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

**2012**

Department of the Treasury  
Internal Revenue Service

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

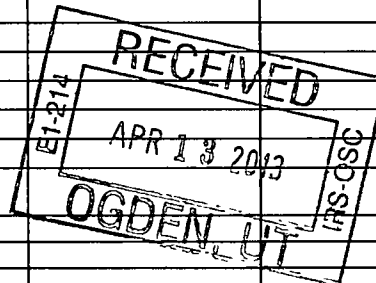
**For calendar year 2012, or tax year beginning , 2012, and ending**

Name of foundation <b>ILLINOIS VALLEY FINE ARTS TRUST</b>		<b>A</b> Employer identification number <b>36-3915713</b>
Number and street (or P O box number if mail is not delivered to street address) <b>315 5TH STREET</b>	Room/suite	<b>B</b> Telephone number (see the instructions) <b>(815) 224-1657</b>
City or town <b>PERU</b>	State ZIP code <b>IL 61354-2859</b>	<b>C</b> If exemption application is pending, check here <input type="checkbox"/>
<b>G</b> Check all that apply	<input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change	<b>D</b> 1 Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
<b>H</b> Check type of organization	<input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation	<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
<b>I</b> Fair market value of all assets at end of year (from Part II column (c), line 16) \$ <b>250,005.</b>	<b>J</b> Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)	<b>F</b> If the foundation is in a 60 month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

<b>Part I Analysis of Revenue and Expenses</b> (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>1</b> Contributions, gifts, grants, etc received (att sch)	13,604.			
<b>2</b> <input checked="" type="checkbox"/> if the foundn is not req to att Sch B				
<b>3</b> Interest on savings and temporary cash investments	11.	11.		
<b>4</b> Dividends and interest from securities	5,415.	5,415.		
<b>5a</b> Gross rents				
<b>b</b> Net rental income or (loss)				
<b>6a</b> Net gain/(loss) from sale of assets not on line 10				
<b>b</b> Gross sales price for all assets on line 6a				
<b>7</b> Capital gain net income (from Part IV, line 2)		26.		
<b>8</b> Net short-term capital gain			26.	
<b>9</b> Income modifications				
<b>10a</b> Gross sales less returns and allowances				
<b>b</b> Less Cost of goods sold				
<b>c</b> Gross profit/(loss) (att sch)				
<b>11</b> Other income (attach schedule) <b>CAPITAL GAIN DIV</b>	600.	600.		
<b>12 Total.</b> Add lines 1 through 11	19,630.	6,052.	26.	
<b>13</b> Compensation of officers, directors, trustees, etc				
<b>14</b> Other employee salaries and wages				
<b>15</b> Pension plans, employee benefits				
<b>16a</b> Legal fees (attach schedule)				
<b>b</b> Accounting fees (attach sch)	150.			
<b>c</b> Other prof fees (attach sch) <b>L-16c Stmt</b>	2,930.			
<b>17</b> Interest				
<b>18</b> Taxes (attach schedule)(see instrs) <b>TAX ON INVESTMENT</b>	124.			
<b>19</b> Depreciation (attach sch) and depletion				
<b>20</b> Occupancy				
<b>21</b> Travel, conferences, and meetings				
<b>22</b> Printing and publications				
<b>23</b> Other expenses (attach schedule) <b>FILING FEES</b>	115.			
<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23	3,319.			
<b>25</b> Contributions, gifts, grants paid	8,900.			
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	12,219.			
<b>27 Subtract line 26 from line 12:</b>				
<b>a Excess of revenue over expenses and disbursements</b>	7,411.			
<b>b Net investment income</b> (if negative, enter 0)		6,052.		
<b>c Adjusted net income</b> (if negative, enter 0)			26.	

SCANNED APR 24 2013

ADMINISTRATIVE EXPENSES



14 P

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
ASSETS	1	Cash – non-interest-bearing		3,335.	13,348.	13,348.
	2	Savings and temporary cash investments		6,569.	5,558.	5,558.
	3	Accounts receivable ▶				
		Less allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
		Less allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach sch) ▶				
		Less allowance for doubtful accounts ▶				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10a	Investments – U S and state government obligations (attach schedule)				
		b Investments – corporate stock (attach schedule)				
		c Investments – corporate bonds (attach schedule)				
	11	Investments – land buildings, and equipment basis ▶				
	Less accumulated depreciation (attach schedule) ▶					
12	Investments – mortgage loans					
13	Investments – other (attach schedule) L-13 Stmt			214,207.	231,099.	231,099.
14	Land, buildings, and equipment basis ▶					
	Less accumulated depreciation (attach schedule) ▶					
15	Other assets (describe ▶)					
16	<b>Total assets</b> (to be completed by all filers – see the instructions Also, see page 1, item I)			224,111.	250,005.	250,005.
LIABILITIES	17	Accounts payable and accrued expenses				
	18	Grants payable				
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, & other disqualified persons				
	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe ▶)				
	23	<b>Total liabilities</b> (add lines 17 through 22)				
NET ASSETS OR FUND BALANCES	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. <input checked="" type="checkbox"/>					
	24	Unrestricted		224,111.	250,005.	
	25	Temporarily restricted				
	26	Permanently restricted				
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. <input type="checkbox"/>					
	27	Capital stock, trust principal, or current funds				
	28	Paid-in or capital surplus, or land, building, and equipment fund				
	29	Retained earnings, accumulated income, endowment, or other funds				
	30	<b>Total net assets or fund balances</b> (see instructions)			224,111.	250,005.
31	<b>Total liabilities and net assets/fund balances</b> (see instructions)			224,111.	250,005.	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	224,111.
2	Enter amount from Part I, line 27a	2	7,411.
3	Other increases not included in line 2 (itemize) ▶ <u>UNREALIZED INVESTMENT GAINS</u>	3	18,483.
4	Add lines 1, 2, and 3	4	250,005.
5	Decreases not included in line 2 (itemize) ▶ <u>See Other Decreases Stmt</u>	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30	6	250,005.

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shares MLC Company)

(b) How acquired  
P - Purchase  
D - Donation

(c) Date acquired  
(month, day, year)

(d) Date sold  
(month, day, year)

<b>1 a</b> RETAIL PROPERTIES OF AMERICA	P	Various	04/05/12
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> 26.	0.	0.	26.
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	(l) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))
<b>a</b> 0.	0.	0.	26.
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss)	[ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 ]	<b>2</b>	26.
<b>3</b> Net short term capital gain or (loss) as defined in sections 1222(5) and (6)		<b>3</b>	26.

If gain, also enter in Part I, line 8 column (c) (see instructions) If (loss) enter -0- in Part I, line 8

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes  No

If 'Yes,' the foundation does not qualify under section 4940(e) Do not complete this part

**1** Enter the appropriate amount in each column for each year, see the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (column (b) divided by column (c))
2011	2,900.	217,889.	0.013310
2010	15,946.	224,121.	0.071149
2009		207,810.	
2008		189,030.	
2007	14,623.	237,404.	0.061595

<b>2</b> Total of line 1, column (d)	<b>2</b>	0.146054
<b>3</b> Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	<b>3</b>	0.048685
<b>4</b> Enter the net value of noncharitable-use assets for 2012 from Part X, line 5	<b>4</b>	234,528.
<b>5</b> Multiply line 4 by line 3	<b>5</b>	11,418.
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	61.
<b>7</b> Add lines 5 and 6	<b>7</b>	11,479.
<b>8</b> Enter qualifying distributions from Part XII line 4	<b>8</b>	8,900.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)**

1 a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter 'N/A' on line 1 Date of ruling or determination letter: _____ (attach copy of letter if necessary – see instrs)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b	1	121.
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0.
3	Add lines 1 and 2	3	121.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0.
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-	5	121.
6	Credits/Payments:		
a	2012 estimated tax pmts and 2011 overpayment credited to 2012	6 a	
b	Exempt foreign organizations – tax withheld at source	6 b	
c	Tax paid with application for extension of time to file (Form 8868)	6 c	
d	Backup withholding erroneously withheld	6 d	
7	Total credits and payments. Add lines 6a through 6d	7	
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>	9	121.
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>	10	0.
11	Enter the amount of line 10 to be <b>Credited to 2013 estimated tax</b>	11	
	<b>Refunded</b>		

**Part VII-A Statements Regarding Activities**

	Yes	No
1 a		X
1 b		X
<i>If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>		
1 c		X
d		
e		
2		X
3		X
4 a		X
4 b		
5		X
6	X	
7	X	
8 a		
8 b	X	
9		X
10		X

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**Part VII-A Statements Regarding Activities (continued)**

11	At any time during the year, did the foundation directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes' attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <span style="float:right">▶ N/A</span>	13	X	
14	The books are in care of ▶ <u>HELGA INTERRANTE</u> Telephone no ▶ <u>(815) 224-6674</u> Located at ▶ <u>315 5TH STREET, PERU, IL</u> ZIP + 4 ▶ <u>61354</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year <span style="float:right">▶ 15</span>			
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16		X
See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If 'Yes,' enter the name of the foreign country ▶				

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.

		Yes	No
1 a	During the year did the foundation (either directly or indirectly)		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6)	Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is 'Yes' to 1a(1)-(6) did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here <span style="float:right">▶ <input type="checkbox"/></span>	1 b	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2012?	1 c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes,' list the years ▶ 20 __ , 20 __ , 20 __ , 20 __		
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement - see instructions)	2 b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20 __ , 20 __ , 20 __ , 20 __		
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If 'Yes' did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2012)	3 b	
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4 b	X

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**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required** (continued)

**5 a** During the year did the foundation pay or incur any amount to

(1) Carry on propaganda or otherwise attempt to influence legislation (section 4945(e))?  Yes  No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?  Yes  No

(3) Provide a grant to an individual for travel, study, or other similar purposes?  Yes  No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2) or (3), or section 4940(d)(2)? (see instructions)  Yes  No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes or for the prevention of cruelty to children or animals?  Yes  No

**b** If any answer is 'Yes' to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?  Yes  No

Organizations relying on a current notice regarding disaster assistance check here

**c** If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  Yes  No

If 'Yes' attach the statement required by Regulations section 53.4945-5(d).

**6 a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No

If 'Yes' to 6b file Form 3870

**7 a** At any time during the tax year was the foundation a party to a prohibited tax shelter transaction?  Yes  No

**b** If 'Yes' did the foundation receive any proceeds or have any net income attributable to the transaction?  Yes  No

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
M. BLOUKE CARUS 315 5TH STREET PERU IL 61354	CHAIRMAN 2.00	0.	0.	0.
LINSKO PRIVATE LEDGER 613 FIRST STREET LA SALLE IL 61301	TRUSTEE 2.00	0.	0.	0.
ROBERT BILLINGS 3 MANOR COURT PERU IL 61354	TRUSTEE 0.50	0.	0.	0.
See Information about Officers, Directors, Trustees, Etc		0.	0.	0.

**2 Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter 'NONE.'**

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** (continued)

**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
-----		
-----		
-----		
-----		

Total number of others receiving over \$50,000 for professional services None

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 <u>TO HELP MAINTAIN &amp; SUPPORT THE FINE ARTS PROGRAMMING EFFORTS OF TWENTY-THREE DIFFERENT NONPROFIT ORGANIZATIONS. ALL RECIPIENTS ARE LOCATED IN A THREE COUNTY AREA.</u>	8,900.
2 -----	
3 -----	
4 -----	

**Part IX-B Summary of Program-Related Investments** (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 -----	
2 -----	
All other program-related investments See instructions 3 -----	
<b>Total.</b> Add lines 1 through 3 <span style="float: right;">▶</span>	

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**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b> Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b> Average monthly fair market value of securities	<b>1 a</b>	231,099.
<b>b</b> Average of monthly cash balances	<b>1 b</b>	7,000.
<b>c</b> Fair market value of all other assets (see instructions)	<b>1 c</b>	
<b>d Total</b> (add lines 1a, b, and c)	<b>1 d</b>	238,099.
<b>e</b> Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1 e</b>	
<b>2</b> Acquisition indebtedness applicable to line 1 assets	<b>2</b>	
<b>3</b> Subtract line 2 from line 1d	<b>3</b>	238,099.
<b>4</b> Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	<b>4</b>	3,571.
<b>5 Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	234,528.
<b>6 Minimum investment return.</b> Enter 5% of line 5	<b>6</b>	11,726.

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here  and do not complete this part.)

<b>1</b> Minimum investment return from Part X, line 6	<b>1</b>	11,726.
<b>2 a</b> Tax on investment income for 2012 from Part VI, line 5	<b>2 a</b>	121.
<b>b</b> Income tax for 2012 (This does not include the tax from Part VI)	<b>2 b</b>	
<b>c</b> Add lines 2a and 2b	<b>2 c</b>	121.
<b>3</b> Distributable amount before adjustments. Subtract line 2c from line 1	<b>3</b>	11,605.
<b>4</b> Recoveries of amounts treated as qualifying distributions	<b>4</b>	
<b>5</b> Add lines 3 and 4	<b>5</b>	11,605.
<b>6</b> Deduction from distributable amount (see instructions)	<b>6</b>	
<b>7 Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	<b>7</b>	11,605.

**Part XII Qualifying Distributions** (see instructions)

<b>1</b> Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b> Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	<b>1 a</b>	8,900.
<b>b</b> Program-related investments - total from Part IX-B	<b>1 b</b>	
<b>2</b> Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	<b>2</b>	
<b>3</b> Amounts set aside for specific charitable projects that satisfy the		
<b>a</b> Suitability test (prior IRS approval required)	<b>3 a</b>	
<b>b</b> Cash distribution test (attach the required schedule)	<b>3 b</b>	
<b>4 Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	8,900.
<b>5</b> Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	<b>5</b>	0.
<b>6 Adjusted qualifying distributions.</b> Subtract line 5 from line 4	<b>6</b>	8,900.

**Note.** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI line 7				11,605.
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only			10,770.	
b Total for prior years 20__ 20__ 20__				
3 Excess distributions carryover, if any, to 2012				
a From 2007	3,127.			
b From 2008	3,610.			
c From 2009	13,950.			
d From 2010	16,000.			
e From 2011	2,900.			
f Total of lines 3a through e	39,587.			
4 Qualifying distributions for 2012 from Part XII, line 4: \$ 8,900.				
a Applied to 2011, but not more than line 2a				
b Applied to undistributed income of prior years (Election required - see instructions)				
c Treated as distributions out of corpus (Election required - see instructions)				
d Applied to 2012 distributable amount				
e Remaining amount distributed out of corpus	8,900.			
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	48,487.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable amount - see instructions		0.		
e Undistributed income for 2011 Subtract line 4a from line 2a Taxable amount - see instructions			10,770.	
f Undistributed income for 2012 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2013				11,605.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8 Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions)	3,127.			
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	45,360.			
10 Analysis of line 9				
a Excess from 2008	3,610.			
b Excess from 2009	13,950.			
c Excess from 2010	16,000.			
d Excess from 2011	2,900.			
e Excess from 2012	8,900.			

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9) N/A

**1 a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2012, enter the date of the ruling ▶

**b** Check box to indicate whether the foundation is a private operating foundation described in section  4942(j)(3) or  4942(j)(5)

	Tax year				(e) Total
	(a) 2012	(b) 2011	(c) 2010	(d) 2009	
<b>2 a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
<b>b</b> 85% of line 2a					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> 'Assets' alternative test – enter					
<b>(1)</b> Value of all assets					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> 'Endowment' alternative test – enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
<b>c</b> 'Support' alternative test – enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)) or royalties)					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year – see instructions.)**

**1 Information Regarding Foundation Managers:**  
**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2).)  
 NONE

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest  
 NONE

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc. Programs:**  
 Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

**a** The name, address, and telephone number or e-mail of the person to whom applications should be addressed  
 See Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc, Programs

**b** The form in which applications should be submitted and information and materials they should include

**c** Any submission deadlines

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

**Part XV Supplementary Information** (continued)

**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<i>a Paid during the year</i>				
COMMUNITY PLAYERS OF STREATOR 203 JOYCE ST STEATOR IL 61364		ACTIVE	PROGRAM SUPPORT	600.
HEGELER CARUS FOUNDATION 1307 7TH ST LA SALLE IL 61301		ACTIVE	PROGRAM SUPPORT	200.
SPRING VALLEY MAUTINO PUBLIC LIBRARY STREET SPRING VALLEY IL 61362		ACTIVE	PROGRAM SUPPORT	0.
ILLINOIS VALLEY CARVERS ASSOCIATION 746 HIAWATHA DRIVE OTTAWA IL 61350		ACTIVE	PROGRAM SUPPORT	100.
ILLINOIS VALLEY SYMPHONY ORCHESTRA 9 OAKDALE SPRING VALLEY IL 61362		ACTIVE	PROGRAM SUPPORT	600.
ILLINOIS VALLEY YOUTH CHCIR 1715 GREEN ST PERU IL 61354		ACTIVE	PROGRAM SUPPORT	300.
ILLINOIS VALLEY YOUTH SYMPHONY 133 CHURCH ST OGLESBY IL 61348		ACTIVE	PROGRAM SUPPORT	600.
OTTAWA ART LEAGUE ST OTTAWA IL 61350		ACTIVE	PROGRAM SUPPORT	400.
PERU PUBLIC LIBRARY ST PERU IL 61354		ACTIVE	PROGRAM SUPPORT	0.
See Line 3a statement				6,100.
<b>Total</b>			<b>3a</b>	<b>8,900.</b>
<i>b Approved for future payment</i>				
NONE		NONE	NONE	0.
NONE				
NONE IL 61301				
<b>Total</b>			<b>3b</b>	<b>0.</b>





Form 990-PF, Page 2, Part III, Line 5

**Other Decreases Stmt**

REALIZED LOSSES ON MUTUAL FUND	0.
UNREALIZED LOSSES ON INVESTMENTS	0.
Total	<u>0.</u>

Form 990-PF, Page 6, Part VIII, Line 1

**Information about Officers, Directors, Trustees, Etc.**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Person <input checked="" type="checkbox"/> Business <input type="checkbox"/> RICHARD BROWN 7251 2390 EAST ST PRINCETON IL 61356	TRUSTEE 0.50	0.	0.	0.
Person <input checked="" type="checkbox"/> Business <input type="checkbox"/> STEVEN M. GONZALO 701 LA SALLE ST OTTAWA IL 61350	TRUSTEE 0.50	0.	0.	0.
Person <input checked="" type="checkbox"/> Business <input type="checkbox"/> GREGORY TULLIS 1311 SHOOTING PARK RD PERU IL 61354	TRUSTEE 0.50	0.	0.	0.
Person <input checked="" type="checkbox"/> Business <input type="checkbox"/> PATRICK BARRY 160 MARQUETTE ST LA SALLE IL 61301	TRUSTEE 0.05	0.	0.	0.
Person <input checked="" type="checkbox"/> Business <input type="checkbox"/> WALTER ZUKOWSKI 817 PEORIA ST PERU IL 61354	TRUSTEE 0.50	0.	0.	0.
Total		<u>0.</u>	<u>0.</u>	<u>0.</u>

Form 990-PF, Page 10, Part XV, Line 2

**Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc, Programs**

Name BLOUKE CARUS  
 Address 315 5TH STREET  
 City, St, Zip, Phone PERU IL 61354 (815) 223-1500  
 E-mail \_\_\_\_\_

The form in which applications should be submitted and information and materials they should include:  
CONTACT ABOVE

Any submission deadlines  
DETERMINED ANNUALLY

Any restrictions or limitations on awards such as by geographical areas, charitable fields, kinds of institutions, or other factors:

LIMITED TO FINE ARTS PROGRAMMING & SCHOLARSHIPS IN LA SALLE, BUREAU, &  
 Name HELGA INTERRANTE  
 Address 315 5TH STREET  
 City, St, Zip, Phone PERU IL 61354  
 E-mail \_\_\_\_\_

The form in which applications should be submitted and information and materials they should include:

Any submission deadlines:

Any restrictions or limitations on awards such as by geographical areas, charitable fields, kinds of institutions, or other factors.

PUTNAM COUNTIES, ILLINOIS

Form 990-PF, Page 11, Part XV, line 3a

**Line 3a statement**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox  Amount
<i>a Paid during the year</i>				
<u>OTTAWA COMM. CONCERTS ASSOCIATION</u> <u>ST</u> <u>OTTAWA</u> <u>IL</u> <u>61350</u>	-----	<u>ACTIVE</u>	<u>PROGRAM SUPPORT</u>	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 400.
<u>LA SALLE COUNTY HIS. MUSEUM</u> <u>ST</u> <u>UTICA</u> <u>IL</u> <u>61373</u>	-----	<u>ACTIVE</u>	<u>PROGRAM SUPPORT</u>	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 100.
<u>LPS FRIENDS OF MUSIC DEPT</u> <u>ST</u> <u>LA SALLE</u> <u>IL</u> <u>61301</u>	-----	<u>ACTIVE</u>	<u>PROGRAM SUPPORT</u>	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 100.
<u>LA SALLE PUBLIC SCHOOLS</u> <u>ST</u> <u>LA SALLE</u> <u>IL</u> <u>61301</u>	-----	<u>ACTIVE</u>	<u>PROGRAM SUPPORT</u>	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 200.

Form 990-PF, Page 11, Part XV, line 3a

Continued

## Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox  Amount
<b>a</b> Paid during the year				
MALDEN CCSD #84 ST MALDEN IL 61437		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 0.
MAUD POWELL MUSIC FESTIVAL ST PERU IL 61354		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 500.
MENDOTA COMMUNITY THEATER ST MENDOTA IL 61342		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 350.
NORTHERN BLUEGRASS ASSN. ST GRAND RIDGE IL 61325		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 0.
PRAIRIE ARTS COUNCIL ST PRINCETON IL 61356		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 600.
PRINCETON CIVIL WAR COMMITTEE ST PRINCETON IL 61356		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 300.
PERU PUBLIC LIBRARY ST PERU IL 61354		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 0.
STAGE 212 FIRST ST LA SALLE IL 61301		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 500.
LA SALLE PUBLIC LIBRARY ST LA SALLE IL 61301		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 0.
COVERED BRIDGE CHORUS ST PRINCETON IL 61356		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 200.
OTTAWA MCKINLEY SCHOOL ST OTTAWA IL 61350		ACTIVE	PROGAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 0.
STREATOR ELEMENTARY SCHOOLS ST STREATOR IL 61364		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 0.
STREATOR PUBLIC LIBRARY 130 SOUTH PARK ST STEATOR IL 61364		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 100.
PRINCETON STAGE 56 THEATOR ST PRINCETON IL 61356		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 350.
NONE ST PERU IL 61354		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 0.

Form 990-PF. Page 11, Part XV, line 3a

Continued

## Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foun- dation status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox  Amount
<b>a Paid during the year</b>				
OGLESBY WASHINGTON JR HIGH ST OGLESBY IL 61348		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 100.
SPRING VALLEY BOOSTERS ST SPRING VALLEY IL 61362		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 0.
CARING HANDS DAYCARE CENTER ST LA SALLE IL 61301		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 0.
PERU CATHOLIC SCHOOLS ST PERU IL 61354		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 0.
LEPERTOWN SCHOOLS 100 NORTH ST BUREAU IL 61315		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 100.
BUPEAU COUNTY HISTORICAL SOCIETY ST SPRING VALLEY IL 61362		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 200.
GIRL SCOUTS OF CENTRAL ILL ST OTTAWA IL 61350		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 200.
ILLINOIS ALLIANCE FOR ARTS EDUCATION CAMP 56 OTTAWA IL 61350		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 100.
NORTH CENTRAL ILLINOIS ARTWORKS ST PERU IL 61354		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 200.
LADD COMM CONS SCHOOLS ST LADD IL 61329		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 200.
LOSTANT COMM LIBRARY ST LOSTANT IL 61334		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 200.
LP CHORAL FESTIVAL ST TONICA IL 61370		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 300.
MARQUETTE ACADEMY ST OTTAWA IL 61350		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 100.
MARSEILLES ELEM SCHOOL ST MARSEILLES IL 61341		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 100.
NORTH CENTRAL ILL ARTWORKS ST PERU IL 61354		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 200.

Form 990-PF, Page 11, Part XV, Line 3a

Continued

**Line 3a statement**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox  Amount
<i>a Paid during the year</i>				
PRINCETON COMMUNITY BAND ST PRINCETON IL 61356		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 200.
PRINCETON PUBLIC LIBRARY ST PRINCETON IL 61356		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 100.
WASHINGTON SCHOOL ST PERU IL 61354		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 0.
RICHARD MAUTINO PUBLIC LIBRARY ST PERU IL 61354		ACTIVE	PROGRAM SUPPORT	Person or Business <input checked="" type="checkbox"/> 100.

Total

6,100.

Form 990-PF, Page 1, Part I

**Line 16c - Other Professional Fees**

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LPL FINANCIAL	ADVISORY FEES	1,930.			
CARUS CORPORATION	PROF FEES	1,000.			

Total

2,930.

Form 990-PF, Page 2, Part II, Line 13

**L-13 Stmt**

Line 13 - Investments - Other:	End of Year	
	Book Value	Fair Market Value
MUTUAL FUNDS	202,433.	202,433.
PIEDMONT REALTY	18,442.	18,442.
INLAND WESTERN-REIT	10,151.	10,151.
CASH & EQUIVALENTS	73.	73.
Total	<u>231,099.</u>	<u>231,099.</u>