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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

|   |  |  |  |  |  |
|---|--|--|--|--|--|
| <p>Name of foundation<br/><b>VIOLA E LUNDEBERG TRUST</b><br/>Number and street (or P O box number if mail is not delivered to street address)<br/><b>C/O K ENGEL N6059 CTY RD E</b><br/>City or town<br/><b>RIVER FALLS</b><br/>State ZIP code<br/><b>WI 54022</b></p> <p>G Check all that apply. <input type="checkbox"/> Initial return <input type="checkbox"/> Initial Return of a former public charity<br/><input type="checkbox"/> Final return <input type="checkbox"/> Amended return<br/><input type="checkbox"/> Address change <input type="checkbox"/> Name change</p> <p>H Check type of organization: <input type="checkbox"/> Section 501(c)(3) exempt private foundation<br/><input checked="" type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation</p> <p>I Fair market value of all assets at end of year (from Part II, column (c), line 16) <b>► \$ 606,375.</b></p> <p>J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual<br/><input type="checkbox"/> Other (specify) <b>Other (specify)</b></p> <p><i>(Part I, column (d) must be on cash basis.)</i></p>  |  | <p><b>A Employer identification number</b><br/><b>39-6503917</b></p> <p><b>B Telephone number (see the instructions)</b><br/><b>(715) 425-5736</b></p> <p><b>C</b> If exemption application is pending, check here ► <input type="checkbox"/></p> <p><b>D</b> 1 Foreign organizations, check here ► <input type="checkbox"/><br/>2 Foreign organizations meeting the 85% test, check here and attach computation ► <input type="checkbox"/></p> <p><b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here ► <input type="checkbox"/></p> <p><b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ► <input type="checkbox"/></p> |  |  |  |
| <p><b>Part I</b> <b>Analysis of Revenue and Expenses</b> <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)</i></p> <p><b>R E V E N U E</b></p> <p>1 Contributions, gifts, grants, etc, received (att sch) <b>46,805.</b></p> <p>2 Ck ► <input type="checkbox"/> if the foundn is not req to att Sch B</p> <p>3 Interest on savings and temporary cash investments <b>17.</b> <b>17.</b></p> <p>4 Dividends and interest from securities <b>20,758.</b> <b>20,758.</b></p> <p>5 a Gross rents<br/>b Net rental income or (loss)</p> <p>6 a Net gain/(loss) from sale of assets not on line 10 <b>720.</b> <b>L-6a Stmt</b></p> <p>b Gross sales price for all assets on line 6a <b>52,252.</b></p> <p>7 Capital gain net income (from Part IV, line 2) <b>720.</b></p> <p>8 Net short-term capital gain ..</p> <p>9 Income modifications ..</p> <p>10 a Gross sales less returns and allowances ..<br/>b Less Cost of goods sold ..<br/>c Gross profit/(loss) (att sch) ..</p> <p>11 Other income (attach schedule) ..</p> <p>12 <b>Total.</b> Add lines 1 through 11 <b>68,300.</b> <b>21,495.</b></p> <p><b>ADMINISTRATIVE EXPENSES</b></p> <p>13 Compensation of officers, directors, trustees, etc <b>5,000.</b> <b>5,000.</b></p> <p>14 Other employee salaries and wages ..</p> <p>15 Pension plans, employee benefits ..</p> <p>16 a Legal fees (attach schedule) ..<br/>b Accounting fees (attach sch) <b>L-16b Stmt</b> <b>1,295.</b> <b>1,295.</b><br/>c Other prof fees (attach sch) <b>L-16c Stmt</b> <b>7,400.</b> <b>7,400.</b></p> <p>17 Interest ..</p> <p>18 Taxes (attach schedule)(see instrs) <b>US TREASURY</b> <b>72.</b> <b>0.</b></p> <p>19 Depreciation (attach sch) and depletion ..</p> <p>20 Occupancy ..</p> <p>21 Travel, conferences, and meetings ..</p> <p>22 Printing and publications ..</p> <p>23 Other expenses (attach schedule) ..</p> <p>24 <b>Total operating and administrative expenses.</b> Add lines 13 through 23 <b>13,767.</b> <b>13,695.</b> <b>0.</b></p> <p>25 Contributions, gifts, grants paid <b>34,000.</b> <b>34,000.</b></p> <p>26 <b>Total expenses and disbursements.</b> Add lines 24 and 25 <b>47,767.</b> <b>13,695.</b> <b>34,000.</b></p> <p>27 Subtract line 26 from line 12:<br/>a <b>Excess of revenue over expenses and disbursements</b> <b>20,533.</b><br/>b <b>Net investment income</b> (if negative, enter -0-) <b>7,800.</b><br/>c <b>Adjusted net income</b> (if negative, enter -0-) ..</p> |  | <p><b>(a) Revenue and expenses per books</b></p> <p><b>(b) Net investment income</b></p> <p><b>(c) Adjusted net income</b></p> <p><b>(d) Disbursements for charitable purposes (cash basis only)</b></p>   |  |  |  |

| <b>Part II</b> <b>Balance Sheets</b> |     | Attached schedules and amounts in the description column should be for end-of-year amounts only.<br>(See instructions.) | Beginning of year | End of year    |                       |
|--------------------------------------|-----|---|-------------------|----------------|-----------------------|
|                                      |     |   | (a) Book Value    | (b) Book Value | (c) Fair Market Value |
| <b>ASSETS</b>                        | 1   | Cash – non-interest-bearing   | -3.               | 5.             | 5.                    |
|                                      | 2   | Savings and temporary cash investments  | 36,844.           | 58,354.        | 14,562.               |
|                                      | 3   | Accounts receivable   | 0.                |                |                       |
|                                      |     | Less: allowance for doubtful accounts   | 0.                | 2,900.         | 0.                    |
|                                      | 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) L-10b Stmt  | 317,731.          | 325,881.       | 411,427.              |
|                                      | c   | Investments – corporate bonds (attach schedule) L-10c Stmt  | 53,194.           | 53,194.        | 48,595.               |
| <b>LIABILITIES</b>                   | 11  | Investments – land, buildings, and equipment: basis   |                   |                |                       |
|                                      |     | Less: accumulated depreciation (attach schedule)  |                   |                |                       |
|                                      | 12  | Investments – mortgage loans  |                   |                |                       |
|                                      | 13  | Investments – other (attach schedule) L-13 Stmt   | 128,957.          | 131,786.       | 131,786.              |
|                                      | 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)                    | 539,623.          | 569,220.       | 606,375.              |
| <b>NET FUND ASSETS</b>               | 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)  |                   |                |                       |
|                                      |     | Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.                      |                   |                |                       |
|                                      | 24  | Unrestricted  |                   |                |                       |
|                                      | 25  | Temporarily restricted  |                   |                |                       |
|                                      | 26  | Permanently restricted  |                   |                |                       |
|                                      |     | Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.                                   |                   |                |                       |
|                                      | 27  | Capital stock, trust principal, or current funds  | 776,168.          | 776,168.       |                       |
|                                      | 28  | Paid-in or capital surplus, or land, building, and equipment fund   | 0.                |                |                       |
|                                      | 29  | Retained earnings, accumulated income, endowment, or other funds  | -236,545.         | -206,948.      |                       |
|                                      | 30  | <b>Total net assets or fund balances</b> (see instructions)   | 539,623.          | 569,220.       |                       |
|                                      | 31  | <b>Total liabilities and net assets/fund balances</b> (see instructions)  | 539,623.          | 569,220.       |                       |

**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 | 539,623. |
| 2 | Enter amount from Part I, line 27a   | 2 | 20,533.  |
| 3 | Other increases not included in line 2 (itemize) ▶ <b>BOOK VALUE ADJ SCHWAB STATEMENT - XCEL</b>   | 3 | 12,009.  |
| 4 | Add lines 1, 2, and 3  | 4 | 572,165. |
| 5 | Decreases not included in line 2 (itemize) ▶ See Other Decreases Stmt  | 5 | 2,945.   |
| 6 | Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30  | 6 | 569,220. |

**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<br>P — Purchase<br>D — Donation    | (c) Date acquired<br>(month, day, year)   | (d) Date sold<br>(month, day, year) |
|--|---|---|---|-------------------------------------|
| 1 a 1731 SHS XCEL ENERGY   |   | P   | 10/18/99  | 07/18/12                            |
| b CAPITAL GAIN DISTRIBUTIONS   |   | P   | 12/31/11  | 12/31/12                            |
| c  |   |   |   |                                     |
| d  |   |   |   |                                     |
| e  |   |   |   |                                     |
| (e) Gross sales price  | (f) Depreciation allowed<br>(or allowable)                                      | (g) Cost or other basis<br>plus expense of sale     | (h) Gain or (loss)<br>(e) plus (f) minus (g)  |                                     |
| a 50,010.  |   | 51,532.   | -1,522.   |                                     |
| b 2,242.   |   | 0.  | 2,242.  |                                     |
| c  |   |   |   |                                     |
| d  |   |   |   |                                     |
| e  |   |   |   |                                     |
| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69  |   |   |   |                                     |
| (i) Fair Market Value<br>as of 12/31/69  | (j) Adjusted basis<br>as of 12/31/69  | (k) Excess of column (i)<br>over column (j), if any | (l) Gains (Column (h))<br>gain minus column (k), but not less<br>than -0- or Losses (from column (h)) |                                     |
| a  |   |   | -1,522.   |                                     |
| b  |   |   | 2,242.  |                                     |
| c  |   |   |   |                                     |
| d  |   |   |   |                                     |
| e  |   |   |   |                                     |
| 2 Capital gain net income or (net capital loss)  | If gain, also enter in Part I, line 7<br>If (loss), enter -0- in Part I, line 7 |   | 2   | 720.                                |
| 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):  |   |   | 3   |                                     |
| 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)<br>Base period years<br>Calendar year (or tax year<br>beginning in) | (b)<br>Adjusted qualifying distributions | (c)<br>Net value of<br>noncharitable-use assets | (d)<br>Distribution ratio<br>(column (b) divided by column (c)) |
|---|--|---|---|
| 2011  | 33,627.                                  | 618,730.  | 0.054348  |
| 2010  | 35,450.                                  | 597,690.  | 0.059312  |
| 2009  | 31,500.                                  | 591,031.  | 0.053297  |
| 2008  | 33,000.                                  | 678,559.  | 0.048632  |
| 2007  | 36,240.                                  | 634,063.  | 0.057155  |

|  |   |          |
|--|---|----------|
| 2 Total of line 1, column (d)  | 2 | 0.272744 |
| 3 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 | 3 | 0.054549 |
| 4 Enter the net value of noncharitable-use assets for 2012 from Part X, line 5   | 4 | 652,009. |
| 5 Multiply line 4 by line 3  | 5 | 35,566.  |
| 6 Enter 1% of net investment income (1% of Part I, line 27b)   | 6 | 78.      |
| 7 Add lines 5 and 6  | 7 | 35,644.  |
| 8 Enter qualifying distributions from Part XII, line 4   | 8 | 34,000.  |

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.                    | 1   | 156. |      |
| Date of ruling or determination letter. (attach copy of letter if necessary – see instrs)   |     |      |      |
| 1 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 | 2   | 0.   |      |
| 1 c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)                         |     | 3    | 156. |
| 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)   | 4   | 0.   |      |
| 3 Add lines 1 and 2   | 5   | 156. |      |
| 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)   |     |      |      |
| 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-   |     |      |      |
| 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 penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached                                   | 8   |      |      |
| 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed   | 9   | 156. |      |
| 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  | 10  | 0.   |      |
| 11 Enter the amount of line 10 to be: Credited to 2013 estimated tax ► Refunded   | 11  |      |      |

## Part VII-A Statements Regarding Activities

|  | Yes | No |
|--|-----|----|
| 1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?   | 1 a | x  |
| b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?   | 1 b | x  |
| If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.  |     |    |
| c Did the foundation file Form 1120-POL for this year?   | 1 c | x  |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:   |     |    |
| (1) On the foundation ► \$ (2) On foundation managers ► \$   |     |    |
| e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$  |     |    |
| 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If 'Yes,' attach a detailed description of the activities.   | 2   | x  |
| 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes                           | 3   | x  |
| 4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?  | 4 a | x  |
| b If 'Yes,' has it filed a tax return on Form 990-T for this year?   | 4 b |    |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If 'Yes,' attach the statement required by General Instruction T.   | 5   | x  |
| 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:  |     |    |
| • By language in the governing instrument, or  | 6   | x  |
| • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?   |     |    |
| 7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV  | 7   | x  |
| 8 a Enter the states to which the foundation reports or with which it is registered (see instructions)   |     |    |
| b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation  | 8 b | x  |
| 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If 'Yes,' complete Part XIV | 9   | x  |
| 10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses  | 10  | x  |

**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 . . . . . ► **N/A**  13  X

14 The books are in care of ► **KAREN ENGEL** Telephone no. ► **(715) 425-5736**  
Located at ► **N6059 CTY RD E** **RIVER FALLS WI** ZIP + 4 ► **54022**

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 . . . . . ► **15**  0.

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.

**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? . . . . .  Yes  No

(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . .  Yes  No

(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? . . . . .  Yes  No

(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . . . . .  Yes  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)? . . . . .  Yes  No

(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) . . . . .  Yes  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)? . . . . .  1 b  X

Organizations relying on a current notice regarding disaster assistance check here . . . . . ►

**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? . . . . .  Yes  No

If 'Yes,' list the years ► **20 \_\_ , 20 \_\_ , 20 \_\_ , 20 \_\_**

**b** Are there any years listed in 2a for which the foundation is **not** 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? . . . . .  Yes  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

**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)?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 8870.

**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?**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 |
|---|---|---|---|---------------------------------------|
| KAREN ENGEL<br>N6059 CTY RD E<br>RIVER FALLS WI 54022 | TRUSTEE   | 3.00                                      | 5,000.  | 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  | -----   | -----            | -----   | -----                                 |
| -----   | -----   | -----            | -----   | -----                                 |
| -----   | -----   | -----            | -----   | -----                                 |
| -----   | -----   | -----            | -----   | -----                                 |
| -----   | -----   | -----            | -----   | -----                                 |
| -----   | -----   | -----            | -----   | -----                                 |
| -----   | -----   | -----            | -----   | -----                                 |
| -----   | -----   | -----            | -----   | -----                                 |

Total number of other employees paid over \$50,000 .....

► **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 |
|---|---------------------|------------------|
| <b>NONE</b>   |                     |                  |
|   |                     |                  |
|   |                     |                  |
|   |                     |                  |
|   |                     |                  |

**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  | <hr/> <hr/> |          |
| 2  | <hr/> <hr/> |          |
| 3  | <hr/> <hr/> |          |
| 4  | <hr/> <hr/> |          |

**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   | <hr/> <hr/> |        |
| 2   | <hr/> <hr/> |        |

All other program-related investments. See instructions.

3

---

**Total.** Add lines 1 through 3

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**Form 990-PF (2012)**

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

|   |  |     |          |
|---|--|-----|----------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes    |     |          |
| a | Average monthly fair market value of securities  | 1 a | 597,406. |
| b | Average of monthly cash balances   | 1 b | 64,532.  |
| c | Fair market value of all other assets (see instructions)   | 1 c |          |
| d | <b>Total</b> (add lines 1a, b, and c)  | 1 d | 661,938. |
| e | Reduction claimed for blockage or other factors reported on lines 1a and 1c<br>(attach detailed explanation) | 1 e |          |
| 2 | Acquisition indebtedness applicable to line 1 assets   | 2   |          |
| 3 | Subtract line 2 from line 1d   | 3   | 661,938. |
| 4 | Cash deemed held for charitable activities Enter 1-1/2% of line 3<br>(for greater amount, see instructions)  | 4   | 9,929.   |
| 5 | <b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4  | 5   | 652,009. |
| 6 | <b>Minimum investment return.</b> Enter 5% of line 5   | 6   | 32,600.  |

**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.)

|    |  |    |         |
|----|--|----|---------|
| 1  | Minimum investment return from Part X, line 6  | 1  | 32,600. |
| 2a | Tax on investment income for 2012 from Part VI, line 5   | 2a | 156.    |
| b  | Income tax for 2012. (This does not include the tax from Part VI)  | 2b |         |
| c  | Add lines 2a and 2b  | 2c | 156.    |
| 3  | Distributable amount before adjustments. Subtract line 2c from line 1                                    | 3  | 32,444. |
| 4  | Recoveries of amounts treated as qualifying distributions  | 4  |         |
| 5  | Add lines 3 and 4  | 5  | 32,444. |
| 6  | Deduction from distributable amount (see instructions)   | 6  |         |
| 7  | <b>Distributable amount</b> as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7  | 32,444. |

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

|   |  |     |         |
|---|--|-----|---------|
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes:  |     |         |
| a | Expenses, contributions, gifts, etc – total from Part I, column (d), line 26   | 1 a | 34,000. |
| b | Program-related investments – total from Part IX-B   | 1 b |         |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes   | 2   |         |
| 3 | Amounts set aside for specific charitable projects that satisfy the:   |     |         |
| a | Suitability test (prior IRS approval required)   | 3 a |         |
| b | Cash distribution test (attach the required schedule)  | 3 b |         |
| 4 | <b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4                                    | 4   | 34,000. |
| 5 | 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) | 5   | 0.      |
| 6 | <b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4  | 6   | 34,000. |

**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)<br>Corpus | (b)<br>Years prior to 2011 | (c)<br>2011 | (d)<br>2012 |
|---|---------------|----------------------------|-------------|-------------|
| 1 Distributable amount for 2012 from Part XI, line 7  |               |                            |             | 32,444.     |
| 2 Undistributed income, if any, as of the end of 2012.  |               |                            | 0.          |             |
| a Enter amount for 2011 only  |               |                            |             |             |
| b Total for prior years: 20 ___, 20 ___, 20 ___   |               |                            |             |             |
| 3 Excess distributions carryover, if any, to 2012.  |               |                            |             |             |
| a From 2007 ...   | 5,557.        |                            |             |             |
| b From 2008 ..  | 0.            |                            |             |             |
| c From 2009 ..  | 1,948.        |                            |             |             |
| d From 2010 ..  | 5,665.        |                            |             |             |
| e From 2011 ..  | 0.            |                            |             |             |
| f Total of lines 3a through e ..  | 13,170.       |                            |             |             |
| 4 Qualifying distributions for 2012 from Part XII, line 4 ► \$ 34,000.  |               |                            | 0.          |             |
| a Applied to 2011, but not more than line 2a  |               |                            |             |             |
| b Applied to undistributed income of prior years (Election required – see instructions)   |               | 0.                         |             |             |
| c Treated as distributions out of corpus (Election required – see instructions)   | 0.            |                            |             |             |
| d Applied to 2012 distributable amount  |               |                            |             | 32,444.     |
| e Remaining amount distributed out of corpus ..   | 1,556.        |                            |             |             |
| 5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a).)   |               | 0.                         |             | 0.          |
| 6 Enter the net total of each column as indicated below:  |               |                            |             |             |
| a Corpus. Add lines 3f, 4c, and 4e Subtract line 5  | 14,726.       |                            |             |             |
| 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   |               |                            | 0.          |             |
| f Undistributed income for 2012. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2013 ..  |               |                            |             | 0.          |
| 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) ..                                  |               |                            |             |             |
| 8 Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions)   | 5,557.        |                            |             |             |
| 9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a ..  | 9,169.        |                            |             |             |
| 10 Analysis of line 9:  |               |                            |             |             |
| a Excess from 2008  | 0.            |                            |             |             |
| b Excess from 2009 ..   | 1,948.        |                            |             |             |
| c Excess from 2010 ..   | 5,665.        |                            |             |             |
| d Excess from 2011 ..   | 0.            |                            |             |             |
| e Excess from 2012 ..   | 1,556.        |                            |             |             |

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Form 990-PF (2012)

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

N/A

**Part XVI** **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:

**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   | 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         |
|---|---|--------------------------------|----------------------------------|----------------|
| Name and address (home or business)                       |   |                                |                                  |                |
| <i>a Paid during the year</i>                             |   |                                |                                  |                |
| RIVER FALLS HIGH SCHOOL<br>802 E DIVISION ST              |   |                                |                                  |                |
| RIVER FALLS WI 54022                                      | NONE  | CHARITY                        | SCHOLARSHIPS                     | 1,000.         |
| UW RIVER FALLS<br>410 S 3RD STREET                        |   |                                |                                  |                |
| RIVER FALLS WI 54022                                      | NONE  | CHARITY                        | SCHOLARSHIPS                     | 2,500.         |
| ST BRIDGETS SECOND TUESDAY<br>PO BOX 86                   |   |                                |                                  |                |
| RIVER FALLS WI 54022                                      | NONE  | CHARITY                        | SCHOOL SUPPLY PROGRAM            | 2,000.         |
| OUR NEIGHBORS PLACE<br>PO BOX 274                         |   |                                |                                  |                |
| RIVER FALLS WI 54022                                      | NONE  | CHARITY                        | ASSIST FAMILIES IN NEED          | 2,000.         |
| SALVATION ARMY<br>203 CHURCH HILL RD                      |   |                                |                                  |                |
| SOMERSET WI 55025   | NONE  | CHARITY                        | ASSIST FAMILIES IN NEED          | 5,000.         |
| ADORAY HOSPICE<br>990 HILLCREST ST                        |   |                                |                                  |                |
| BALDWIN WI 54002  | NONE  | CHARITY                        | ASSIST FAMILIES IN NEED          | 2,000.         |
| RIVER FALLS FOOD PANTRY<br>222 N MAIN STREET STE C        |   |                                |                                  |                |
| RIVER FALLS WI 54022                                      | NONE  | CHARITY                        | ASSIST FAMILIES IN NEED          | 3,000.         |
| RIVER FALLS TUTORING PROGRAM<br>802 E DIVISION STREET     |   |                                |                                  |                |
| RIVER FALLS WI 54022                                      | NONE  | CHARITY                        | TUTORING                         | 2,000.         |
| RIVER FALLS HOSPITAL FOUNDATION<br>1629 E DIVISION STREET |   |                                |                                  |                |
| RIVER FALLS WI 54022                                      | NONE  | CHARITY                        | FREE CLINIC FOR FAMILIES IN NEED | 2,000.         |
| See Line 3a statement                                     |   |                                |                                  |                |
|   |   |                                |                                  | 12,500.        |
| <b>Total</b>  |   |                                | ► 3a                             | <b>34,000.</b> |
| <i>b Approved for future payment</i>                      |   |                                |                                  |                |
| <b>Total</b>  |   |                                | ► 3b                             |                |

## Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

|  | Unrelated business income |               | Excluded by section 512, 513, or 514 |               | (e)<br>Related or exempt<br>function income<br>(See instructions.) |
|--|---------------------------|---------------|--------------------------------------|---------------|--|
|  | (a)<br>Business<br>code   | (b)<br>Amount | (c)<br>Exclu-<br>sion<br>code        | (d)<br>Amount |  |
| 1 Program service revenue:                                     |                           |               |                                      |               |  |
| a  |                           |               |                                      |               |  |
| b  |                           |               |                                      |               |  |
| c  |                           |               |                                      |               |  |
| d  |                           |               |                                      |               |  |
| e  |                           |               |                                      |               |  |
| f  |                           |               |                                      |               |  |
| g Fees and contracts from government agencies                  |                           |               |                                      |               |  |
| 2 Membership dues and assessments                              |                           |               |                                      |               |  |
| 3 Interest on savings and temporary cash investments . . .     |                           |               | 14                                   | 17.           |  |
| 4 Dividends and interest from securities                       |                           |               | 14                                   | 20,758.       |  |
| 5 Net rental income or (loss) from real estate:                |                           |               |                                      |               |  |
| a Debt-financed property . . . .                               |                           |               |                                      |               |  |
| b Not debt-financed property . . . .                           |                           |               |                                      |               |  |
| 6 Net rental income or (loss) from personal property . . . . . |                           |               |                                      |               |  |
| 7 Other investment income . . .                                |                           |               |                                      |               |  |
| 8 Gain or (loss) from sales of assets other than inventory     |                           |               | 14                                   | 720.          |  |
| 9 Net income or (loss) from special events . . .               |                           |               |                                      |               |  |
| 10 Gross profit or (loss) from sales of inventory              |                           |               |                                      |               |  |
| 11 Other revenue:  |                           |               |                                      |               |  |
| a  |                           |               |                                      |               |  |
| b  |                           |               |                                      |               |  |
| c  |                           |               |                                      |               |  |
| d  |                           |               |                                      |               |  |
| e  |                           |               |                                      |               |  |
| 12 Subtotal. Add columns (b), (d), and (e)                     |                           |               |                                      | 21,495.       |  |
| 13 Total. Add line 12, columns (b), (d), and (e) . . . . .     |                           |               |                                      | 13            | 21,495.  |

(See worksheet in line 13 instructions to verify calculations.)

**Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes**

| Line No.<br>▼ | Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions ) |
|---------------|--|
| 1             | N/A  |
|               |  |
|               |  |
|               |  |
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**Part XVII. Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

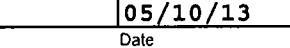
**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

Yes  No

**b** If 'Yes,' complete the following schedule.

| <b>(a) Name of organization</b> | <b>(b) Type of organization</b> | <b>(c) Description of relationship</b> |
|---------------------------------|---------------------------------|--|
|                                 |                                 |  |
|                                 |                                 |  |
|                                 |                                 |  |
|                                 |                                 |  |

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 taxpayer) is based on all information of which preparer has any knowledge.

|   |   |  |   |          |  |   |     |                          |    |
|---|---|--|---|----------|--|---|-----|--------------------------|----|
| Sign Here   |  |  | 05/10/13  | ►        | TRUSTEE  | May the IRS discuss this return with the preparer shown below (see instructions)? |     |                          |    |
|   | Signature of officer or trustee   |  | Date  | Title    |  | <input type="checkbox"/>  | Yes | <input type="checkbox"/> | No |
| <b>Paid</b><br><b>Preparer</b><br><b>Use Only</b> | Print/Type preparer's name  |  | Preparer's signature  | Date     | Check <input checked="" type="checkbox"/> if self-employed | PTIN  |     |                          |    |
|   | CONSTANCE L KELLY   |  |  | 05/14/13 | P00014445  |   |     |                          |    |
|   | Firm's name ► St. Croix Tax, LLC  |  | Firm's EIN ► 46-0848224   |          |  |   |     |                          |    |
|   | Firm's address ► 710 N. Main Street, Suite 103<br>River Falls                       |  | Phone no (715) 426-2107   |          |  |   |     |                          |    |

**BAA**

**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)

Department of the Treasury  
Internal Revenue Service

OMB No. 1545-0047

## Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF

**2012**

Name of the organization

**VIOLA E LUNDEBERG TRUST**

Employer identification number

**39-6503917**

Organization type (check one).

Filers of:

Form 990 or 990-EZ

Section:

501(c)( \_\_\_\_ ) (enter number) organization  
 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation  
 527 political organization

Form 990-PF

501(c)(3) exempt private foundation  
 4947(a)(1) nonexempt charitable trust treated as a private foundation  
 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor (Complete Parts I and II.)

**Special Rules**

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc, purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc, purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc, contributions of \$5,000 or more during the year

► \$ \_\_\_\_\_

**Caution:** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it **must** answer 'No' on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2, of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

**BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.**

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization

VIOLA E LUNDEBERG TRUST

Employer identification number

39-6503917

**Part I** Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a)<br>Number | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions | (d)<br>Type of contribution  |
|---------------|--|----------------------------|--|
| 1             | VIOLA E LUNDEBERG TRUST II<br>KAREN ENGEL TRUSTEE, N6059 COUNTY RD E<br>RIVER FALLS WI 54022 | \$ 46,805.                 | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/> |
|               |  |                            | (Complete Part II if there is a noncash contribution.)   |
| (a)<br>Number | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions | (d)<br>Type of contribution  |
|               |  | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/>            |
|               |  |                            | (Complete Part II if there is a noncash contribution.)   |
| (a)<br>Number | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions | (d)<br>Type of contribution  |
|               |  | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/>            |
|               |  |                            | (Complete Part II if there is a noncash contribution.)   |
| (a)<br>Number | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions | (d)<br>Type of contribution  |
|               |  | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/>            |
|               |  |                            | (Complete Part II if there is a noncash contribution.)   |
| (a)<br>Number | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions | (d)<br>Type of contribution  |
|               |  | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/>            |
|               |  |                            | (Complete Part II if there is a noncash contribution.)   |
| (a)<br>Number | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions | (d)<br>Type of contribution  |
|               |  | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/>            |
|               |  |                            | (Complete Part II if there is a noncash contribution.)   |

|  |   |   |                  |
|--|---|---|------------------|
| Name<br><b>VIOLA E LUNDEBERG TRUST</b> | Employer Identification Number<br><b>39-6503917</b> |   |                  |
| <b>Asset Information:</b>              |   |   |                  |
| Description of Property:               | <b>1731 SHS XCEL ENERGY</b>                         |   |                  |
| Date Acquired:                         | <u>10/18/99</u>                                     | How Acquired:                                       | <u>Purchased</u> |
| Date Sold:                             | <u>07/18/12</u>                                     | Name of Buyer:                                      |                  |
| Sales Price:                           | <u>50,010.</u>                                      | Cost or other basis (do not reduce by depreciation) | <u>51,532.</u>   |
| Sales Expense:                         |   | Valuation Method:                                   | <u>Cost</u>      |
| Total Gain (Loss):                     | <u>-1,522.</u>                                      | Accumulation Depreciation:                          |                  |
| Description of Property:               | <b>CAPITAL GAIN DISTRIBUTIONS</b>                   |   |                  |
| Date Acquired:                         | <u>12/31/12</u>                                     | How Acquired:                                       | <u>Purchased</u> |
| Date Sold:                             | <u>12/31/12</u>                                     | Name of Buyer:                                      |                  |
| Sales Price:                           | <u>2,242.</u>                                       | Cost or other basis (do not reduce by depreciation) | <u>0.</u>        |
| Sales Expense:                         |   | Valuation Method:                                   |                  |
| Total Gain (Loss):                     | <u>2,242.</u>                                       | Accumulation Depreciation:                          |                  |
| Description of Property:               |   |   |                  |
| Date Acquired:                         |   | How Acquired:                                       |                  |
| Date Sold:                             |   | Name of Buyer:                                      |                  |
| Sales Price:                           |   | Cost or other basis (do not reduce by depreciation) |                  |
| Sales Expense:                         |   | Valuation Method:                                   |                  |
| Total Gain (Loss):                     |   | Accumulation Depreciation:                          |                  |
| Description of Property:               |   |   |                  |
| Date Acquired:                         |   | How Acquired:                                       |                  |
| Date Sold:                             |   | Name of Buyer:                                      |                  |
| Sales Price:                           |   | Cost or other basis (do not reduce by depreciation) |                  |
| Sales Expense:                         |   | Valuation Method:                                   |                  |
| Total Gain (Loss):                     |   | Accumulation Depreciation:                          |                  |
| Description of Property:               |   |   |                  |
| Date Acquired:                         |   | How Acquired:                                       |                  |
| Date Sold:                             |   | Name of Buyer:                                      |                  |
| Sales Price:                           |   | Cost or other basis (do not reduce by depreciation) |                  |
| Sales Expense:                         |   | Valuation Method:                                   |                  |
| Total Gain (Loss):                     |   | Accumulation Depreciation:                          |                  |
| Description of Property:               |   |   |                  |
| Date Acquired:                         |   | How Acquired:                                       |                  |
| Date Sold:                             |   | Name of Buyer:                                      |                  |
| Sales Price:                           |   | Cost or other basis (do not reduce by depreciation) |                  |
| Sales Expense:                         |   | Valuation Method:                                   |                  |
| Total Gain (Loss):                     |   | Accumulation Depreciation:                          |                  |
| Description of Property:               |   |   |                  |
| Date Acquired:                         |   | How Acquired:                                       |                  |
| Date Sold:                             |   | Name of Buyer:                                      |                  |
| Sales Price:                           |   | Cost or other basis (do not reduce by depreciation) |                  |
| Sales Expense:                         |   | Valuation Method:                                   |                  |
| Total Gain (Loss):                     |   | Accumulation Depreciation:                          |                  |
| Description of Property:               |   |   |                  |
| Date Acquired:                         |   | How Acquired:                                       |                  |
| Date Sold:                             |   | Name of Buyer:                                      |                  |
| Sales Price:                           |   | Cost or other basis (do not reduce by depreciation) |                  |
| Sales Expense:                         |   | Valuation Method:                                   |                  |
| Total Gain (Loss):                     |   | Accumulation Depreciation:                          |                  |

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

**Other Decreases Stmt**

|  |                      |
|--|----------------------|
| <b>ADJUSTMENT FOR ACCTS RECEIVABLE</b> | <b>2,900.</b>        |
| <b>MISC ADJ</b>                        | <b>45.</b>           |
| <b>Total</b>                           | <b><u>2,945.</u></b> |

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

**Line 3a statement**

| Recipient<br>Name and address<br>(home or business)                  | If recipient is<br>an individual,<br>show any<br>relationship to<br>any foundation<br>manager or<br>substantial<br>contributor | Found-<br>ation<br>status<br>of re-<br>cipient | Purpose of<br>grant or contribution | Person or<br>Business<br>Checkbox<br>Amount               |
|--|--|--|-------------------------------------|---|
| <b>a Paid during the year</b>  |  |  |                                     |   |
| <b>OUR NEIGHBORS PLACE</b><br><b>PO BOX 274</b>                      |  |  |                                     | Person or<br>Business <input checked="" type="checkbox"/> |
| <b>RIVER FALLS WI 54022</b>  | <b>NONE</b>  | <b>CHARITY</b>                                 | <b>ASSIST FAMILIES IN NEED</b>      | <b>3,000.</b>   |
| <b>TURNINGPOINT</b><br><b>445 WEST JOHNSON ST</b>                    |  |  | <b>SHELTER FOR</b>                  | Person or<br>Business <input checked="" type="checkbox"/> |
| <b>RIVER FALLS WI 54022</b>  | <b>NONE</b>  | <b>CHARITY</b>                                 | <b>ABUSED WOMEN</b>                 | <b>1,500.</b>   |
| <b>ST MARYS CHURCH FRIENDSHIP FUND</b><br><b>W10137 570TH AVENUE</b> |  |  | <b>EMERGENCY ASSISTANCE</b>         | Person or<br>Business <input checked="" type="checkbox"/> |
| <b>RIVER FALLS WI 54022</b>  | <b>NONE</b>  | <b>CHARITY</b>                                 | <b>FOR FAMILIES IN NEED</b>         | <b>3,000.</b>   |
| <b>ASSISTANCE AND RESOURCE CENTER</b><br><b>PO BOX 223</b>           |  |  | <b>EMERGENCY ASSISTANCE</b>         | Person or<br>Business <input checked="" type="checkbox"/> |
| <b>RIVER FALLS WI 54022</b>  | <b>NONE</b>  | <b>CHARITY</b>                                 | <b>FOR FAMILIES IN NEED</b>         | <b>2,000.</b>   |
| <b>HAVE A HEART</b><br><b>W10356 STATE RD 29</b>                     |  |  |                                     | Person or<br>Business <input checked="" type="checkbox"/> |
| <b>RIVER FALLS WI 54022</b>  | <b>NONE</b>  | <b>CHARITY</b>                                 | <b>RESPITE CARE</b>                 | <b>3,000.</b>   |
| <b>Total</b>   |  |  |                                     | <b><u>12,500.</u></b>                                     |

Form 990-PF, Page 1, Part I

**Line 16b - Accounting Fees**

| Name of<br>Provider          | Type of Service<br>Provided | Amount<br>Paid<br>Per Books | Net<br>Investment<br>Income | Adjusted<br>Net<br>Income | Disbursements<br>for Charitable<br>Purposes |
|------------------------------|-----------------------------|-----------------------------|-----------------------------|---------------------------|---|
| <b>BAUMAN ASSOCIATES LTD</b> | <b>ACCOUNTING</b>           | <b>1,295.</b>               | <b>1,295.</b>               |                           | <b>0.</b>                                   |
| <b>Total</b>                 |                             | <b><u>1,295.</u></b>        | <b><u>1,295.</u></b>        |                           | <b><u>0.</u></b>                            |

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 |
|----------------------|--------------------------|-----------------------|-----------------------|---------------------|---------------------------------------|
| SUSAN SWENSON        | ADVISOR                  | 2,500.                | 2,500.                |                     |                                       |
| JOHN STEVEN O'ROURKE | ADVISOR                  | 2,400.                | 2,400.                |                     |                                       |
| JEFFREY DUSEK        | ADVISOR                  | 2,500.                | 2,500.                |                     |                                       |
| Total                |                          | <u>7,400.</u>         | <u>7,400.</u>         |                     |                                       |

Form 990-PF, Page 2, Part II, Line 10b  
**L-10b Stmt**

| Line 10b - Investments - Corporate Stock: | End of Year     |                   |
|---|-----------------|-------------------|
|   | Book Value      | Fair Market Value |
| 350 ALLETE INC NEW                        | 12,962.         | 14,343.           |
| 1200 AMER ELETRIC POWER CO INC            | 30,400.         | 51,216.           |
| 1100 CSX CORP                             | 21,789.         | 21,703.           |
| 1500 CENTERPOINT ENERGY                   | 21,818.         | 28,875.           |
| 100 CHEVRON CORPORATION                   | 10,920.         | 10,814.           |
| 550 CONSOLIDATED EDISON INC               | 25,027.         | 30,457.           |
| 600 EXELON CORPORATION                    | 27,973.         | 17,844.           |
| 1000 MGE ENERGY                           | 30,193.         | 50,950.           |
| 900 PIEDMONT NATURAL GAS CO               | 24,511.         | 28,179.           |
| 200 WALMART STORES INC                    | 11,784.         | 13,646.           |
| 2676 XCEL ENERGY INC                      | 49,776.         | 71,476.           |
| COHEN AND STEERS REALTY                   | 32,346.         | 37,754.           |
| HENNESSY GAS UTILITY                      | 26,382.         | 34,170.           |
| Total                                     | <u>325,881.</u> | <u>411,427.</u>   |

Form 990-PF, Page 2, Part II, Line 10c  
**L-10c Stmt**

| Line 10c - Investments - Corporate Bonds: | End of Year    |                   |
|---|----------------|-------------------|
|   | Book Value     | Fair Market Value |
| WELLS FARGO ADVANTAGE                     | 53,194.        | 48,595.           |
| Total                                     | <u>53,194.</u> | <u>48,595.</u>    |

Form 990-PF, Page 2, Part II, Line 13  
**L-13 Stmt**

| Line 13 - Investments - Other:     | End of Year     |                   |
|------------------------------------|-----------------|-------------------|
|                                    | Book Value      | Fair Market Value |
| WESTCONSIN CERTIFICATES OF DEPOSIT | 131,786.        | 131,786.          |
| Total                              | <u>131,786.</u> | <u>131,786.</u>   |