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<b>Part II Balance Sheets</b>		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
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .		17,217	7,001	7,001
	<b>2</b> Savings and temporary cash investments . . . . .		0	0	0
	<b>3</b> Accounts receivable ▶ . . . . .				
	Less: allowance for doubtful accounts ▶ . . . . .				
	<b>4</b> Pledges receivable ▶ . . . . .				
	Less: allowance for doubtful accounts ▶ . . . . .				
	<b>5</b> Grants receivable . . . . .				
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .				
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ . . . . .				
	Less: allowance for doubtful accounts ▶ . . . . .				
	<b>8</b> Inventories for sale or use . . . . .				
	<b>9</b> Prepaid expenses and deferred charges . . . . .				
	<b>10a</b> Investments—U.S. and state government obligations (attach schedule) . . . . .				
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .				
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .				
	<b>11</b> Investments—land, buildings, and equipment: basis ▶ . . . . .				
<b>Liabilities</b>	Less: accumulated depreciation (attach schedule) ▶ . . . . .				
	<b>12</b> Investments—mortgage loans . . . . .				
	<b>13</b> Investments—other (attach schedule) . . . . .				
	<b>14</b> Land, buildings, and equipment: basis ▶ . . . . .				
	Less: accumulated depreciation (attach schedule) ▶ . . . . .				
	<b>15</b> Other assets (describe ▶ . . . . . ) . . . . .				
	<b>16</b> <b>Total assets</b> (to be completed by all filers—see the instructions. Also, see page 1, item I) . . . . .		17,217	7,001	7,001
	<b>17</b> Accounts payable and accrued expenses . . . . .				
	<b>18</b> Grants payable . . . . .				
	<b>19</b> Deferred revenue . . . . .				
<b>Net Assets or Fund Balances</b>	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons . . . . .				
	<b>21</b> Mortgages and other notes payable (attach schedule) . . . . .				
	<b>22</b> Other liabilities (describe ▶ . . . . . ) . . . . .				
	<b>23</b> <b>Total liabilities</b> (add lines 17 through 22) . . . . .		0	0	
	<b>Foundations that follow SFAS 117, check here</b> . . . ▶ <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>				
	<b>24</b> Unrestricted . . . . .				
	<b>25</b> Temporarily restricted . . . . .				
	<b>26</b> Permanently restricted . . . . .				
	<b>Foundations that do not follow SFAS 117, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 27 through 31.</b>				
	<b>27</b> Capital stock, trust principal, or current funds . . . . .				
	<b>28</b> Paid-in or capital surplus, or land, bldg, and equipment fund . . . . .				
	<b>29</b> Retained earnings, accumulated income, endowment, or other funds . . . . .				
	<b>30</b> <b>Total net assets or fund balances</b> (see instructions) . . . . .		17,217	7,001	
	<b>31</b> <b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .				

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b> 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) . . . . .	<b>1</b>	17,217
<b>2</b> Enter amount from Part I, line 27a . . . . .	<b>2</b>	(10,216)
<b>3</b> Other increases not included in line 2 (itemize) ▶ . . . . .	<b>3</b>	
<b>4</b> Add lines 1, 2, and 3 . . . . .	<b>4</b>	7,001
<b>5</b> Decreases not included in line 2 (itemize) ▶ . . . . .	<b>5</b>	
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	<b>6</b>	7,001

**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 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a NONE</b>				
<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>				
<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				(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		
<b>a</b> N/A				
<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>
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8 . . . . .				<b>3</b> N/A

**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.

(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 (col. (b) divided by col. (c))
2011	90,881	12,634	7.193
2010	105,910	20,266	5.226
2009	102,276	17,813	5.742
2008	113,784	15,278	7.448
2007	118,322	15,269	7.749
<b>2</b> Total of line 1, column (d) . . . . .			<b>2</b> 33.36
<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> 6.672
<b>4</b> Enter the net value of noncharitable-use assets for 2012 from Part X, line 5 . . . . .			<b>4</b> 10,540
<b>5</b> Multiply line 4 by line 3 . . . . .			<b>5</b> 70,323
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b) . . . . .			<b>6</b> 0
<b>7</b> Add lines 5 and 6 . . . . .			<b>7</b> 70,323
<b>8</b> Enter qualifying distributions from Part XII, line 4 . . . . . 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.			<b>8</b> 90,225

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

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

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> 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?		<input checked="" type="checkbox"/>
<b>1b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? <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>		<input checked="" type="checkbox"/>
<b>1c</b> Did the foundation file <b>Form 1120-POL</b> for this year?		<input checked="" type="checkbox"/>
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: <b>(1)</b> On the foundation. ▶ \$ <u>0</u> <b>(2)</b> On foundation managers. ▶ \$ <u>0</u>		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ <u>0</u>		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>		<input checked="" type="checkbox"/>
<b>3</b> 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? <i>If "Yes," attach a conformed copy of the changes.</i>		<input checked="" type="checkbox"/>
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year?		<input checked="" type="checkbox"/>
<b>4b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?		<input checked="" type="checkbox"/>
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>		<input checked="" type="checkbox"/>
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	<input checked="" type="checkbox"/>	
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV</i>	<input checked="" type="checkbox"/>	
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ <b>IOWA</b>		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? <i>If "No," attach explanation</i>	<input checked="" type="checkbox"/>	
<b>9</b> 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)? <i>If "Yes," complete Part XIV</i>		<input checked="" type="checkbox"/>
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	<input checked="" type="checkbox"/>	

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

<b>11</b>	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)	<b>11</b>		<input checked="" type="checkbox"/>
<b>12</b>	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)	<b>12</b>		<input checked="" type="checkbox"/>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	<b>13</b>	<input checked="" type="checkbox"/>	
Website address ► <u>jberan@gmrc.com</u>				
<b>14</b>	The books are in care of ► <u>JOANN M. BERAN, ACCOUNTANT</u>	Telephone no. ►	<u>641-269-8000</u>	
	Located at ► <u>GRINNELL MUTUAL REINSURANCE CO., GRINNELL IA</u>	ZIP+4 ►	<u>50112-0790</u>	
<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here. . . . .	<input type="checkbox"/>		
	and enter the amount of tax-exempt interest received or accrued during the year . . . . .	<b>15</b>		
<b>16</b>	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? . . . . .	<b>16</b>	Yes	No
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country ►			<input checked="" type="checkbox"/>

**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
<b>1a</b> 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>b</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)? . . . . .	<b>1b</b>	<input checked="" type="checkbox"/>
Organizations relying on a current notice regarding disaster assistance check here . . . . . <input type="checkbox"/>		
<b>c</b> 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? . . . . .	<b>1c</b>	<input checked="" type="checkbox"/>
<b>2</b> 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)):		
<b>a</b> 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>b</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.) . . . . .	<b>2b</b>	
<b>c</b> 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____		
<b>3a</b> 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>b</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.) . . . . .	<b>3b</b>	<input checked="" type="checkbox"/>
<b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>	<input checked="" type="checkbox"/>
<b>b</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?	<b>4b</b>	<input checked="" type="checkbox"/>

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

<b>5a</b> 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))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(2)	Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
<b>b</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)?				<b>5b</b>
Organizations relying on a current notice regarding disaster assistance check here				<input checked="" type="checkbox"/>
<b>c</b> 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?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
If "Yes," attach the statement required by Regulations section 53.4945–5(d).				
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?				<b>6b</b>
If "Yes" to 6b, file Form 8870.				<input checked="" type="checkbox"/>
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?				<b>7b</b>
				<input checked="" type="checkbox"/>

**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
SEE ATTACHMENTS				

**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 ▶

**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 . . . . . ▶

**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

<b>1</b> NONE	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**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

<b>1</b> NONE	
<b>2</b>	
All other program-related investments. See instructions	
<b>3</b>	

Total. Add lines 1 through 3 . . . . . ▶



**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>1a</b>	0
<b>b</b>	Average of monthly cash balances . . . . .	<b>1b</b>	10,701
<b>c</b>	Fair market value of all other assets (see instructions) . . . . .	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c) . . . . .	<b>1d</b>	10,701
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) . . . . .	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets . . . . .	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d . . . . .	<b>3</b>	10,701
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see instructions) . . . . .	<b>4</b>	161
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	10,540
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5 . . . . .	<b>6</b>	527

**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>	527
<b>2a</b>	Tax on investment income for 2012 from Part VI, line 5 . . . . .	<b>2a</b>	0
<b>b</b>	Income tax for 2012. (This does not include the tax from Part VI.) . . . . .	<b>2b</b>	0
<b>c</b>	Add lines 2a and 2b . . . . .	<b>2c</b>	0
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1 . . . . .	<b>3</b>	527
<b>4</b>	Recoveries of amounts treated as qualifying distributions . . . . .	<b>4</b>	0
<b>5</b>	Add lines 3 and 4 . . . . .	<b>5</b>	527
<b>6</b>	Deduction from distributable amount (see instructions) . . . . .	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 . . . . .	<b>7</b>	527

**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>1a</b>	90,225
<b>b</b>	Program-related investments—total from Part IX-B . . . . .	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes . . . . .	<b>2</b>	0
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required) . . . . .	<b>3a</b>	0
<b>b</b>	Cash distribution test (attach the required schedule) . . . . .	<b>3b</b>	0
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	90,225
<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</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4 . . . . .	<b>6</b>	90,225

**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
<b>1</b> Distributable amount for 2012 from Part XI, line 7 . . . . .				<b>527</b>
<b>2</b> Undistributed income, if any, as of the end of 2012:				
<b>a</b> Enter amount for 2011 only . . . . .			<b>0</b>	
<b>b</b> Total for prior years: 20 __, 20 __, 20 __ . . . . .		<b>0</b>		
<b>3</b> Excess distributions carryover, if any, to 2012:				
<b>a</b> From 2007 . . . . .	<b>117,573</b>			
<b>b</b> From 2008 . . . . .	<b>113,026</b>			
<b>c</b> From 2009 . . . . .	<b>101,385</b>			
<b>d</b> From 2010 . . . . .	<b>104,898</b>			
<b>e</b> From 2011 . . . . .	<b>90,249</b>			
<b>f</b> <b>Total</b> of lines 3a through e . . . . .	<b>527,131</b>			
<b>4</b> Qualifying distributions for 2012 from Part XII, line 4: ► \$ <b>90,225</b>				
<b>a</b> Applied to 2011, but not more than line 2a . . . . .			<b>0</b>	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions) . . . . .		<b>0</b>		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions) . . . . .	<b>0</b>			
<b>d</b> Applied to 2012 distributable amount . . . . .				<b>527</b>
<b>e</b> Remaining amount distributed out of corpus . . . . .	<b>89,698</b>			
<b>5</b> Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a).)	<b>0</b>			<b>0</b>
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 . . . . .	<b>616,829</b>			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b . . . . .		<b>0</b>		
<b>c</b> 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 . . . . .		<b>0</b>		
<b>d</b> Subtract line 6c from line 6b. Taxable amount—see instructions . . . . .		<b>0</b>		
<b>e</b> Undistributed income for 2011. Subtract line 4a from line 2a. Taxable amount—see instructions . . . . .			<b>0</b>	
<b>f</b> Undistributed income for 2012. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2013 . . . . .				<b>0</b>
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) . . . . .	<b>0</b>			
<b>8</b> Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions) . . . . .	<b>117,573</b>			
<b>9</b> <b>Excess distributions carryover to 2013.</b> Subtract lines 7 and 8 from line 6a . . . . .	<b>499,256</b>			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2008 . . . . .	<b>113,026</b>			
<b>b</b> Excess from 2009 . . . . .	<b>101,385</b>			
<b>c</b> Excess from 2010 . . . . .	<b>104,898</b>			
<b>d</b> Excess from 2011 . . . . .	<b>90,249</b>			
<b>e</b> Excess from 2012 . . . . .	<b>89,698</b>			

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

**1a** 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	Prior 3 years			(e) Total
	(a) 2012	(b) 2011	(c) 2010	(d) 2009	
<b>2a</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:

BARB BAKER 4215 HIGHWAY 146, GRINNELL IA 50112 641-269-8000

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

**SEE ATTACHMENTS**

**c** Any submission deadlines:

NONE

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

NONE

**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
<b>a</b> <i>Paid during the year</i>  SEE ATTACHEMENTS				90,225
<b>Total</b>			<b>3a</b>	90,225
<b>b</b> <i>Approved for future payment</i>				
<b>Total</b>			<b>3b</b>	0

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

Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) 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	9	
4	Dividends and interest from securities . . . . .					
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					
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) . . . . .				9	0
13	Total. Add line 12, columns (b), (d), and (e) . . . . .				13	9

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

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

[illegible]

**Part XVII** Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		Yes	No
<b>1</b>	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		
<b>a</b>	Transfers from the reporting foundation to a noncharitable exempt organization of:		
	(1) Cash . . . . .	<b>1a(1)</b>	✓
	(2) Other assets . . . . .	<b>1a(2)</b>	✓
<b>b</b>	Other transactions:		
	(1) Sales of assets to a noncharitable exempt organization . . . . .	<b>1b(1)</b>	✓
	(2) Purchases of assets from a noncharitable exempt organization . . . . .	<b>1b(2)</b>	✓
	(3) Rental of facilities, equipment, or other assets . . . . .	<b>1b(3)</b>	✓
	(4) Reimbursement arrangements . . . . .	<b>1b(4)</b>	✓
	(5) Loans or loan guarantees . . . . .	<b>1b(5)</b>	✓
	(6) Performance of services or membership or fundraising solicitations . . . . .	<b>1b(6)</b>	✓
<b>c</b>	Sharing of facilities, equipment, mailing lists, other assets, or paid employees . . . . .	<b>1c</b>	✓
<b>d</b>	If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.		

[illegible]

**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.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

**Sign  
Here**

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.

Hunter A. Rachet  
Signature of officer or trustee

3-28-13 ▶  
Date Title

Treasure

May the IRS discuss this return with the preparer shown below (see instructions)? ☐ Yes ☐ No

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶			Firm's EIN ▶	
	Firm's address ▶			Phone no	

**Schedule B**(Form 990, 990-EZ,  
or 990-PF)Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**

OMB No 1545-0047

**2012**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

Name of the organization

Employer identification number

GRINNELL MUTUAL GROUP FOUNDATION

42-1308146

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☐ 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 foundationCheck 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 $\frac{1}{3}$ % 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).

Name of organization <b>GRINNELL MUTUAL GROUP FOUNDATION</b>	Employer identification number <b>42-1308146</b>
---	---

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Grinnell Mutual Reinsurance Company 4215 Highway 146, PO Box 790 Grinnell IA 50112-0790	\$ 80,000.00	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )



Name of organization <b>GRINNELL MUTUAL GROUP FOUNDATION</b>	Employer identification number <b>42-1308146</b>
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**Part II** **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-----	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-----	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-----	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-----	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-----	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-----	----- ----- ----- -----	\$ -----	-----

Name of organization GRINNELL MUTUAL GROUP FOUNDATION	Employer identification number 42-1308146
--	--

**Part III** Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ \_\_\_\_\_

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	----- ----- -----		----- ----- -----
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	----- ----- -----		----- ----- -----
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	----- ----- -----		----- ----- -----
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	----- ----- -----		----- ----- -----

GRINNELL MUTUAL GROUP FOUNDATION  
I D NO. 42-1308146  
ATTACHMENT TO 990-PF  
DECEMBER 31, 2012

PART I, LINE 18

2011 Excise Tax on Investment Income  
for 2011 Form 990-PF

0 00

GRINNELL MUTUAL GROUP FOUNDATION  
I D NO 42-1308146  
ATTACHMENT TO 990-PF  
DECEMBER 31, 2012

PART VII-A, LINE 10

Grinnell Mutual Reinsurance Company  
4215 Highway 146  
PO Box 790  
Grinnell IA 50112-0790

GMG FOUNDATION  
ID NO 42-1308146  
ATTACHMENT TO 990-PF  
December 31, 2012

Part VIII, Line 1

NAME & ADDRESS	TITLE, AVERAGE HRS PER WEEK DEVOTED TO POSITION	COMPENSATION (IF ANY)	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLAN	EXPENSE ACCT., OTHER ALLOWANCES
Larry Jansen 1905 Country Club Dr Grinnell, IA 50112	President & Director (Minimal)	0	0	0
Shawn McKay 3572 40th St Grinnell, IA 50112	Vice President (Minimal)	0	0	0
Hutch Kracht 1506 Reed St Grinnell, IA 50112	Treasurer (Minimal)	0	0	0
Adam Smith 316 Bailey St. Grinnell, IA 50112	Secretary (Minimal)	0	0	0
Ray Spriggs 1133 Broad Grinnell, IA 50112	Director (Minimal)	0	0	0
Brent Larsen 479 390th Ave Grinnell, IA 50112	Director (Minimal)	0	0	0
Phyllis Steffen 4020 110th St Malcom, IA 50157	Director (Minimal)	0	0	0
Stacy Heinen 1872 510th Ave. Montezuma, IA 50171	Director (Minimal)	0	0	0
Lynn Mawe 2024 Reed St Grinnell, IA 50112	Director (Minimal)	0	0	0
Carla Kelling 1827 Spencer Street Grinnell, IA 50112	Director (Minimal)	0	0	0
Barb Baker 1836 Summer Grinnell, IA 50112	Manager	0	0	0

## GRINNELL MUTUAL GROUP FOUNDATION

ID NO 42-1308146

ATTACHMENT TO 990-PF

DECEMBER 31, 2012

PART 1, LINE 3A

Date	Recipient Name	Recipient Address	Walla Walla	WA	Purpose	Amount
01/12/12	Whitman College	345 Boyer Ave	Chicago	IL	Matching gift - Jennie LeGates	100 00
01/12/12	Lutheran School of Theology	1100 East 55th St	Valparaiso	IN	Matching gift - Jennie LeGates	200 00
01/17/12	Valparaiso University	1300 Chapel Dr	Ames	IA	Matching gift - Jennie LeGates	100 00
01/17/12	Iowa State University Foundation	2505 University Blvd	Iowa City	IA	Matching gift - Jennie LeGates	100 00
01/25/12	National Iowa Varsity Club	N411 Carver Hawkeye Arena	Des Moines	IA	Matching gift - Lynn Mawe	40 00
01/31/12	Juvenile Diabetes Research Foundation	8033 University Blvd Ste 1	Newton	IA	Employee Fundraiser Match	500 00
03/08/12	Big Brothers/Big Sisters of Central Iowa	2009 1st Ave East	Grinnell	IA	Employee Fundraiser Match	250 00
03/08/12	Heart of Iowa Big Brothers/Big Sisters	97 14th Ave	Brooklyn	IA	Employee Fundraiser Match	250 00
03/08/12	Citizen's Scholarship Foundation of BGM	PO Box 469	Grinnell	IA	2012 Campaign	250 00
03/08/12	The Second Mile	515 3rd Ave	Grinnell	IA	Annual Contribution	1,000 00
03/08/12	Grinnell-Newburg Educational Excellence Fund	PO Box 344	Grinnell	IA	2012 Grant for Educational Endowment Fund	10,000 00
03/08/12	Social Justice Action Group	1233 Park Street	Grinnell	IA	2012 Community Meal Fund	1,000 00
03/08/12	Iowa College Foundation	505 5th Ave Ste 1034	Des Moines	IA	Scholarship program for 2012-2013	6,000 00
03/08/12	Iowa State University Foundation	2505 Elmwood Drive	Ames	IA	Annual GMG Foundation Scholarships 2012-2013	3,000 00
03/08/12	University of Iowa Foundation	PO Box 4550	Iowa City	IA	Annual GMG Foundation Scholarships 2012-2013	3,000 00
03/08/12	University of Northern Iowa Foundation	205 Commons	Cedar Falls	IA	Annual GMG Foundation Scholarships 2012-2013	3,157 89
03/08/12	Dordt College	498 4th Ave NE	Sioux Center	IA	Matching gift-Donna VanWyk	50 00
03/19/12	American Cancer Society	PO Box 425	Grinnell	IA	Employee Fundraiser Match	500 00
03/28/12	University of Northern Iowa Foundation	1223 W 22nd St	Cedar Falls	IA	Matching gift - Larry Jansen	480 00
03/28/12	University of Iowa Foundation	PO Box 4550	Iowa City	IA	Matching gift - Brent Larsen	448 00
03/28/12	University of Iowa Foundation	PO Box 4550	Iowa City	IA	Matching gift - Gale Larsen	448 00
04/18/12	University of Iowa Foundation	PO Box 4550	Iowa City	IA	Matching gift - Richard Shell	480 00
04/19/12	Iowa State University Foundation	1800 South Fourth St	Ames	IA	Matching gift - Zack Spykerman	222 40
04/23/12	Cystic Fibrosis Foundation	1025 Ashworth Road	W Des Moines	IA	Employee Fundraiser Match	500 00
04/23/12	National Multiple Sclerosis Society	8187 University Blvd Ste B	Clive	IA	Employee Fundraiser Match	500 00
04/27/12	University of Iowa Foundation	PO Box 4550	Iowa City	IA	Matching gift - Doug Coats	272 00
04/27/12	University of Iowa Foundation	PO Box 4550	Iowa City	IA	Matching gift - Lynn Mawe	268 00
05/07/12	Iowa State University Foundation	2505 University Blvd	Ames	IA	Matching gift - Deborah A Johnson	125 00
05/18/12	Drake University	PO Box 1848	Des Moines	IA	Matching gift - Dennis G Day	750 00
05/21/12	Taylor Reed	321 4th Ave	Grinnell	IA	Dan F Agnew Scholarship Recipient - 2012	500 00
05/24/12	Iowa Insurance Hall of Fame	10546 Justin Drive	Urbandale	IA	Iowa Insurance Hall of Fame	250 00
05/30/12	Crohn's and Colitis Foundation	8031 W Center Rd Ste 322	Omaha	NE	Employee Fundraiser Match	500 00
06/04/12	American Diabetes Association	1701 N Beauregard St	Alexandria	VA	Employee Fundraiser Match	500 00
06/05/12	University of Iowa Foundation	PO Box 4550	Iowa City	IA	Matching gift - Jolynn Renaud	360 00
07/18/12	Monona Fire Department	PO Box 370	Elkader	IA	Monona Fire Dept -Grain rescue tube purchase	100 00
07/18/12	ABI Foundation	904 Walnut St Ste 100	Des Moines	IA	2012 Business Horizons Sponsor	500 00
07/18/12	Iowa Sids Alliance	101 H Ave	Kalona	IA	Employee Fundraiser Match	500 00
07/25/12	Iowa State University Foundation	2505 Elmwood Drive	Ames	IA	Matching gift - Michael Schaeffer	250 00
07/25/12	Drake University	2507 University Ave	Des Moines	IA	Matching gift - Douglas Coats	200 00
08/02/12	University of Iowa Foundation	PO Box 4550	Iowa City	IA	Matching gift - Adam Moore	750 00
08/06/12	Susan Komen Foundation	c/o Tressa Lepley	Grinnell	IA	Employee Fundraiser Match	500 00
08/06/12	Leukemia and Lymphoma Society	8033 University Blvd Ste A	Des Moines	IA	Employee Fundraiser Match	500 00

08/06/12	United Mitochondrial Disease Foundation	8085 Saltsburg Road Ste 201	Pittsburg	PA 15239	Employee Fundraiser Match	500 00
08/06/12	Alex's Lemonade Stand Foundation	333 East Lancaster Ave #414	Wynnewood	PA 19096	Employee Fundraiser Match	500 00
09/11/12	Iowa State University Foundation	PO Box 2230	Ames	IA 50010-2230	Matching gift - Jennie LeGates	100 00
09/27/12	University of Iowa Foundation	PO Box 4550	Iowa City	IA 52244-4550	Matching gift - Jonathan Manatt	224 00
10/10/12	Iowa State University Foundation	PO Box 2230	Ames	IA 50010-2230	Matching gift - Michael A. Mertens	25 00
10/10/12	Dordt College	498 Fourth Ave NE	Sioux Center	IA 51250	Matching gift - Bonnie VanderWeerd	25 00
10/12/12	University of Iowa Foundation	PO Box 4550	Iowa City	IA 50244-4550	Matching gift - Chris Hansen	25 00
10/30/12	University of Wisconsin Oshkosh Foundation	842 Algoma Blvd	Oshkosh	WI 54901	Matching gift - Kathleen E. Harris	25 00
11/14/12	Wartburg College	100 Wartburg Blvd	Waverly	IA 50677	Matching gift - Kevin Lincoln	150 00
11/14/12	Wartburg College	100 Wartburg Blvd	Waverly	IA 50677	Matching gift - Denise Klocke	50 00
12/10/12	Grinnell United Way	PO Box 121	Grinnell	IA 50112	United Way employee matching donation	12,089 56
12/10/12	Brooklyn -Bear Creek Community Fund	PO Box	Brooklyn	IA 52211	United Way employee matching donation	1,388 80
12/10/12	Cedar Valley United Way	425 Cedar St Ste 300	Waterloo	IA 50701	United Way employee matching donation	41 60
12/10/12	Fox Valley United Way	44 E Galena Blvd	Aurora	IL 60505	United Way employee matching donation	249 60
12/10/12	Jasper County United Way	PO Box 844	Newton	IA 50208	United Way employee matching donation	3,328 00
12/10/12	Kellogg Community Chest	PO Box 254	Kellogg	IA 50135	United Way employee matching donation	735.20
12/10/12	Laurel Community Chest	PO Box 1	Laurel	IA 50141	United Way employee matching donation	331 20
12/10/12	Lynnville United Way	PO Box 187	Lynnville	IA 50153	United Way employee matching donation	749 20
12/10/12	Marengo United Way	PO Box 168	Marengo	IA 52301	United Way employee matching donation	478 40
12/10/12	Marion County United Way	PO Box 577	Knoxville	IA 50138	United Way employee matching donation	41 60
12/10/12	Marshalltown Area United Way	PO Box 247	Marshalltown	IA 50158	United Way employee matching donation	290 40
12/10/12	Monroe United Way	PO Box 370	Monroe	IA 50171	United Way employee matching donation	40 00
12/10/12	Montezuma Community Fund	PO Box 132	Montezuma	IA 50171	United Way employee matching donation	2,218 40
12/10/12	Community Foundation of NE Iowa	PO Box 1176	Waterloo	IA 50704	United Way employee matching donation	707 20
12/10/12	Sully United Fund	PO Box 85	Sully	IA 50251	United Way employee matching donation	456 80
12/10/12	Cass Clay United Way	PO Box 1609	Fargo	ND 58107-1609	United Way employee matching donation	208 00
12/10/12	United Way of East Central Iowa	1030 Fifth Ave SE #100	Cedar Rapids	IA 52403-2479	United Way employee matching donation	416 00
12/10/12	United Way of Central Iowa	1111 9th St, Ste 100	Des Moines	IA 50014	United Way employee matching donation	3,266 84
12/10/12	United Way of Greater High Point	201 Church Ave	High Point	NC 27262	United Way employee matching donation	208 00
12/10/12	United Way of Johnson County	1150 5th St #290	Coralville	IA 52241	United Way employee matching donation	208 00
12/10/12	United Way of Mahaska County	209 A Ave E	Oskaloosa	IA 52577	United Way employee matching donation	1,174 40
12/10/12	Story County United Way	303 Welch Ave, Ste 106	Ames	IA 50014	United Way employee matching donation	312 00
12/10/12	United Way of Wapello County	PO Box 1778	Ottumwa	IA 52501	United Way employee matching donation	41 60
12/10/12	Victor United Way	PO Box	Victor	IA 52347	United Way employee matching donation	659 20
12/10/12	Sioux Empire SD United Way	1000 North West Ave Ste 120	Sioux Falls	SD 57104-1314	United Way employee matching donation	320.00
12/10/12	United Way of Dodge County	PO Box 158	Beaver Dam	WI 53916-0158	United Way employee matching donation	40 00
12/10/12	Grinnell High School Fine Arts Alliance	1333 Sunset St	Grinnell	IA 50112	GMG Foundation annual contribution	250 00
12/10/12	Grinnell Area Arts Council	PO Box 657	Grinnell	IA 50112	GMG Community Theatre Production contribution	250.00
12/10/12	ABI Foundation	904 Walnut St Ste 100	Des Moines	IA 50309-3503	2013 Business Horizons Sponsor	1,000 00
12/10/12	Farm Safety 4 Just Kids	11304 Aurora Ave	Urbandale	IA 50322	GMG Foundation contribution	5,000 00
12/10/12	Grinnell Dollars for Scholars	c/o Hutch Kracht, Treasurer	Grinnell	IA 50112	GMG annual contribution - Dogs for Dollars	2,500 00
12/10/12	University of Northern Iowa Foundation	205 Commons	Cedar Falls	IA 50614-0239	Matching gift- Michael D. Groves	50 00
12/28/12	Grinnell Regional Medical Center	210 4th Ave	Grinnell	IA 50112	GMG annual contribution - Anesthesiology machine	10,000 00
12/28/12	University of Iowa Foundation	One West Park Road	Iowa City	IA 52246	Fee-Annual GMG Foundation Scholarships 2012-201:	150 00

**GMG FOUNDATION CONTRIBUTION APPROVAL FORM**

NAME:

ADDRESS:

PURPOSE:

AMOUNT:

LISTED IN TAX EXEMPT BOOK:

YES ☒ NO ☐  
(IF NO, COMPLETE  
NEXT 2 ITEMS)

IS RECIPIENT TAX EXEMPT: YES \_\_\_\_ NO \_\_\_\_

TAXPAYER I.D. NUMBER

APPROVED BY:

\_\_\_\_\_

DATE: \_\_\_\_\_

FOR ACCOUNTING USE ONLY:

CHECK # \_\_\_\_\_

ISSUE DATE \_\_\_\_\_



**GRINNELL MUTUAL**  
REINSURANCE **SINCE 1909**

**Grinnell Mutual Reinsurance Company**

4215 Highway 146

PO Box 790

Grinnell, IA 50112-0790

Phone 800-362-2041 or 641-269-8000

**GRINNELL MUTUAL GROUP FOUNDATION  
EMPLOYEE EDUCATIONAL GIFT MATCHING PROGRAM**

**Instructions:**

**1. Employee**

Complete Section A below and forward to the educational institution along with your contribution. A limit of \$750 per employee/per year to colleges and universities applies. Contributions designated for athletic departments or athletic funds will be matched at 80% up to the \$750 limit.

**2. Educational Institution**

Upon receipt of the contribution and this form, recipient should complete Section B below and forward to Barb Baker, Manager, The Grinnell Mutual Group Foundation, Grinnell Mutual Reinsurance Company, P.O. Box 790, Grinnell, Iowa 50112. The matching check will be promptly issued.

**SECTION A (to be completed by employee)**

Attached is my personal gift of \$ \_\_\_\_\_ to \_\_\_\_\_

\_\_\_\_\_  
Street Address City State Zip Code

Employee No. \_\_\_\_\_ Date of Employment \_\_\_\_\_ Date of Gift \_\_\_\_\_

(Print name)

(Signature)

**SECTION B (to be completed by an educational institution official)**

I hereby confirm the above gift of \$ \_\_\_\_\_ was received by

\_\_\_\_\_  
(Name of Institution)

on or about \_\_\_\_\_ from \_\_\_\_\_  
(Date) (Donor)

\_\_\_\_\_  
(Signature and Title of Official)

If any portion of this gift is designated for your institution's athletic program, please indicate the amount: \$ \_\_\_\_\_

Approved for payment by \_\_\_\_\_  
(Manager, The Grinnell Mutual Group Foundation) (Date)

Please pay this amount: \_\_\_\_\_