year-End Account Summary

This information is NOT provided to the Internal Revenue Service, but is being provided to you for courtesy purposes. Please consult with your Financial Advisor or Tax Advisor regarding specific questions.

SHORT TERM GAINS OR LOSSES (Box 10) FOR COVERED S	OSSES (Box 1c) FOR COVERED S	COVERED	SECURITIES	ECURITIES (Box 6)			confined	"
Proceeds from Broker and Barter Exchange Transactions for	r Exchange Tra	nsactions to	r 2012	()			SUPPLEMENTAL INFORMATION	INFORMATION
Description (Box 8)			Date of	Date of Sale		Cost or Other		
Stack or Other Symbol	Quantity Sold	Unit Price	Acquisition	or Exchange	Sales Price	Basis	Gain or Loss	Transaction
(Box 1d)	(Box 1e)		(Box 1b)	(Box 1a)	(Box 2a)*	(Box 3)	Amount	Description
VANGUARD FIXED ING SEC								
FOND SHOKEL THEN THURKAL PORTFOLIO								
CUSIP 922031604	3.4120	10.88000	VARIOUS	'ARIOUS 07/30/12	37 13	37.07	90'0	SALE
VANGUARD INTERMEDIATE								
BOND ETF								
CUSIP 921937819	62.0000	89.67000	01/04/12	01/04/12 07/27/12	5,559,41	5,379.12	180.29	SALE
VANGUARD TOTAL BOND ET								
MARKET								
CUSIP 921937835	39,0000	84,93930	01/04/12	01/04/12 07/27/12	3,312.55	3,248.44	64 11	SALE
TOTAL SHORT TERM GAINS OR LOSSES FOR COVERED SECUR	OSSES FOR CO	VERED SECU	RITIES		22.279.13	15,643.17	6,635,96	
SHORT TERM GAINS OR LOSSES (Box 1c) FOR NONCOVERED SECURITIES (Box 5)	S (Box 1c) FO	RONCOVE	RED SEC	URITIES (Box	(g			
	· · · · · · · · · · · ·				(

Proceeds from Broker and Barter Exchange Transactions for	arter Exchange Tra	insactions fo	r 2012				SUPPLEMENTAL INFORMATION	INFORMATION
Description (Box 8)			Date of	Date of Sale		Cost or Other		
Stock or Other Symbol	Quantity Sold	Unit Price	Acquisition	Acquisition of Exchange	Sales Price	Basis	Gain or Loss	Transaction
(Box 1d)	(Box 1e)		(Box 1b)	(Box 1a)	(Box 2a)*	(Box 3)	Amount	Description
DWS DREMAN SMALL CAP								
INSTL CLASS								
CUSIP 23338F754	1,399.7190	34,65000		VARIOUS 07/30/12	48,500.26	45,502.78	2,997.48	SALE
EATON VANCE LARGE CAP								
CUS/P 277905642	1,278.3660	18.82000	-	VARIOUS 07/30/12	24,058,90	20,882.60	3,176.30	SALE
FIDELITY ADV NEW INSIGHTS FD CL (
CUSIP 316071604	2,604.8340	22.39000	VARIOUS	VARIOUS 07/30/12	58,322.24	52,370.01	5,952.23	SALE
CUSIP 3160/1604	2,604.8340	22,39000	VARICOS	07/30/12	58,322.24		52,370.01	;

Page 7 of 57

Amended Date: 2/22/13

THE VAN WERT COUNTY FOUNDATION ATTN: LARRY L WENDEL EXEC SEC 138 EAST MAIN STREET VAN WERT, OH. 45891

Your Financial Advisor: SARGENTANIBAL 4660 S HAGADORN RD STE 300 EAST LANSING MI 48823 (517) 351-6084

Account Number: 4325-2491

Year-End Account Summary

This information is NOT provided to the internal Revenue Service, but is being provided to you for courtesy purposes. Please consult with your Financial Advisor or Tax Advisor regarding specific questions.

SHORT TERM GAINS OR LOSSES (Box 1c) FOR NONCOVERED SECURITIES (Box 6)	continued
Proceeds from Broker and Barter Exchange Transactions for 2012	SUPPLEMENTAL INFORMAT
Description (Bay 6)	

Proceeds from Broker and Barter Exchange Transactions for 2012	Broker and Barter Exchange Transactions for	nsactions fo	7 2012 27 2012		(a		SUPPLEMENTA	SUPPLEMENTAL INFORMATION
			Date of	Date of Sale		Cost or Other		
Stock or Other Symbol	Quantity Sold	Unit Price	•	or Exchange	Sales Price	Basis	Gain or Loss	Transaction
(Box 1d)	(Box 1e)		(Box 1b)	(Box 1a)	(Box 2a)*	(Box 3)	Amount	Description
FUNDAMENTAL INVS INC CLASS F-1 CLISID SERVING		0000		07/00/10	67.00	9 000	00 P 00 U	L - - -
CUSIF 380802409	562.1270	38.55000 VARIOUS	VARIOUS	21/30//0	90,079,12	16,332.58	5,337,38	SALE
HARTFORD MUT FDS INC DIVIDEND & GROWTH FUND I CUSIP 416649606	548.2060	20.26000	VARIOUS	07/30/12	11,106.71	9,658.11	1,448.60	SALE
INCOME FUND AMER INC CLASS A CUSIP 453320103	18,984.4240	17,67000	VARIOUS	07/30/12	332,404.77	317,052.41	15,352.36	SALE
ING GLOBAL REAL ESTATE FUND CL I CUSIP 449800302	K74 AQ20	17 26000	17 SEONG MARIOLIS	07/90/10	0.4.7.80.0	000000000000000000000000000000000000000	708 47	
	0260.116	00002.1	מסועא	21/00/12	2,00,42	8,302.23	485.17	anke
ISHARES BARCLAYS TIPSET BOND FUND CUSIP 464287176	2,923.0000	121.08480	VARIOUS	07/30/12	353,922.94	342,355.21	11,567.73	SALE
IVY FDS INC MID CAP GROWTH FD CL I CUSIP 466001609	9,222,8400	17.81000	08/12/11	07/30/12	164,258 78	154,205.89	10,052.89	SALE
JANUS INVT FD PERKINS MID CAP VALUE FD CL I CUSIP 47103C241	2,678.0880	21.16000	VARIOUS	07/30/12	56,668.37	54,987.09	1,681.28	SALE
LOOMIS SAYLES FDS II INVT GRADE BD FD CL Y CUSIP 543487136	13,851.3600	12.49000	12/30/11	07/30/12	173,003.48	165,385.24	7,618.24	SALE
METROPOLITAN WEST FDS TOTAL RETURN BD FD CL I CUSIP 592905509	4,608.2950	10,85000	VARIOUS	08/13/12	50,000.00	37,416 39	12,583.61	SALE



Page 8 of 57

Amended Date: 2/22/13

THE VAN WERT COUNTY FOUNDATION ATTN LARRY L WENDEL EXEC SEC 138 EAST MAIN STREET VAN WERT, OH 45891

Your Financial Advisor: SARGENT/ANIBAL 4660 S HAGADORN RD STE 300 EAST LANSING MI 48823 (517) 351-6084

Account Number: 4325-2491

Year-End Account Summary

This information is NOT provided to the internal Revenue Service, but is being provided to you for courtesy purposes.

1000 1000 1000 1000 1000 1000	•
Please consult with your Financial Advisor or Tax Advisor regarding specific questions.	
SHORT TERM GAINS OR LOSSES (Box 1c) FOR NONCOVERED SECURITIES (Box 6)	
Paranese de Ansara Desiran and Desiran State Control C	CANACIONIS LA FIACEA FILICOLO

Proceeds from Broker and Barter Exchange Transactions for 2012	Her Exchange Tra	nsactions fo	or 2012		•		SUPPLEMENTA	SUPPLEMENTAL INFORMATION
Description (Box 8)			100	Date of Sale		Cast or Other		
Stock or Other Symbol	Quantity Soid	Unit Price		or Exchange	Sates Price	Basis	Gain or Loss	Transaction
(Box 1d)	(Box 1e)		(Box 1b)	(Box 1a)	(Box 2a)*	(Box 3)	Amount	Description
OPPENHEIMER INTL BD FD CLASS Y CUSIP 68380T609	28,125.0820	6.44000	6.44000 VARIOUS	07/30/12	181,125.64	41,366,56	139,759.08	SALE
PIONEER BOND FUND CL Y CUSIP 723622403	12,805.5430	9.75000 VA	VARIOUS	07/30/12	124,854.16	64,919.95	59,934.21	SALE
PIONEER SER TR III FUNDAMENTAL VALUE FD CL Y CUSIP 72387X408	612.1330	18.39000	VARIOUS	07/30/12	11,257.18	10,261.54	995.64	SALE
ROWE T PRICE MID-CAP GROWTH FUND INC CUSIP 779556109	1,146.5530	56,35000	06/18/12	07/30/12	64,608.26	64,505.05	103.21	SALE
RS INVT TR EMERGING MKTS FD CL Y CUSIP 74972H416	319.6050	22.39000	VARIOUS	07/30/12	7,156.03	5,164.86	1,991.17	SALE
TCW FDS INC TOTAL RETURN BD FD CL I SHS CUSIP 87234N880	17 519.4000	10.05000	12/30/11	07/30/12	176,069.96	168,887 02	7,182 94	SALE
THORNBURG INTL VALUE INTERNATIONAL VALUE FUND CLASS I CUSIP 885215566	3,903.3470	25.89000	VARIOUS	07/30/12	101,057.71	98,862.40	2,195.31	SALE
VANGUARD GROWTH ET CUSIP 922908736	1,379.0000	69,17500	08/18/11	07/27/12	95,390 30	77,803 03	17,587.27	SALE
VANGUARD INTERMEDIATE BOND ETF CUSIP 921937819	1,401.0000	89.67000	89.67000 VARIOUS	07/27/12	125,624.89	122,873.66	2,751.23	SALE

4.IS.

/ 1.00

Charles of the control of the contro

Page 9 of 57

Amended Date: 2/22/13

THE VAN WERT COUNTY FOUNDATION ATTN: LARRY L WENDEL EXEC SEC 138 EAST MAIN STREET VAN WERT, OH 45891

Your Financial Advisor: SARGENT/ANIBAL 4660 S HAGADORN RD STE 300 EAST LANSING MI 48823 (517) 351-6084

Account Number: 4325-2491

Year-End Account Summary

This information is NOT provided to the internal Revenue Service, but is being provided to you for courtesy purposes.

9	Please consult with your Financial Advisor or Tax Advisor regarding specific questions.	your Finai	ncial Advi	sor or Tax	Advisor regardi	ng specific que	stions,	
SHORT TERM GAINS OR LOSSES (Box 1c) FOR NONCOVERED SECURITIES (Box 6)	SES (Box 1c) FOR	NONCOVE	RED SECU	RITIES (Box	(9			continual
Proceeds from Broker and Barter Exchange Transactions for	rter Exchange Tra	nsactions fo	r 2012	•	•		SUPPLEMENTAL INFORMATION	INFORMATION
Description (Box 8)			Date of	Date of Sale		Cost or Other		
Stock or Other Symbol	Quantity Sold	Unit Price	Acquisition	or Exchange	Sales Price	Basis	Gain or Loss	Transaction
(Box 1d)	(Box 1e)		(Box 1b)	(Box 1a)	(Box 2a)*	(Box 3)	Amount	Description
VANGUARD LAG CAP ET CUSIP 922908637	1,342.0000	63.11500	11/02/11	07/27/12	84,698.43	76,050,06	8,648.37	SALE
VANGUARD MID CAP ET CUSIP 922908629	380.000	77.88500	11/09/11	07/27/12	29,595.64	27,504.32	2,091.32	SALE
VANGUARD MID-CAP ET GROWTH FUND CUSIP 922908538	267 0000	64.81350	VARIOUS	07/27/12	17,304.83	14,941.09	2,363.74	SALE
VANGUARD REIT ET CUSIP 922908553	1,352.0000	66.64800	11/09/11	07/27/12	90,106.08	75,874.57	14,231.51	SALE
VANGUARD SMALL CAP ET GROWTH CUSIP 922908695	109.0000	83.70000	VARIOUS	07/27/12	9,123,11	7,476.02	1,647.09	SALE
VANGUARD SMALL CAP ET CUSIP 922908751	219.0000	76.07150	11/09/11	07/27/12	16,659.29	15,233.71	1,425.58	SALE
VANGUARD TOTAL BOND ET MARKET CUSIP 921937835	1,290.0000	84.93930	VARIOUS	07/27/12	109,569.26	107,886.39	1,682.87	SALE
VANGUARD WHITEHALL FDS HIGH DIVIDEND YIELD ETF CUSIP 921946406	7,626.0000	49.23530	VARIOUS	07/27/12	375,460.51	335,752.44	39,708.07	SALE
VIRTUS FOREIGN OPPORTUNITIES FUND CL I CUSIP 92828R834	750.4100	24 11000	VARIOUS	07/30/12	18,092.43	13,786.03	4,306,40	SALE
WASH MUTL INVS FD INC CLASS A CUSIP 939330106	10,071.1720	30 78000	VARIOUS	07/30/12	307,245.68	280,017.64	27,228.04	SALE



Page 10 of 57

Amended Date: 2/22/13

Your Financial Advisor: SARGENTANIBAL 4660 S HAGADORN RD STE 300 EAST LANSING MI 48823 (517) 351-6084

THE VAN WERT COUNTY FOUNDATION ATTN LARRY L WENDEL EXEC SEC 138 EAST MAIN STREET VAN WERT, OH 45891

Account Number: 4325-2491

Year-End Account Summary

This information is NOT provided to the Internal Revenue Service, but is being provided to you for courtesy purposes.

Please consult with your Financial Advisor or Tax Advisor regarding specific questions.

SHORT TERM GAINS OR LOSSES (Box 1c) FOR NONCOVERED SECURITIES (Box 6)

confinued

Proceeds from Broker and Barter Exchange Transactions for 2012	ter Exchange Tra	insactions to	r 2012				SUPPLEMENTA	SUPPLEMENTAL INFORMATION
Description (Box 8)			Date of	Date of Sale		Cost or Other		
Stock or Other Symbol	Quantity Sold	Unit Price	Acquistion	or Exchange	Sales Price	Basis	Gain or Loss	Transaction
(Bex 1d)	(Box 18)			(Box 1a)	(Box 2a)*	(Box 3)	Amount	Description
WISDOMTREE EMERGING ET MARKETS SMALLCAP DIVIDEND FUND CLISIP 97717W281	286.0000	43.75000	11/09/11	07/27/12	12,512 22	12,223 89	288.33	SALE
WISDOMTREE EMERGING ET MARKETS EQUITY INCOME FD CUSIP 97717W315	237,0000	52.05500	52.05500 11/09/11 07/27/12	07/27/12	12,336.76	12,231.56	105.20	SALE
TOTAL SHORT TERM GAINS OR LOSSES FOR NONCOVERED SECU	LOSSES FOR NO	NCOVERED SE	ECURITIES		3,273,632.30	2,859,152.45	414,479.85	
LONG TERM GAINS OR LOSSES (Box 1c) FOR NONCOVERED SEC Proceeds from Broker and Barter Exchange Transactions for 2012	ES (Box 1c) FOR reference Tra	NONCOVER ansactions fo	ED SECUP or 2012	SECURITIES (Box 6)	9)		SUPPLEMENTA	SUPPLEMENTALINFORMATION
Description (Box 8)			Date of	Date of Sale		Cost or Other		
Stock or Other Symbol	Quantity Sold	Unit Price	Acquisition	or Exchange	Sales Price	Basis	Gain or Loss	Transaction
(Box 1d)	(Box 1e)		(Box 1b)	(Box 1a)	(Box 2a)*	(Box 3)	Amount	Description
AMERICAN EUROPACIFIC GROWTH FU CL F2 CUSIP 29875E100	6,373 4400	37.65000	01/22/10	07/27/12	239,960.02	236,008.49	3,951.53	SALE
AMERICAN FUNDS GROWTH FUND OF AMERICA CL F2 CUSIP 399874825	15,931.0800	32.08000	01/22/10	07/27/12	511,069.05	424,722.59	86,346,46	SALE
AMERICAN FUNDS WASHINGTON MUTUAL FD F2 CUSIP 939330825	15,124,3200	30,80000	01/22/10	07/27/12	465,829.06	366,613.51	99,215.55	SALE
AMERICAN US GOVERNMENT CL F2 CUSIP 026300822	22,759.9200	14.61000	01/22/10	07/27/12	332,522.43	321,825.27	10,697 16	SALE

5.JSA

Page 11 of 57

Amended Date: 2/22/13

Your Financial Advisor: SARGENT/ANIBAL 4660 S HAGADORN RD STE 300 EAST LANSING MI 48823 (517) 351-6084

THE VAN WERT COUNTY FOUNDATION ATTN: LARRY L WENDEL EXEC SEC 138 EAST MAIN STREET VAN WERT, OH 45891

Account Number: 4325-2491

Year-End Account Summary

This information is NOT provided to the internal Revenue Service, but is being provided to you for courtesy purposes.

	With a company Branch of the state of the st
canth	LONG TERM GAINS OR LOSSES (Box 1c) FOR NONCOVERED SECURITIES (Box 6)
	Please consult with your Financial Advisor or Tax Advisor regarding specific questions.

LONG TERM GAINS OR LOSSES (Box 1c) FOR NONCOVERED SECURITIES (Box 6)	ES (Box 1c) FOR	CONCOVERIORS for	ED SECUR	ITIES (Box 6			SUPPLEMENTA	continued SuppleMental information
Description (Box 8)			Date of	Date of Sale		Cost or Other		
Stock or Other Symbol (Roy 1d)	Quantity Sold (Box 1e)	Unit Price	Acquisition (Box 1b)	or Exchange (Box 1a)	Sales Price (Box 2a)*	Basis (Box 3)	Gain or Loss Amount	Transaction Description
ARTISAN FUNDS INC MID CAP VALUE FD INV SHS CUSIP 04314H709	8,227.8000	20 46000	01/22/10	07/27/12	168,340.79	144,891.56	23,449 23	SALE
COLUMBIA FUNDS TR MARSICO GROWTH FUND CLASS Z CUSIP 19765H180	22,445.6400	22.47000	01/22/10	07/27/12	504,353.53	379,689.25	124,664.28	SALE
DAVIS NEW YORK VENTURE FUND INC CL Y CUSIP 239080401	14,409.3600	35,63000	01/22/10	07/27/12	513,405.50	440,472.64	72,932.86	SALE
DODGE & COX INCOME FD CUSIP 256210105	31,577.0400	13.81000	01/22/10	07/30/12	436,078.92	414,606.54	21,472.38	SALE
DWS VALUE SER INC SMALL CAP VALUE FD CL S CUSIP 23338F762	4,810.6800	34.50000	01/22/10	07/30/12	165,968.46	149,598 95	16,369.51	SALE
EATON VANCE LARGE CAP VALUE FUND CLASS I CUSIP 277905642	2,398.0810	18.82000	VARIOUS	07/30/12	45,131,90	40,543.62	4,588,28	SALE
FRANKLIN INVS SECS TR SHORT INTER U S GOVT SECS FD ADVISOR CL CUSIP 353612864	16,347,9600	10.34000	01/22/10	07/30/12	169,037.90	171,163.14	-2,125.24	SALE
FRANKLIN US GOVT SEC ADV CLASS CUSIP 353496821	46,395.0000	6.94000	01/22/10	07/30/12	321,981.30	311,310,45	10,670.85	SALE
FUNDAMENTAL INVS INC CLASS F-1 CUSIP 360802409	981.7500	38,55000	VARIOUS	07/30/12	37,846.46	26,813.94	11,032.52	SALE



5.JSA

ญี่

004

Page 12 of 57

Amended Date: 2/22/13

THE VAN WERT COUNTY FOUNDATION ATTN. LARRY L WENDEL EXEC SEC 138 EAST MAIN STREET VAN WERT, OH 45891

Your Financial Advisor: SARGENT/ANIBAL 4660 S HAGADORN RD STE 300 EAST LANSING MI 48823 (517) 351-6084

Account Number: 4325-2491

Year-End Account Summary

This information is NOT provided to the Internal Revenue Service, but is being provided to you for courtesy purposes. Please consult with your Financial Advisor or Tax Advisor regarding specific questions.

1	Pigase consult with your phancial advisor of lax advisor regarding specific questions	See John	TCIBIL AGV	ISOT OF LAX	Advisor regard		a	
LONG TERM GAINS OR LOSSES (Box 1c) FOR NONCOVERE!	ES (Box 1c) FOR	CONCOVER.		D SECURITIES (Box 6)	<u>.</u>			continued
Proceeds from Broker and Barrer Exchange Transactions for	rer Exchange Tra	nsactions fo	₹				SUPPLEMENTAL INFORMATION	INFORMATION
Description (Box 8)			Date of	Date of Sale		Cost or Other		
Stock or Other Symbol	Quantity Sold	Unit Price	Acquisition (Box 1b)	or Exchange	Sales Price	Basis (Pro e)	Gain or Loss	Transaction
HARBOR BOND FUND	(B) VOO		(a) You	(8)	לפט עמן	(F vog)	II BOILD	ומומומומו
CUSIP 411511108	34,136.6400	12,84000	01/22/10	07/30/12	438,314.46	420,563.41	17,751.05	SALE
HARTFORD MUT FDS INC DIVIDEND & GROWTH FUND I CUSIP 416649606	917.6420	20.26000	VARIOUS	07/30/12	18,591.42	13,162.00	5,429 42	SALE
HIGHMARK FDS GENEVA MID CAP GROWTH								
FD CL F CUSIP 431113505	7,141.3200	23.75000	01/22/10	07/30/12	169,606.35	119,676,90	49,929.45	SALE
ING GLOBAL REAL ESTATE FUND CL I CUSIP 44980Q302	3,179.9090	17.26000	VARIOUS	07/30/12	54,885,21	54,333.68	551.53	SALE
INVESCO INTERNATIONAL GROWTH FD								
CLASS Y CUSIP 008882532	9,151 5600	27.11000	01/22/10	07/27/12	248,098.79	221,468.21	26,630,58	SALE
J P MORGAN MID CAP VALUE FD CL-SEL CUSIP 339183105	6,885.0000	26,59000	01/22/10	07/27/12	183,072.15	130,998.13	52,074 02	SALE
JANUS INVT FD PERKINS MID CAP VALUE FD CL I CUSIP 47103C241	96 9440	21 16000	VABIOUS	07/30/12	0.5130	0 159 10	-107 80	ш - - - -
KEELEY FDS INC SMALL CAP VALUE FD CL I SHRS CUSIP 487300808	6,676.2000	25,23000	VARIOUS	07/30/12	168,440.53	124,279.87	44,160.66	SALE
MFS SER TR X INTL GROWTH FD CLASS I CUSIP 55273E848	5,040.2580	24.84000	01/22/10	06/29/12	125,200.00	113,347 40	11,852.60	SALE

A SI SA

700

Page 13 of 57

Amended Date: 2/22/13

THE VAN WERT COUNTY FOUNDATION ATTN: LARRY L WENDEL EXEC SEC 138 EAST MAIN STREET VAN WERT, OH 45891

Your Financial Advisor: SARGENT/ANIBAL 4660 S HAGADORN RD STE 300 EAST LANSING MI 48823 (517) 351-6084

Account Number: 4325-2491

Year-End Account Summary

This information is NOT provided to the Internal Revenue Service, but is being provided to you for courtesy purposes.

Please consult with your Financial Advisor or Tax Advisor regarding specific questions. LONG TERM GAINS OR LOSSES (Box 1c) FOR NÓNCOVERED SECURITIES (Box 6)

LONG TERM GAINS OR LOSSES (Box 16) FOR NONCOVERED	S (Box 1c) FOR	*ONCOVER	~	SECURITIES (Box 6)				continued
Proceeds from Broker and Barter Exchange Transactions for	ter Exchange Tra	rsactions to	N	• !	; ;	i	SUPPLEMENTAL INFORMATION	INFORMATION
Description (Box 8)			Date of	Date of Sale		Cost or Other		
Stock or Other Symbol	Quantity Sold	Unit Price		or Exchange	Sales Price	Basis	Gain or Loss	Transaction
(Box 1d)	(Box 1e)		(Box 1b)	(Box 1a)	(Box 2a)*	(Box 3)	Amount	Description
	4,596.5820	25.26000	01/22/10	07/30/12	116,109 66	103,369.82	12,739,84	SALE
Subtotal	9,636.8400				241,309,66	216,717.22	24,592.44	
OPPENHEIMER INTL BD FD								
CUSIP 68380T509	9,456.8740	6 44000	VARIOUS	07/30/12	60,902.18	49,182.50	11,719.68	SALE
PIONEER BOND FUND								
CUSIP 723622403	6,893.8030	9,75000	9.75000 VARIOUS	07/30/12	67,214.49	704.59	66,509.90	SALE
PIONEER SER TR I PIONEER OAK RIDGE SMALL CAP GROWTH FUND CL Y								
CUSIP /2387 785	5,611.6800	28.59000	01/22/10	07/30/12	160,437.93	124,255.68	36,182 25	SALE
PIONEER SER TR III FUNDAMENTAL VALUE FD								
CUSIP 72387X406	983.1700	18,39000	VARIOUS	07/30/12	18,080.50	16,844.99	1,235.51	SALE
RS INVT TR EMERGING MKTS FD CL Y CUSIP 74972H416	553.9220	22.39000	VARIOUS	07/30/12	12,402.30	8.529.42	3,872.88	SALE
SMALLCAP WORLD FD INC CL F2 CUSIP 831681820	4.420.8000	37.09000	01/22/10	97/72/70	163 967 47	138 680 50	75.286.97	1 A.S.
THORNBURG INTL VALUE INTERNATIONAL VALUE FUND OLASS								
CUSIP 885215566	3,716,0520	25.89000	VARIOUS	07/30/12	96,208.53	113,407.25	-17,198.72	SALE



Page 14 of 57

Amended Date: 2/22/13

THE VAN WERT COUNTY FOUNDATION ATTN LARRY L WENDEL EXEC SEC 138 EAST MAIN STREET VAN WERT, OH 45891

Your Financial Advisor: SARGENTANIBAL 4660 S HAGADORN RD STE 300 EAST LANSING MI 48823 (517) 351-6084

Account Number: 4325-2491

Vear-End Account Summary

=

ou for courtesy purposes.	questions.	communad	
Inis information is NOT provided to the internal mevenue service, but is being provided to you for courtesy purposes.	Please consult with your Financial Advisor or Tax Advisor regarding specific questions.	LONG TERM GAINS OR LOSSES (Box 1c) FOR NONCOVERED SECURITIES (Box 6)	Parameter Destruction and Destruction Property Parameter State Office

Proceeds from Broker and Barter Exchange Transactions for	rter Exchange Tra	nsactions fo	r 2012				SUPPLEMENTAL INFORMATION	INFORMATION
Description (Box 8)			Date of	Date of Sale		Cost or Other		
Stock or Other Symbol	Quantity Sold	Unit Price	Acquisition	or Exchange	Sales Price	Basis	Gain or Loss	Transaction
(Box 1d)	(Box 1e)		(Box 1b)	(Box 1a)	(Box 2a)*	(Box 3)	Amount	Description
VANGUARD FIXED INC SEC FUND SHORT TERM FEDERAL PORTFOLIO								
CUSIP 922031604	15,611.7600	10.88000	01/22/10	07/30/12	169,855.94	168,763.12	1,092.82	SALE
VANGUARD INTERMEDIATE BOND ETF								
CUSiP 921937819	1,239.0000	89,67000	89.67000 VARIOUS	07/27/12	111,098.61	103,522.09	7,576.52	SALE
VANGUARD MID-CAP ET					-			
CUSIP 922908538	407.0000	64,81350	64.81350 VARIOUS 07/27/12	07/27/12	26,378.49	27,928,56	-1,550 07	SALE
VANGUARD SMALL CAP ET GROWTH								
CUSIP 922908595	127 0000	83,70000	83,70000 VARIOUS	07/27/12	10,629.65	7,470.41	3.159.24	SALE
VANGUARD TOTAL BOND ET MARKET								
CUSIP 921937835	727.0000	84.93930	05/09/11	07/27/12	61,749.48	59,085.68	2,663.80	SALE
VIRTUS FOREIGN OPPORTUNITIES FUND CL I								
CUSIP 92828R834	4,884.9690	24.11000	24.11000 VARIOUS	07/30/12	117.776.67	89,743,60	28,033.07	SALE
TOTAL LONG TERM GAINS OF LOSSES FOR NONCOVERED SECURITIES	LOSSES FOR NON	COVERED SE	CURITIES		6,512,597,45	5,639,736.88	872,860.57	

A2.15.

2012 CUNSOLIDATED FORM 1099 ORIGINAL 02/08/2013

NICOLAUS ONE FINANCIAL PLAZA 501 NORTH BROADWAY ST. LOUIS, MO 63102 VAN WERT COUNTY FOUNDATION ATTN LARRY L WENDEL EXEC SEC DEARBORN MANAGED ACCOUNT

PAYER INFORMATION:	NOIL		
STIFEL, NICOLAUS & COMPANY INCORPORATED	& COMPANY	INCORPORATED	
FEDERAL ID NO: 43-0538770	43-0538770		
F.A.	ACCOUNT	PAGE	
UL62	1378-6958	8 of 16	
TAXPAYER ID:	34-0907558		

1099-B DETAIL INFORMATION

a negligence penalty or other sanction may he imposed on you if this income is taxable and the IRS determines that it has not been reported. This is important fax information and is being furnished to the Internal Revenue Service (IRS). If you are required to file a return,

SALES PRICE LESS COMMISSIONS AND OPTION PREMIUMS

Gross Proceeds SHORT-TERM transactions with cost basis reported to the IRS-Report on Form 8949, Part I, with Box A checked

						WASH		
		DATE	DATE		COST	SALE (LOSS)	-	
DESCRIPTION	QUANTITY	DUANTITY ACQUIRED	SOLD	PROCEEDS	HASIS	DISALLOWED	GAEN/(LOSS)	ACTIVITY
ABBOTT LABORATORIES								
CUSIP/SEC NO 002824100	633.00	08/16/12	12/27/12	\$40,966.89	\$41,986.83		(\$1.019.94)	Sale
COMMERCE BANCSHARES INC								
CUSIP/SEC NO: 200525103	060	08/16/12	12/17/12	\$32.20	\$33.81		(\$1.61)	Cash In Lieu
Total Gross Proceeds SHORT-TERM								
transactions with cost basis		,				i		
reported to the IRS;	633.90	ı		840,999.09	\$42,926.64	20.00	(\$1,021.55)	

TOTAL SALES PRICE LESS COMMISSIONS AND OPTION PREMIUMS (BOX 2A)

\$40,999.09

OTTEE MICOLALIZA SOI NORTH BROADWAY ST. LOUIS, MO 63102

2012 CONSOLIDATED FORN 1059 ORIGINAL 02/08/2013

PAYER INFORMATION:
STIFEL, NICOLAUS & COMPANY, INCORPORATED
FEDERAL ID NO: 43-0538770
F.A. ACCOUNT PAGE
UL62 4870-1201
TAXPAYER ID: 34-0907558

THE VAN WERT COUNTY FOUNDATION ATTN LARRY L WENDEL EXEC SEC

1699-B DETAIL INFORMATION

a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. This is important tax information and is being furnished to the Internal Revenue Service (IRS). If you are required to file a return,

SALES PRICE LESS COMMISSIONS AND OPTION PREMIUMS

Gross Proceeds SHORT-TERM transactions with cost basis reported to the IRS -Report on Form 8949, Part I, with Box A checked WASH

DESCRIPTION	DATE QUANTITY ACQUIRED	DATE ACQUIRED	DATE	PROCEEDS	COST	SALE (LOSS) DISALLOWED	GAIN/(LOSS)	ACTIVITY
HARBOR BD I CIRTP/REC NO. 411511108	4.431.37	VARIOUS	07/27/12	45 677 34	\$55 483 96		\$1 193 28	ار م
LOOMIS INVT GRD BD Y CTISTD/SPC NO 543487136	2.467.66	VARIOUS	03/07/10	42. 10.000 42. 00.000	\$30 500 87		51 2000	3 6
TCW TITLE RET!	1, 50,50	27.0.20.71			90 COE 7 CO		6 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	2 -
COSIT/SEC NO: 8/234N880 VNGRD S/TRM FEDL INVS	19.070,5	v Arcious	01/21/12	233,445 02	354,702,04		3/42.98	Sale
CUSIP/SEC NO. 922031604 WASH MUT INVS F2	4,080.36	VARIOUS	10/24/12	\$44,353 60	\$44,378 01		(\$24.41)	Sale
CUSIP/SEC NO. 939330825 Total Gross Proceeds SHORT-IERM francactions with cost hasis	545 28	VARIOUS	07/27/12	\$16,794 61	\$16,273 07		\$521.54	Sale
reported to the IRS:	15,051,53		1	\$184,017.47	\$181,359.95	\$0.00	\$2,657.52	

Gross Proceeds SHORT-TERM transactions with cost basis NOT reported to the IRS -Report on Form 8949, Part I, with Box B checked WASH

DESCRIPTION	QUANTITY	DATE OVANTITY ACCURED	SOLD	PROCEEDS	COST	SALE (LOSS) DISALLOWED	GAIN/(LOSS)	ACTIVITY
DAVIS NY VENTURE Y CUSIP/SEC NO: 239080401	2,197.59	VARIOUS	07/27/12	\$78,300.16	\$68,208.75		\$10,091.41	Sale
HARBOR BD 1 CUSIP/SEC NO. 411511108	1,302,98	VARIOUS	07/27/12	\$16 665.13	\$15,769.03		\$896 10	Sale
LOOMIS INVT GRD BD Y CUSIP/SEC NO: 543487136	22,249.45	12/30/11	07/27/12	\$277,228.18	\$265,658,47		\$11,569.71	Sale



2012 CONSOLIDATED FORM 1099 ORIGINAL 02/08/2013

PAYER INFORMATION:
STIFEL, NICOLAUS & COMPANY, INCORPORATED
FEDERAL ID NO 43-0538770
F.A. ACCOUNT PAGE
UL62 4870-1201
TAXPAYER ID: 34-0907558

THE VAN WERT COUNTY FOUNDATION ATTN LARRY & WENDEL EXEC SEC

1099-B DETAIL INFORMATION (CONTINUED)

a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. This is important tax information and is being furnished to the Internal Revenue Service (IRS). If you are required to file a return,

SALES PRICE LESS COMMISSIONS AND OPTION PREMIUMS (CONTINUED)

Gross Proceeds SHORT-TERM transactions with cost basis NOT reported to the IRS. Report on Form 8949, Part I, with Box B checked (continued)

TANK CHARLES AND	ALLER FILE	DATE	DATE	ou and Out	COST	WASH SALE (LOSS)	\$ 1.00 mg	A product of the Charles
	COANTILY	ACOURED	and	PAUCLEUS	BASIS	DISALLOWED	GAIN/(COSS)	ACLIVALY
TCW TTL RET I	1		1		1			
CUSIP/SEC NO: 87234N880	27,776,49	12/30/11	07/27/12	\$279,153.67	\$267,765 31		\$11,388 36	Sale
VNGRD S/TRM FEDL INVS	•							
CUSIP/SEC NO 922031604	439 55	VARIOUS	10/24/12	\$4,777.92	\$4,770 05		\$7.87	Sale
WASH MU1 INVS F2								
CUSIP/SEC NO, 939330825	725.79	VARIOUS	07/27/12	\$22,354.21	\$19,313.01		\$3,041 20	Safe
Total Gross Proceeds SHORT-TERM								
transactions with cost dasis			Į					
NOT reported to the IRS:	54,691,85			\$678,479.27	\$641,484.62	80.00	\$36,994.65	

ACTIVITY	Sale	Sale	Sale	Sale	Sale
GAIN/(LOSS)	\$1,369.00	\$1,165.47	\$5,445.24	\$60.98\$	\$115,202.80
WASH SALE (LOSS) DISALLOWED					
COST	\$9,631.00	\$6,334.53	\$16,554.76	\$6,639,05	\$719,200.89
PROCEEDS	\$11,000.00	\$7,500.00	\$22,000.00	\$7,500 00	\$834,403.69
DATE SOLD	08/14/12	08/14/12	08/14/12	08/14/12	07/27/12
DATE ACQURED	01/22/10	01/22/10	01/22/10	01/22/10	VARIOUS
DATE QUANTITY ACQUIRED	397,97	359.71	978.65	213,49	23,418.57
DESCRIPTION	INVESCO INTL GRW Y CUSIP/SEC NO: 008882532	ARTISAN MDCF VAL INVS CUSIP/SEC NO. 04314H709	COLUMBIA MARS GRW Z CUSIP/SEC NO· 19765H180	DWS SMCP VAL S CUSIP/SEC NO: 23338F762	DAVIS NY VENTURE Y CUSIP/SEC NO: 239080401

THE MAN THE STREET OF PERSONS IN



THE VAN WERT COUNTY FOUNDATION ATTN LARRY L WENDEL EXEC SEC

2012 CONCCLIDATED FORN; 1099 **ORIGINAL** 02/08/2013

STIFEL, NICOLAUS & COMPANY, INCORPORATED [4 of 24 PAGE ACCOUNT 43-0538770 4870-1201 34-0907558 PAYER INFORMATION: FEDERAL ID NO: TAXPAYER ID: UL62

1099-B DETAIL INFORMATION (CONTINUED)

This is important tax information and is being furnished to the Internal Revenue Service (IRS). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

SALES PRICE LESS COMMISSIONS AND OPTION PREMIUMS (CONTINUED)

Gross Proceeds LONG-TERM transactions with cost basis NOT reported to the IRS -Report on Form 8949, Part II, with Box B checked (continued)

ACTIVITY		3415 51-0	Oalic Sele	San S	oale e.e.	3 170 170	S S S	מיים מיים	Sale Ale	2 1 S	Sign Sign Sign Sign Sign Sign Sign Sign	Sale
GAIN/(LOSS)	\$425.49	\$2,303.41	\$4.014 09	\$24,463.38	\$976 15	\$2,265 18	\$613,66	\$3.184.85	\$1,355.84	\$1,900.95	\$1,194.06	\$1,389.43
WASH SALE (LOSS) DISALLOWED												
COST BASIS	\$10,574.51	\$5,696.59	\$17,985,91	\$687,794.19	\$10,023.85	\$5,234.82	\$6,886.34	\$4,315.15	\$9,644,16	\$5,599 05	\$6,303.94	\$251,78988
PROCEEDS	\$11,000 00	\$8,000 00	\$22,000.00	\$712,257 57	\$11,000.00	\$7,500 00	\$7,500.00	\$7,500.00	\$11,000.00	\$7,500.00	\$7,500.00	\$253,179.31
DATE	08/14/12	08/14/12	08/14/12	07/27/12	08/14/12	08/14/12	08/14/12	08/14/12	08/14/12	08/14/12	08/14/12	10/24/12
DATE ACQUIRED	01/22/10	01/22/10	01/22/10	VARIOUS	01/22/10	01/22/10	08/12/11	12/05/08	01/22/10	01/22/10	01/22/10	VARIOUS
DATE QUANTITY ACQUIRED	285 57	299,40	674.64	55,688 63	190.28	312.37	411.86	290.59	428.85	252.87	201 02	23,291,57
<u>DESCRIPTION</u> EUROPACIFIC GRW F2	CUSIP/SEC NO: 29875E100 JPM MDCP VAL SEL	CUSIP/SEC NO: 339183105 GROWTH FD OF AMER F2	CUSIP/SEC NO: 399874825 HARBOR BD I	CUSIP/SEC NO 411511108 HARBOR INT. I	CUSIP/SEC NO: 411511306 HGHMRK GENVA MDCP GR FID	CUSIP/SEC NO: 431113505 1VY MDCP GRW I	CUSIP/SEC NO 466001609 KEELEY SMCP VAL I	CUSIP/SEC NO: 487300808 MFS INTL GRW I	CUSIP/SBC NO: 55273E848 PIONEER OAK SMCP GRW Y	CUSIP/SEC NO 723871785 SMALLCAP WORLD F2	CUSIP/SEC NO. 831681820 VNGRD S/TRM FEDL INVS	CUSIP/SEC NO: 922031604

ONE FINANCIAL PLAZA 501 NORTH BROADWAY ST. LOUIS, MO 63102

THE VAN WERT COUNTY FOUNDATION ATTN LARRY L WENDEL EXEC SEC

2012 CONSOLIDATED FORM 1959 **ORIGINAL 92/08/2013**

STIFEL, NICOLAUS & COMPANY, INCORPORATED 15 of 24 PAGE ACCOUNT 43-0538770 34-0907558 4870-1201 PAYER INFORMATION: FEDERAL ID NO. TAXPAYER ID: UL62 Ą.

1099-B DETAIL INFORMATION (CONTINUED)

This is important tax information and is being furnished to the Internal Revenue Service (IRS). If you are required to file a return, a negligence pensity or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

SALES PRICE LESS COMMISSIONS AND OPTION PREMIUMS (CONTINUED)

Gross Proceeds LONG-TERM transactions with cost basis NOT reported to the IRS Report on Form 8949, Part II, with Box B checked (continued)

	DATE	DATE	DATE		COST	SALE (LOSS)		
DESCRIPTION	OUANTITY /	ACOURED	SOLD	PROCEEDS	BASIS	DISALLOWED	CAIN/(LOSS)	ACTIVITY
WASH MUT INVS F2								
CUSIP/SEC NO: 939330825	6,032,40	01/22/10	06/06/12	\$175,000 00	\$146,225.45		\$28,774.55	Sale
	4,148.69	01/22/10	07/05/12	\$125,000.00	\$100,564 22		\$24,435 78	Sale
	415.70	01/22/10	07/05/12	\$12,525.00	\$10,076.55		\$2,448 45	Sale
	21,051 81	VARIOUS	07/27/12	\$648,395.79	\$515,931 08		\$132,464.71	Sare

WASH

	\$356,253.44	
	\$0.00	
	\$2,553,007.92	
	\$2,909,261.36	
	139,344.64	
Total Gross Proceeds LONG-TERM transactions with cost basis	NOT reported to the IRS:	

\$188,123.49

\$0.00

\$772,797.30 \$515,931 08

\$648,395.79 \$960,920.79

31,648.60

TOTAL:

CUSIP/SEC NO 939330825



2012 CONSCLIDATED FORM 1099 ORIGINAL 02/08/2013

STIFEL, NICOLAUS & COMPANY, INCORPORATED PAGE 6 of 14 ACCOUNT 43-0538770 8298-4319 34-0907558 PAYER INFORMATION: FEDERAL ID NO. TAXPAYER ID: UL62 ¥.

> WEDGEWOOD MANAGED ACCOUNT ATTN LARRY L WENDEL EXEC SEC VAN WERT COUNTY FOUNDATION

1099-B DETAIL INFORMATION

a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. This is important tax information and is being furnished to the Internal Revenue Service (IRS). If you are required to file a return,

SALES PRICE LESS CONIMISSIONS AND OPTION PREMIUMS

Gross Proceed; SHORT-TERM transactions with cost basis reported to the IRS -

Report on Form 8949, Part I, with Box A checked

DESCRIPTION	OUANTITY	DATE DUANTITY ACQUIRED	DATE SOLD	PROCEEDS	COST	WASH SALE (LOSS) DISALLOWED	GAIN/(LOSS)	ACTIVITY
AMERN EXPRESS CO CUSIP/SEC NO: 025816109	220.00	08/15/12	08/17/12	\$12,617.66	\$12,460.80		\$156.86	Sale
GILEAD SCIENCES INC CUSIP/SEC NO: 37558103	225.00	08/15/12	09/19/12	\$15,040 82	\$13,049,22		\$1.991.60	Sale
GOOGLE INC CL A CUSTP/SEC NO. 38259P508	12,00	08/15/12	08/24/12	\$8,134,51	\$8,010 68		\$123.83	Salas
	00 61	08/15/12	10/17/12	\$14,265.07	\$12,683.57		\$1,581.50	Sale
CUSIP/SEC NO 38259P508 TOTAL:	31.06		•	\$22,399.58	\$20,694.25	\$0.00	\$1,705.33	
NATIONAL OILWELL VARCO CUSIP/SEC NO: 637071101	75.00	08/15/12	09/10/12	\$6,125.64	\$5,749,40		\$376.24	Sale
VISA INC CLASS A CUSIP/SEC NO: 92826C839	55 00	08/15/12	10/22/12	\$7,642.03	\$7,094.14		\$547.89	Sale
Total Gross Proceeds SHORT-TERM transactions with cost bosis								
reported to the IRS:	60.909	1.	1	\$63,825.73	\$59,047.81	80.00	\$4,777.92	
TOTAL SALES PRICE LESS COMMISSIONS AND OPTION PREMIUMS (BOX 2A)	NS AND OPTIO	n Premiums	(BOX 2A)	\$63,825.73		- The state of the		

DETAILS - PROCEEDS FROM SALE TRADES OR EXCHANGES AND TAX WITHHELD

The proceeds stated on this page are reported net of option premiums. <u>However, option premiums are build into the call page are reported helps accurate computed below.</u> If you have securities sold become of the exercise of an epitica granted or ecquired before 2014, we have included option premium information as a separate column on this page, to help you reconcile to the gain/loss amount shown on this statement. Should you elect to report net of option premiums, you must adjust your gainlieus emounts on your Form 8949.

SECURITY DESCRIPTION	CUSIP	DATE OF ACQUISITION	DATE OF SALE OR EXCHANGE	GROSS PROCEEDS (LESS COMMISSIONS AND OPTION PREMIUMS)	COST OR OTHER BASIS	GAIN OR (LOSS)	NOLL40 NOLL40	WASH SALE AMOUNT ANJUSTMENT TO BASIS*	WASHSALE LOSS DISALLOWED ³	COLLECTIBLES ALLOCATION FACTOR (CAF)*
(BOX 8)	(BOX 1D)	(BOX 1B)	(BOX 1A)	(BOX 2A)	(BOX 3)				(BOX 5)	
SHORT-TERM CAPITAL GAINS OR LOSSES - ASSETS HELD ONE YEAR OR LESS (BOX 10)	SETS HELD ON	E YEAP OR LESS	(BOX 1C)		Mary And All Mary and the Company of the Compan					
COVERED (BOX 6B): FORM 8948 (BOX A) WITH BASIS REPORTED TO THE IRS	ASIS REPORTE	ED TO THE IRS								
EV LGCP VAL I QTY (BOX 1E) 81 735	277905642	09/12/12	11/01/12	1,607.75	1,590,56	17 19	00 0	000	00 0	
OPPEN INTL BD Y Q1 Y (BOX 1E) 1204 594	68380T509	VARIOUS	11/09/12	7,878.08	7 809 57	68,51	0.00	00 0	00 0	
THORN INTL VAL I QTY (BOX 16) 62 132	885215566	09/25/12	11/07/12	1,664 52	1,679 43	(14 91)	00'0	000	0.00	
TOTAL SHORT-TERM COVERED				11,150.35	11,079,56	70,79	0.00	0.00	00'0	
MON-COVERED'(BOX 6A): FORM 8849 (BOX B) WITH BAS'S <u>NO</u> I REPORTED TO THE IRS	THBAS'S NO	I PEPORTED TO 1	THEIRS							
CAP INCM BLDR A QTY (BOX 1E) 15942 255	140193103	VARIOUS	07/26/12	822,779.78	783,158.66	39,621,12	00:0	00:00	00 0	
FID ADVS NEW INSIGHTS I QTY (BOX 1E) 4337.091	316071604	01/13/12	10/25/12	98,625,53	88,216.43	10,409,10	000	000	0.00	
TOTAL SHORT-TERM NOW-COVERED				921,405.31	871,375.09	20'030'55	00'0	00'0	0,00	
Long-term capital gains or Losses - Assets held more than one year (Box 10)	ETS HELD MOP	RE THAN ONE YEA	IR (BOX 1C)	19. A 19				And the second s		
MONICOVEREDYBOX 84); FORM 1849 (BOX 8) WITH BASIS <u>NOT</u> REPORTED TO THE IRS	/THBASIS NO	I REPORTED TO	THE IRS							
CAP WRLD GRW INCM F1 OTY (BOX 15) 12644-620	140543406	VARIOUS	07/30/12	436,871.62	434,818.04	2,053,58	00 0	00:00	000	
EV LGCP VAL 1 QTY (BOX 1E), 5425,936	277905642	01/05/06	06/29/12	(00'000'00)	80,412.37	19,587,63	00 0	00'0	0.00	

These securities are not evered under the 1st and 2nd phases of the Cost Basis accounting legislations passed by Congress on October 3, 2008. Therefore the cost basis, anquisition date, drainwed less from work sales, and holding pariod are not being reported to the IRS for these securities. Please refer to the 2012 1099 Tax Guide online for more information on covered securities

² places note that the amount displayed in this column is included in the amount listed in the Cost Or Other Basis column, if there is a wash sale adjustment amount displayed, your halding period in the amount listed in the cost Or Other Basis column, if there is a wash sale amount displayed, your halding period in the amount listed in the column is includes the halding period of the stock or securities that were previously sold, where the loss deduction was postponed or disallowed.

³ The amounts listed in this column represent the losses you incurred from wash sales that cannot be deducted from your far reform

^{*} Collectibles Allocation Festor (CAF): Represents the percentage of proceeds associated with UIT grantor frusts you sold in 2012 that contain assets considered "collectibles," which is subject to a higher long-term napital gains rate of 28%, when units held over 1 year are disposed. Plaga refer to the 2012 WHFIT Guide on the for details.

1000 E. Continued

DETAILS - PROCEEDS FROM SALE TRADES OR EXCHANGES AND TAX WITHHELD

SECURITY DESCRIPTION: (BOX 9)	CUSIP (BOX 10)	DATE OF ACQUISITION (BGX 1B)	DATE OF SALE OR EXCHANGE (BOX 1A)	GROSS PROCEEDS (LESS COMMISSIONS AND OPTION PREMIUMS) (BOX 2A)	COST OR OTHER BASIS (BOX 3)	GAIN OR (LOSS)	OPTION PREMIUN	WASH SALE AMOUNT ADJUSTMENT TO BASIS ³	WASH SALE LOSS DISALLOWID* (BOX 5)	COLLECTIBLES ALLOCATION FACTOR (CAF)*
NON-COVERED (BOX 6A): FORM 8949 (BOX B) WITH BASIS NOT REPORTED TO THE IRS, confining	TH BASIS NO	REPORTED TO 7	HE IRS, confinue							
EV LGGP VAL I QTY (BOX 1E) 5227 392	277905642	VARIOUS	08/13/12	100,000.00	74,399,38	25,600 62	00'0	00'0	000	
EV LGCP VAL QTY (80X 1E); 16551 102	277905642	VARIOUS	11/01/12	325,560 15	240,649.71	84,910 44	00'0	00'0	000	
FID ADVS NEW INSIGHTS I QTY (BOX 1E) 19392 419	316071604	VARIOUS	10/25/12	440,983 53	302,026.49	138,957 04	0.00	00'0	000	
FUNDAMENTAL INVS F1 QTY (BOX 1E) 11424.510	360802409	05/28/10	08/24/12	449,554 47	388,196 19	50,358.28	000	0:00	00'0	
PERKINS MDCP VAL I QTY (BOX 1E) 18165,320	47103C241	VARIOUS	11/05/12	397,820.51	291,072 18	106,748 33	00'0	0.0	0000	
OPPEN INTL 8D Y QTY (BOX 1E) 85647 520	683807509	VARIOUS	11/09/12	560,135.40	526,638 19	33,497.21	000	0.0	000	
PIONEER FNDMNTL VAL Y QTY (BOX 1E) 11804 890	72397X406	VARIOUS	11/01/12	225,237.30	170,301 00	54,936 30	0:00	0000	000	
THORN INTL VAL I QTY (BOX 1E) 16960 500	885215566	VARIOUS	11/07/112	454,371,79	406,521.16	47,850 63	0.00	000	0 0	
Total Long-Term non-covered				3,490,534,77	2,926,034.71	564,500.08	0.00	0.00	00'0	

1099-B

DETAILS - PROCEEDS FROM CHANGES IN CORPORATE CONTROL OR CAPITAL STRUCTURE

This saction includes cash and stock received from mergers, redemptions (including those redeemed at maturity), tenders, liquidations, cash received in lieu of fractional shares, bankruptoies and any other transaction where a price per share is not available due to the transaction by the issuer and not by you.

SECURITY PFECPIPTION	CUSIP	DATE OF ACQUISTION	DATE OF SALE OR FYCHANGE	CASH OR STOCK RECEIVED IN REPORTABLE CHANGE IN CONTROL OR CAPITAL STRUCTURE	COST OR OTHER BASIS	GAIN OH (LOSS) /	IF CHECKED, LOSS NOT ALLOWED IN BOX 2A3	ACTIVITY TYPE	CWLF TIBLES ALLOCATION FACTOR (CAF)4
(BOX 8)	(\$0 x 10)	(BOX 18)	(BOX 1A)	(BOX 2A)	(BOX 3)		(BOX 2B)	ame America (September 1988) de la como de l	A + O Made do casa differential property of page of the comment
CONG.TERM CAPITAL GAINS OR LOSSES - ASSETS HELD MORE THAN ONE YEAR	OR LOSSES - AS	SETS HELD MORE THAN	ONE YEAR (BOX 1C)						
NON COVERED , IBOX 6A) FORM 8849 (BOX B) WITH BABIS HOL REPORTED TO THE IRS	(M 8848 (BOX B)	WITH BASIS NOT REPOR	TEG TO THE IRS						
HSBC HLDGS - 5.25 121212 QTY (BQY 151 30000 040	404280ABS	05/17/05	12/12/12	30 000 90	31,059 00	(1,054 00)		REDEMPTION	
TOTAL LONG YERM NOR-COVERED	-RED			30 000 00	31,059 00	(3,059 00)		### - postoje prijerje voje do jeden izalizacija do jeden izalizac	de destina (SEA-SEAME) FF - *********************************
TOTAL PROCEEDS FROM CHANGES IN CONTRO! AND CAPITAL STRUCTURE (BOX	VISES IN CONTR	IO' AND GAPITAL STRUC	TURE (BOX 2A)	30,000-00	31,059 00	(1059 00)			

These sorutions are not coursed that 1st and 2nd phases of the Cost Basis accounting legislations passed by Congress on October 3, 2008. Therefore the cost basis and that date, disaffewer loss from wesh sales and bolding parted are not being reported to the IRS for thate securities. Please refer to the 2012 1099 Tax Guide online for more information on covered securities

account or method and progette gata or loss on every principal paydown. Which would override or nulfly the gain of loss amount shown on this statement. Should you choose the father, please consult with your far professional on ZFor principal payments from REMICs or other first incrine securities, LPL Financial defruits to the eccounting method of recognishing gain or loss at the linear recomption of dispusition of the asset You may inclend about a different reforbating the actual gain or loss amount for your tax return

34 loss may not be taken on any cash and stock received from this merger

Acostecibles Alexation Factor (CAF): Represents the percentage of proceeds associated with UII granter trusts you sold in 2012 that contain assets considered collectibles. Which is subject to a higher long term capital year, rate of 28%, when units held over 1 year are disposed. Please refer to the 2012 WHFIT. Guide colline for details Additional Data Return to Form

Software ID: Software Version:

EIN: 34-0907558

Name: THE VAN WERT COUNTY FOUNDATION

-->