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

2012

Department of the Treasury
Internal Revenue Service

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

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

Name of foundation
The Van Buren Foundation, Inc.

Number and street (or P O box number if mail is not delivered to street address) Room/suite
C/O Community First Bank

City or town State ZIP code
Keosauqua IA 52565

G Check all that apply
 Initial return Initial Return of a former public charity
 Final return Amended return
 Address change Name change

H Check type of organization
 Section 501(c)(3) exempt private foundation
 Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, column (c), line 16)
 \$ **6,547,557.**

J Accounting method
 Cash Accrual
 Other (specify) _____
(Part I, column (d) must be on cash basis)

A Employer identification number
42-6062589

B Telephone number (see the instructions)
(319) 293-3794

C If exemption application is pending, check here

D 1 Foreign organizations, check here
 2 Foreign organizations meeting the 85% test, check here and attach computation

E If private foundation status was terminated under section 507(b)(1)(A), check here

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
REVENUE	1 Contributions, gifts, grants, etc. received (att sch)	5,000.			
	2 Ck <input type="checkbox"/> if the foundn is not req to att Sch B				
	3 Interest on savings and temporary cash investments	3,935.	3,935.	3,935.	
	4 Dividends and interest from securities	135,334.	135,334.	135,334.	
	5a Gross rents	4,178.	4,178.	4,178.	
	b Net rental income or (loss)	-82,348.			
	6a Net gain/(loss) from sale of assets not on line 10	-123,681.			
	b Gross sales price for all assets on line 6a	2,086,421.			
	7 Capital gain net income (from Part IV, line 2)		0.		
	8 Net short-term capital gain			0.	
	9 Income modifications			0.	
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit/(loss) (att sch)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	Membership Dues 320.	25,086.	143,447.	143,447.	
ADMINISTRATIVE EXPENSES	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach sch) L-16b Stmt	7,030.	3,515.	3,515.	3,515.
	c Other prof fees (attach sch)				
	17 Interest				
	18 Taxes (attach schedule)(see instrs) See Line 18 Stmt	2,589.			
	19 Depreciation (attach sch) and depletion	45,067.			
	20 Occupancy				
21 Travel, conferences, and meetings					
22 Printing and publications					
23 Other expenses (attach schedule) See Line 23 Stmt	41,623.	4,178.	4,178.	37,445.	
24 Total operating and administrative expenses. Add lines 13 through 23	96,309.	7,693.	7,693.	40,960.	
25 Contributions, gifts, grants paid	228,766.			228,766.	
26 Total expenses and disbursements. Add lines 24 and 25	325,075.	7,693.	7,693.	269,726.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	-299,989.				
b Net investment income (if negative, enter -0-)		135,754.			
c Adjusted net income (if negative, enter -0-)			136,074.		

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			
		Beginning of year	End of year		
		(a) Book Value	(b) Book Value	(c) Fair Market Value	
ASSETS	1	Cash – non-interest-bearing	27,023.	1,456.	1,456.
	2	Savings and temporary cash investments	692,290.	668,803.	668,803.
	3	Accounts receivable			
		Less allowance for doubtful accounts			
	4	Pledges receivable			
		Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach sch)			
		Less allowance for doubtful accounts	99,946.	112,229.	112,229.
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges	5,003.	3,701.	3,701.
	10a	Investments – U.S. and state government obligations (attach schedule)			
	b	Investments – corporate stock (attach schedule) L-10b Stmt	4,362,193.	4,105,030.	4,930,945.
	c	Investments – corporate bonds (attach schedule) L-10c Stmt	200,000.	200,000.	200,391.
	11	Investments – land, buildings, and equipment, basis			
	Less: accumulated depreciation (attach schedule)				
12	Investments – mortgage loans				
13	Investments – other (attach schedule)				
14	Land, buildings, and equipment basis	1,292,953.			
	Less: accumulated depreciation (attach schedule) L-14 Stmt	671,356.			
15	Other assets (describe L-15 Stmt)	296.	8,435.	8,435.	
16	Total assets (to be completed by all filers – see the instructions. Also, see page 1, item I)	6,021,240.	5,721,251.	6,547,557.	
LIABILITIES	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, & other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)			
NET ASSETS OR FUND BALANCES	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. <input checked="" type="checkbox"/>				
	24	Unrestricted	4,610,485.	4,302,925.	
	25	Temporarily restricted	641,261.	648,832.	
	26	Permanently restricted	769,494.	769,494.	
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. <input type="checkbox"/>				
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, building, and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
30	Total net assets or fund balances (see instructions)	6,021,240.	5,721,251.		
31	Total liabilities and net assets/fund balances (see instructions)	6,021,240.	5,721,251.		

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	6,021,240.
2	Enter amount from Part I, line 27a	2	-299,989.
3	Other increases not included in line 2 (itemize)	3	
4	Add lines 1, 2, and 3	4	5,721,251.
5	Decreases not included in line 2 (itemize)	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30	6	5,721,251.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shares MLC Company)	(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a LONG TERM CAPITAL GAINS DISTRIBUTIONS	P	Various	12/31/12
b 11.379 SHS AMERICAN BALANCED FUND	P	Various	02/10/12
c 751,033 SHS AMERICAN MUTUAL FUND	P	Various	05/22/12
d 919,118 SHS AMERICIAN MUTUAL FUND	P	Various	07/09/12
e See Columns (a) thru (d)			

(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)
a 18,127.		0.	18,127.
b 218.		221.	-3.
c 20,000.		18,784.	1,216.
d 25,000.		22,988.	2,012.
e See Columns (e) thru (h)		2,168,109.	-145,033.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	
a 0.	0.	0.	18,127.
b			-3.
c 0.	0.	0.	1,216.
d 0.	0.	0.	2,012.
e See Columns (i) thru (l)	0.	0.	-145,033.

2 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]	2	-123,681.
3 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]	3	-123,681.

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

Yes No

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

1 Enter the appropriate amount in each column for each year, see the instructions before making any entries.			
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (column (b) divided by column (c))
2011	397,198.	5,676,590.	0.069971
2010	240,438.	5,423,449.	0.044333
2009	272,953.	4,875,840.	0.055981
2008	274,421.	5,847,507.	0.046930
2007	209,737.	6,701,454.	0.031297

2 Total of line 1, column (d)	2	0.248512
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	0.049702
4 Enter the net value of noncharitable-use assets for 2012 from Part X, line 5	4	5,643,672.
5 Multiply line 4 by line 3	5	280,502.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	1,358.
7 Add lines 5 and 6	7	281,860.
8 Enter qualifying distributions from Part XII, line 4	8	301,901.

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

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

1 a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter 'N/A' on line 1 Date of ruling or determination letter: _____ (attach copy of letter if necessary – see instrs)		
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	1,358.
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)		
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2	0.
3 Add lines 1 and 2	3	1,358.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	1,358.
6 Credits/Payments		
a 2012 estimated tax pmts and 2011 overpayment credited to 2012	6 a	2,202.
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	0.
d Backup withholding erroneously withheld	6 d	
7 Total credits and payments Add lines 6a through 6d	7	2,202.
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	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	844.
11 Enter the amount of line 10 to be: Credited to 2013 estimated tax <input type="checkbox"/> 844. Refunded <input checked="" type="checkbox"/>	11	

Part VIIA 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?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for 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>		X
c Did the foundation file Form 1120-POL for this year?		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? <i>If 'Yes,' attach a detailed description of the activities.</i>		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? <i>If 'Yes,' attach a conformed copy of the changes</i>		X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If 'Yes,' attach the statement required by General Instruction T</i>		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If 'Yes,' complete Part II, column (c), and Part XV</i>	X	
8 a Enter the states to which the foundation reports or with which it is registered (see instructions) <u>IA - Iowa</u>		
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? <i>If 'No,' attach explanation</i>	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)? <i>If 'Yes,' complete Part XIV</i>		X
10 Did any persons become substantial contributors during the tax year? <i>If 'Yes,' attach a schedule listing their names and addresses</i>		X

Part VIIA 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)			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)			X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <u>N/A</u>	X		
14	The books are in care of <u>GEORGE MANNING</u> Telephone no <u>(319) 293-3794</u> Located at <u>COMMUNITY FIRST BANK KEOSAUQUA IA</u> ZIP + 4 <u>52565</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year			
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? See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If 'Yes,' enter the name of the foreign country		Yes	No
				X

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

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

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

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

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

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

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

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

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

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

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

c If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? Yes No
 If 'Yes,' attach the statement required by Regulations section 53.4945-5(d)

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

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No
 If 'Yes' to 6b, file Form 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? Yes No

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

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

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
JON FINNEY 17248 HIGHWAY 1 KEOSAUQUA IA 52565	CHAIRMAN 0.25	0.	0.	0.
MATTHEW MANNING 502 FRANKLIN ST KEOSAUQUA IA 52565	PRESIDENT 0.25	0.	0.	0.
SANDY MCLAIN 27390 V56 MILTON IA 52570	V PRESIDENT 0.25	0.	0.	0.
See Information about Officers, Directors, Trustees, Etc		0.	0.	0.

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

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

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
NONE		

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

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 EXPENSES ATTRIBUTABLE TO MAINTAINING THE ROBERTS MEMORIAL BUILDING - SEE SCHEDULE	86,525.
2 OTHER QUALIFYING GRANTS AND SCHOLARSHIPS - SEE SCHEDULE	228,766.
3 -----	
4 -----	

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 -----	
2 -----	
All other program-related investments See instructions	
3 -----	
Total. Add lines 1 through 3	

BAA

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	5,066,489.
b	Average of monthly cash balances	1 b	662,763.
c	Fair market value of all other assets (see instructions)	1 c	364.
d	Total (add lines 1a, b, and c)	1 d	5,729,616.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1 e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	5,729,616.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	85,944.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	5,643,672.
6	Minimum investment return. Enter 5% of line 5	6	282,184.

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	282,184.
2a	Tax on investment income for 2012 from Part VI, line 5	2 a	1,358.
b	Income tax for 2012 (This does not include the tax from Part VI)	2 b	
c	Add lines 2a and 2b	2 c	1,358.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	280,826.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	280,826.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	280,826.

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	269,726.
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	32,175.
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	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	301,901.
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	1,358.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	300,543.

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI, line 7				280,826.
2 Undistributed income, if any, as of the end of 2012:				
a Enter amount for 2011 only			0.	
b Total for prior years 20 __, 20 __, 20 __				
3 Excess distributions carryover, if any, to 2012				
a From 2007	0.			
b From 2008	0.			
c From 2009	34,173.			
d From 2010	0.			
e From 2011	115,625.			
f Total of lines 3a through e	149,798.			
4 Qualifying distributions for 2012 from Part XII, line 4: ▶ \$ 301,901.				
a Applied to 2011, but not more than line 2a				
b Applied to undistributed income of prior years (Election required – see instructions)				
c Treated as distributions out of corpus (Election required – see instructions)				
d Applied to 2012 distributable amount				280,826.
e Remaining amount distributed out of corpus	21,075.			
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	170,873.			
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)	0.			
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	170,873.			
10 Analysis of line 9.				
a Excess from 2008	0.			
b Excess from 2009	34,173.			
c Excess from 2010	0.			
d Excess from 2011	115,625.			
e Excess from 2012	21,075.			

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

- 1 a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2012, enter the date of the ruling ▶
- b** Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

Tax year	Prior 3 years			(e) Total
(a) 2012	(b) 2011	(c) 2010	(d) 2009	
b 85% of line 2a				
c Qualifying distributions from Part XII, line 4 for each year listed				
d Amounts included in line 2c not used directly for active conduct of exempt activities				
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c				
3 Complete 3a, b, or c for the alternative test relied upon				
a 'Assets' alternative test – enter				
(1) Value of all assets				
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)				
b 'Endowment' alternative test – enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed				
c 'Support' alternative test – enter				
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)				
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)				
(3) Largest amount of support from an exempt organization				
(4) 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
- PER ATTACHED SCHEDULE
- b** The form in which applications should be submitted and information and materials they should include
- PER ATTACHED SCHEDULE
- c** Any submission deadlines
- PER ATTACHED SCHEDULE
- d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors
- PER ATTACHED SCHEDULE

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
a Paid during the year				
BONAPARTE PUBLIC LIBRARY P O BOX 186 BONAPARTE IA 52620	NONE	PUBLIC	PRINTING AND MAILING OF BROCHURES	1,500.
VILLAGES FOLK SCHOOL 809 1ST ST KEOSAUQUA IA 52565	NONE	PUBLIC	MORRIS PARK GREAT PLACES	530.
BENTONSPORT IMPROVEMENT ASSN 21953 SANFORD ST KEOSAUQUA IA 52565	NONE	PUBLIC	STONE HOUSE RESTORATION	4,000.
CITY OF KEOSAUQUA CITY HALL 804 1ST ST KEOSAUQUA, IA 52565	NONE	PUBLIC	VILLAGES OF VAN BUREN BUDGET	32,000.
CITY OF KEOSAUQUA CITY HALL 804 1ST ST KEOSAUQUA IA 52565	NONE	PUBLIC	KIDS AT PLAY CITY PLAYGROUND PROJECT	10,500.
CITY OF MILTON CITY HALL MILTON IA 52570	NONE	PUBLIC	EXPANSION OF CITY PARK SHELTER & LIBRARY ROOF	3,000.
CITY OF FARMINGTON EMS P.O. BOX 554 FARMINGTON IA 52626	NONE	PUBLIC	GENERATOR FOR FIRE STATION	6,000.
BIRMINGHAM DEVELOPMENT P.O. BOX 96 NORTH ENGLISH IA 52316	NONE	PUBLIC	DOOR REPLACEMENT	3,780.
CANTRIL IMPROVEMENT CORP 102 W. SECOND ST CANTRIL IA 52542	NONE	PUBLIC	WINDOW REPLACEMENTS	4,194.
See Line 3a statement				163,262.
Total				228,766.
b Approved for future payment				
VAN BUREN TRAILS ASSOCIATION P.O. BOX 327 KEOSAUQUA IA 52565	NONE	PUBLIC	KEOSAUQUA TRAILS	20,000.
CITY OF KEOSAUQUA CITY HALL 804 1ST ST KEOSAUQUA IA 52565	NONE	PUBLIC	VILLAGES OF VAN BUREN ANNUAL BUDGET	33,000.
See Line 3b statement				205,100.
Total				258,100.

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2012

Name of the organization

The Van Buren Foundation, Inc.

Employer identification number

42-6062589

Organization type (check one)

Filers of:

Form 990 or 990-EZ

Form 990-PF

Section:

- 501(c)(____) (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization
- 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, 990EZ, or 990-PF.

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

Name of organization

Employer identification number

The Van Buren Foundation, Inc.

42-6062589

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

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ROBERT VICKERMAN ----- 2106 19TH AVE ----- MONROE WI 53566 -----	\$ 5,000.	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.)

Name(s) Shown on Return The Van Buren Foundation, Inc. Employer ID Number 42-6062589

Grantee Information:

Grantee Name BIRMINGHAM DEVELOPMENT INC.
Check Box, if Grantee is a Business
Grantee Address P O BOX 96
Grantee City NORTH ENGLISH Grantee State IA Grantee Zip 52316
Foreign City _____ Foreign Country _____

Grant Amount 3,780. Amount Expended 3,780.
Date of Grant DECEMBER 13, 2011

Purpose of Grant:

TO REPLACE ENTRY DOORS IN 12 UNIT USDA ELDERLY AND DISABLED APARTMENT
COMPLEX LOCATED IN BIRMINGHAM IOWA.

Any Diversion By Grantee?

NO

Dates of Reports by Grantee?

JUNE 26, 2012

Verification Date JULY 13, 2012

Results of Verification:

FUNDS WERE PROPERLY EXPENDED FOR DOORS ACCORDING TO THE TERMS OF THE
GRANT.

Name(s) Shown on Return The Van Buren Foundation, Inc. Employer ID Number 42-6062589

Grantee Information:

Grantee Name CANTRIL IMPROVEMENT CORP
Check Box, if Grantee is a Business
Grantee Address 102 W. SECOND ST
Grantee City CANTRIL Grantee State IA Grantee Zip 52542
Foreign City _____ Foreign Country _____

Grant Amount 4,194. Amount Expended 4,194.
Date of Grant DECEMBER 13, 2011

Purpose of Grant:

TO HELP FUND THE REPLACEMENT OF WINDOWS IN A USDA ELDERLY AND DISABLED
APARTMENT COMPLEX LOCATED IN CANTRIL, IA.

Any Diversion By Grantee?

NO

Dates of Reports by Grantee?

MAY 14, 2012

Verification Date MAY 16, 2012

Results of Verification:

FUNDS WERE PROPERLY EXPENDED FOR THE REPLACEMENT OF THE WINDOWS ACCORDING
TO THE TERMS OF THE GRANT.

Name(s) Shown on Return The Van Buren Foundation, Inc. Employer ID Number 42-6062589

Grantee Information:

Grantee Name VAN BUREN RECREATION AREA
Check Box, if Grantee is a Business
Grantee Address 217 RIVERVIEW DR
Grantee City KEOSAUQUA Grantee State IA Grantee Zip 52565
Foreign City _____ Foreign Country _____

Grant Amount 15,000. Amount Expended 15,000.
Date of Grant DECEMBER 13, 2011

Purpose of Grant:

TO HELP PROVIDE FUNDS FOR A NEW MOWER AND PUMP STATION FOR GOLF COURSE USED
BY THE SCHOOL AND THE PUBLIC IN KEOSAUQUA, IA

Any Diversion By Grantee?

NO

Dates of Reports by Grantee?

JANUARY 13, 2012 AND APRIL 17, 2012

Verification Date MAY 29 2012

Results of Verification:

THE FUNDS WERE PROPERLY MATCHED AND EXPENDED ACCORDING TO THE TERMS OF THE
GRANT.

Name(s) Shown on Return The Van Buren Foundation, Inc. Employer ID Number 42-6062589

Grantee Information:

Grantee Name KEOSAUQUA CHAMBER OF COMMERCE
Check Box, if Grantee is a Business
Grantee Address P.O. BOX 511
Grantee City KEOSAUQUA Grantee State IA Grantee Zip 52565
Foreign City _____ Foreign Country _____

Grant Amount 595. Amount Expended 595.
Date of Grant DECEMBER 13, 2011

Purpose of Grant:

TO PROVIDE FUNDS TO UPDATE THE KEOSAUQUA, IA WEBSITE.

Any Diversion By Grantee?

NO

Dates of Reports by Grantee?

JANUARY 17, 2012

Verification Date JANUARY 23, 2012

Results of Verification:

FUNDS WERE EXPENDED FOR THE WEBSITE IN ACCORDANCE WITH THE TERMS OF THE GRANT.

THE VAN BUREN FOUNDATION, INC

42-6062589

2012

FORM 990-PF

Part 1, Line 19, and Part II, Line 14, Depreciation and Accumulated Depreciation

<u>Description</u>	<u>Cost</u>	<u>Life or Rate</u>	<u>Current Depreciation</u>	<u>Accumulated Depreciation 12/31/2012</u>
Land	\$ 1,000	N/A	\$ -	\$ -
Building and Improvements	1,217,951	3-39 yr SL	42,535	604,603
Furniture, Fixtures and Equip.	<u>74,002</u>	5-15 yr SL	<u>2,532</u>	<u>66,753</u>
	<u>\$ 1,292,953</u>		<u>\$ 45,067</u>	<u>\$ 671,356</u>

THE VAN BUREN FOUNDATION, INC.
42-6062589
2012

FORM 990-PF

	Beginning of year Book Value	End of year Book Value	End of year Fair Market Value
<u>Part II, Line 7</u>			
Medical and Nursing loans	<u>\$ 99,946</u>	<u>\$ 112,229</u>	<u>\$ 112,229</u>
Totals	<u><u>\$ 99,946</u></u>	<u><u>\$ 112,229</u></u>	<u><u>\$ 112,229</u></u>

Form 990-PF, Page 1, Part I, Line 18

Line 18 Stmt

Taxes	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
<u>PRIOR YEARS INVESTMENT TAX</u>	1,401.			
<u>Foreign Tax Paid</u>	1,188.			
Total	<u>2,589.</u>			

Form 990-PF, Page 1, Part I, Line 23

Line 23 Stmt

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
<u>Insurance</u>	3,781.			3,781.
<u>Janitor</u>	9,363.			9,363.
<u>Miscellaneous</u>	482.			482.
<u>Repairs & Maintenance</u>	9,646.			9,646.
<u>Supplies</u>	1,671.			1,671.
<u>Utilities & Telephone</u>	16,680.	4,178.	4,178.	12,502.
Total	<u>41,623.</u>	<u>4,178.</u>	<u>4,178.</u>	<u>37,445.</u>

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income

Columns (a) thru (d)

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shares MLC Company)	(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
891.583 SHS AMERICAN MUTUAL FUND	P	Various	09/04/12
11682.276 SHS BOND FUND OF AMERICA	P	Various	12/11/12
19305.194 SHS BOND FUND OF AMERICA	P	Various	12/11/12
975.991 SHS CAPITAL INCOME BUILDER FUND A	P	Various	07/09/12
479.939 SHS CAPITAL INCOME BUILDER FUND A	P	Various	11/19/12
9229.964 SHS CAPITAL WORLD BOND FUND A	P	Various	12/11/12
2724.664 SHS CAPITAL WORLD GRW & INC FD A	P	Various	12/11/12
3263.609 SHS CAPITAL WORLD GRW & INC FD A	P	Various	12/11/12
5991.346 SHS GOLDMAN SACHS GRW & INC	P	Various	12/11/12
19241.124 SHS GOLDMAN SACHS CORE FXD INCOM	P	Various	12/11/12
11467.066 SHS GOLDMAN SACHS EQU GRW STRAT A	P	Various	12/11/12
9390.602 SHS GOLDMAN SACHS MID CAP VAL CL A	P	Various	12/11/12
23298.638 SHS GOLDMAN SACHS GRW STRATEGY A	P	Various	12/11/12

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income

Columns (e) thru (h)

(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)
25,000.		22,299.	2,701.
151,636.		155,764.	-4,128.
250,581.		257,403.	-6,822.
50,000.		53,090.	-3,090.
25,000.		26,107.	-1,107.
199,921.		180,694.	19,227.

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income
Columns (e) thru (h)

Continued

(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)
101,276.		123,822.	-22,546.
121,308.		148,315.	-27,007.
134,925.		162,296.	-27,371.
205,495.		192,771.	12,724.
135,541.		170,041.	-34,500.
361,914.		338,669.	23,245.
260,479.		336,838.	-76,359.
Total		<u>2,168,109.</u>	<u>-145,033.</u>

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income
Columns (i) thru (l)

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

(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	(l) Gains (column (h) gain minus column (k), but not less than -0-) or losses (from column (h))
0.	0.	0.	2,701.
			-4,128.
			-6,822.
			-3,090.
			-1,107.
0.	0.	0.	19,227.
			-22,546.
			-27,007.
			-27,371.
0.	0.	0.	12,724.
			-34,500.
0.	0.	0.	23,245.
			-76,359.
Total	<u>0.</u>	<u>0.</u>	<u>-145,033.</u>

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

Information about Officers, Directors, Trustees, Etc.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Person <input checked="" type="checkbox"/> Business <input type="checkbox"/> GEORGE MANNING 21723 HWY 2 KEOSAUQUA IA 52565	TREASURER 0.50	0.	0.	0.

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

Continued

Information about Officers, Directors, Trustees, Etc.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Person <input checked="" type="checkbox"/> Business <input type="checkbox"/> JEANNE ERICKSON 23662 HWY 1 KEOSAUQUA IA 52565	ASST TREASURER 0.25	0.	0.	0.
Person <input type="checkbox"/> Business <input type="checkbox"/> CRYSTAL CRONK 19666 270TH ST SIGOURNEY IA 52591	SECRETARY 0.25	0.	0.	0.
Person <input checked="" type="checkbox"/> Business <input type="checkbox"/> ALLEN GUNN 31672 245TH BONAPARTE IA 52620	DIRECTOR 0.25	0.	0.	0.
Person <input checked="" type="checkbox"/> Business <input type="checkbox"/> STEVE KISLING 811 LOUIS ST KEOSAUQUA IA 52565	DIRECTOR 0.25	0.	0.	0.
Person <input checked="" type="checkbox"/> Business <input type="checkbox"/> MARY JO SMITH 801 ROAD ST FARMINGTON IA 52626	ASSISTANT SECRETARY 0.25	0.	0.	0.
Person <input checked="" type="checkbox"/> Business <input type="checkbox"/> KEVIN HRANICKA 853 COUNTRY LANE RD KEOSAUQUA IA 52565	DIRECTOR 0.25	0.	0.	0.
Person <input checked="" type="checkbox"/> Business <input type="checkbox"/> PAT MILLER 18549 HWY 1 KEOSAUQUA IA 52565	DIRECTOR 0.25	0.	0.	0.
Person <input checked="" type="checkbox"/> Business <input type="checkbox"/> FRED CHAPUIS 11787 RT W30 STOCKPORT IA 52651	VICE CHAIRMAN 0.25	0.	0.	0.
Person <input checked="" type="checkbox"/> Business <input type="checkbox"/> ARTHUR P OVROM 1001 FRONT ST KEOSAUQUA IA 52565	DIRECTOR 0.25	0.	0.	0.
Person <input type="checkbox"/> Business <input type="checkbox"/> BEN KOELLNER 12301 300TH ST MILTON IA 52570	DIRECTOR 0.25	0.	0.	0.
Person <input type="checkbox"/> Business <input type="checkbox"/> LISA PLOWMAN 16063 GOLD AVE DOUDS IA 52551	DIRECTOR 0.25	0.	0.	0.
Person <input type="checkbox"/> Business <input type="checkbox"/> RICHARD WORKMAN 18289 HWY 1 KEOSAUQUA IA 52565	DIRECTOR 0.25	0.	0.	0.

THE VAN BUREN FOUNDATION, INC.
42-6062589
2012

FORM 990-PF

Part IX-A, Supporting Data

1. Information Concerning the Foundation's Direct Charitable Activities:

The Roberts Memorial Building is maintained by the Van Buren Foundation for the use during the county fair and as a community building for use by area organizations for meetings, seminars, local theatre productions, etc. It is estimated that over 40 area organizations benefited from the operation of the building in 2012.

Summary of Expenses

Depreciation	\$ 45,067
Repairs and maintenance	9,646
Insurance	3,781
Utilities and telephone	16,680
Janitorial	9,363
Supplies	1,671
Miscellaneous expense	317
	<u>\$ 86,525</u>

**THE VAN BUREN FOUNDATION, INC.
42-6062589
2012**

FORM 990-PF

Part XV, Line 2, Information Regarding Grant and Loan Program

General Grants:

Requests for grants are to be sent to Jon Finney, The Van Buren Foundation, Inc., P.O. Box 475 , Keosauqua, Iowa 52565. Telephone (319) 293-3129 during regular business hours. Applicants should submit requests in written form detailing the purpose of the grant, cost of improvements to be made, and the time frame in which the funds will be used. The applicant must be eligible to receive tax exempt funds. No funds shall be awarded to any individual or organization wherein pecuniary profits may be obtained. The foundation grant must not be the sole or complete funds vested in any project. It is necessary that matching funds or some other resource such as material or labor be acquired by the person, persons, or organization requesting the grant.

The Board of Directors of The Van Buren Foundation meets at least twice each year to review grant applications. These written requests are then acted upon at a scheduled meeting pursuant to notice.

In awarding these grants, the Foundation gives preference to requests from organizations, which benefit Van Buren County, Iowa.

**THE VAN BUREN FOUNDATION, INC.
42-6062589
2012**

FORM 990-PF

Part XV, Line 2, Information Regarding Grant and Loan Program

Educational Grants:

The scholarship committee mails applications for scholarships to all graduating seniors attending Van Buren Community High School and Harmony High School.

Any other requests for applications for educational grants or loans can be sent to George Manning, The Van Buren Foundation, Inc., Community First Bank, Keosauqua, Iowa 52565. Telephone (319) 293-3794 during regular business hours.

Educational loans are made by a grant committee to medical and healthcare students from Van Buren County.

The educational grants are memorials or awards given to students meeting certain requirements and are chosen by a scholarship committee made up of members of the Foundation and staff members of the Van Buren Community School and Harmony School.

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

Continued

Information about Officers, Directors, Trustees, Etc.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
-------------------------	--	--	--	--

Total

0. 0. 0.

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

Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of recipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year				
VAN BUREN COUNTY CONSERVATION BOARD 816 FRANKLIN ST KEOSAUQUA IA 52565	NONE	PUBLIC	PICKUP TRUCK	Person or <input type="checkbox"/> Business <input type="checkbox"/> 7,500.
CHRIST UNITED METHODIST CHURCH 14491 HIGHWAY 98 DOUDS IA 52551	NONE	PUBLIC	REMODEL KITCHEN	Person or <input type="checkbox"/> Business <input type="checkbox"/> 12,500.
VAN BUREN TRAILS ASSOCIATION P O BOX 327 KEOSAUQUA IA 52565	NONE	PUBLIC	TRAILS PLAZA	Person or <input type="checkbox"/> Business <input type="checkbox"/> 20,000.
VAN BUREN RECREATION AREA 217 RIVERVIEW DR KEOSAUQUA IA 52565	NONE	PUBLIC	MOWER AND PUMP	Person or <input type="checkbox"/> Business <input type="checkbox"/> 15,000.
FARMINGTON EMS P.O. BOX 554 FARMINGTON IA 52626	NONE	PUBLIC	NEW AMBULANCE	Person or <input type="checkbox"/> Business <input type="checkbox"/> 25,000.
VAN BUREN COUNTY HISTORICAL SOCIETY 12005 BRIDGE ST SELMA IA 52588	NONE	PUBLIC	WELCOME CENTER MAINTENANCE FUNDS	Person or <input type="checkbox"/> Business <input type="checkbox"/> 10,000.
CITY OF BONAPARTE CITY HALL BONAPARTE IA 52620	NONE	PUBLIC	BAND SHELL REPAIRS	Person or <input type="checkbox"/> Business <input type="checkbox"/> 1,200.
CITY OF BONAPARTE MAINSTREET CITY HALL BONAPARTE IA 62620	NONE	PUBLIC	BAND SHELL REPAIRS	Person or <input type="checkbox"/> Business <input type="checkbox"/> 3,000.
BIRMINGHAM PUBLIC LIBRARY 310 E MAIN ST BIRMINGHAM, IA 52535	NONE	PUBLIC	RALPH SHOTT MEMORIAL	Person or <input type="checkbox"/> Business <input type="checkbox"/> 337.
OAK GROVE CHURCH 16106 HAWK DRIVE DOUDS IA 52551	NONE	PUBLIC	REHAB OF CHURCH BASEMENT	Person or <input type="checkbox"/> Business <input type="checkbox"/> 2,000.

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

Continued

Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foun- dation status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year				
VAN BUREN COUNTY EXTENSION SERVICE 200 DODGE ST KEOSAUQUA, IA 52565	NONE	PUBLIC	4-H ENROLLMENT AND ENTRANCE FEES	Person or <input type="checkbox"/> Business <input type="checkbox"/> 4,000.
VAN BUREN CO. CONSERVATION BOARD 816 FRANKLIN ST KEOSAUQUA IA 52565	NONE	PUBLIC	BENTONSPORT IRA CORN HOUSE RENOVATION	Person or <input type="checkbox"/> Business <input type="checkbox"/> 5,000.
CITY OF KEOSAUQUA CITY HALL 801 1ST ST KEOSAUQUA IA 52565	NONE	PUBLIC	PUBLIC POOL REPAIRS	Person or <input type="checkbox"/> Business <input type="checkbox"/> 7,000.
VAN BUREN CO EXTENSION 200 DODGE ST KEOSAUQUA, IA 52565	NONE	PUBLIC	SECOR AWARD	Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/> 55.
KEOSAUQUA PUBLIC LIBRARY 608 1ST ST KEOSAUQUA, IA 52565	NONE	PUBLIC	LAURA DAUGHRITY MEMORIAL-ANNUAL	Person or <input type="checkbox"/> Business <input type="checkbox"/> 188.
KEOSAUQUA FIRE DEPARTMENT 104 CASS ST KEOSAUQUA, IA 52565	NONE	PUBLIC	LAURA DAUGHRITY MEMORIAL -ANNUAL	Person or <input type="checkbox"/> Business <input type="checkbox"/> 188.
KEOSAUQUA HISTORICAL SOCIETY LOCAL KEOSAUQUA, IA 52565	NONE	PUBLIC	LAURA DAUGHRITY MEMORIAL -ANNUAL	Person or <input type="checkbox"/> Business <input type="checkbox"/> 188.
PURDOM CEMETARY LOCAL KEOSAUQUA IA 52565	NONE	PUBLIC	LAURA DAUGHRITY MEMORIAL-ANNUAL	Person or <input type="checkbox"/> Business <input type="checkbox"/> 1,503.
FELLOWS CEMETARY LOCAL KEOSAUQUA IA 52565	NONE	PUBLIC	LAURA DAUGHRITY MEMORIAL-ANNUAL	Person or <input type="checkbox"/> Business <input type="checkbox"/> 1,503.
CONGREGATIONAL UNITED CHURCH OF CHRIST 401 VAN BUREN ST KEOSAUQUA, IA 52565	NONE	PUBLIC	LAURA DAUGHRITY MEMORIAL-ANNUAL	Person or <input type="checkbox"/> Business <input type="checkbox"/> 3,006.
VAN BUREN COUNTY HOSPITAL 304 FRANKLIN ST KEOSAUQUA, IA 52565	NONE	PUBLIC	LAURA DAUGHRITY MEMORIAL-ANNUAL	Person or <input type="checkbox"/> Business <input type="checkbox"/> 1,754.
VAN BUREN GOOD SAMARITAN HOME 819 COUNTRY LANE RD KEOSAUQUA, IA 52565	NONE	PUBLIC	LAURA DAUGHRITY MEMORIAL-ANNUAL	Person or <input type="checkbox"/> Business <input type="checkbox"/> 1,754.
VAN BUREN PUBLIC HEALTH 905 BROAD ST KEOSAUQUA, IA 52565	NONE	PUBLIC	LAURA DAUGHRITY MEMORIAL -ANNUAL	Person or <input type="checkbox"/> Business <input type="checkbox"/> 1,754.
KYLIE HARLAN 1562 BROAD ST KEOSAUQUA IA 52565	NONE	N/A	EDUCATIONAL GRANT	Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/> 545.
KYLE JOHNSON 407 FIRST ST KEOSAUQUA IA 52565	NONE	N/A	EDUCATIONAL GRANT	Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/> 1,000.

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

Continued

Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foun- dation status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year				
JACOB WOLF 26376 225TH ST KEOSAUQUA IA 52565	NONE	N/A	EDUCATIONAL GRANT	Person or Business <input checked="" type="checkbox"/> 1,000.
JORDAN HAGANS P.O. BOX 18 BIRMINGHAM IA 52535	NONE	N/A	EDUCATIONAL GRANTS	Person or Business <input checked="" type="checkbox"/> 2,500.
KALI JOHNSON 407 FIRST ST KEOSAUQUA IA 52565	NONE	N/A	EDUCATIONAL GRANT	Person or Business <input checked="" type="checkbox"/> 3,000.
JOSH DEJONG 23829 DEER AVE. MILTON IA 52570	NONE	N/A	EDUCATIONAL GRANT	Person or Business <input checked="" type="checkbox"/> 500.
DALTON STINE 220 W. CEDAR ST BIRMINGHAM IA 52535	NONE	N/A	EDUCATIONAL GRANT	Person or Business <input checked="" type="checkbox"/> 420.
TARRAH SYFERT 607 FRANKLIN ST KEOSAUQUA IA 52565	NONE	N/A	EDUCATIONAL GRANT	Person or Business <input checked="" type="checkbox"/> 3,000.
CALLIE STRIBLING 24202 LARK AVE KEOSAUQUA IA 52565	NONE	N/A	EDUCATIONAL GRANT	Person or Business <input checked="" type="checkbox"/> 500.
MONICA CHAPUIS 22054 210TH ST KEOSAUQUA IA 52565	NONE	N/A	EDUCATIONAL GRANT	Person or Business <input checked="" type="checkbox"/> 500.
MARSHALL L. STEVENS 134 E. COMMERCIAL ST HILLSBORO IA 52630	NONE	N/A	EDUCATIONAL GRANT	Person or Business <input checked="" type="checkbox"/> 200.
MARIA HENDRICKS 302 5TH ST CANTRIL IA 52542	NONE	N/A	EDUCATIONAL GRANT	Person or Business <input checked="" type="checkbox"/> 1,000.
COLIN WEAVER P.O. BOX 1982 FAIRFIELD, IA 52556	NONE	N/A	EDUCATIONAL GRANT	Person or Business <input checked="" type="checkbox"/> 2,500.
ABBEY GOLDEN 13967 PEDRICK ST DOUDS IA 52551	NONE	N/A	EDUCATIONAL GRANT	Person or Business <input checked="" type="checkbox"/> 3,000.
KEOSAUQUA SENIOR CITIZENS CENTER 801 FRONT ST KEOSAUQUA, IA 52565	NONE	PUBLIC	LAURA DAUGHERITY MEMORIAL	Person or Business <input type="checkbox"/> 188.
CALVIN MERTENS 100 HILLTOP RD KEOSAUQUA IA 52565	NONE	N/A	EDUCATIONAL GRANT	Person or Business <input checked="" type="checkbox"/> 3,000.
BRYCE PHILLIPS 24344 OSAGE AVE KEOSAUQUA IA 52565	NONE	N/A	EDUCATIONAL GRANT	Person or Business <input checked="" type="checkbox"/> 500.

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

Continued

Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year				
<u>KASHA KITE</u> <u>304 MAIN ST</u> <u>BONAPARTE IA 52620</u>	<u>NONE</u>	<u>N/A</u>	<u>MEDICAL EDUCATION</u> <u>LOAN PROGRAM</u> <u>DEBT FORGIVENESS</u>	Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/> 4,123.
<u>KELLY YOUNKER</u> <u>111 E. 2ND ST</u> <u>CANTRIL IA 52542</u>	<u>NONE</u>	<u>N/A</u>	<u>MEDICAL EDUCATION</u> <u>LOAN PROGRAM</u> <u>DEBT FORGIVENESS</u>	Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/> 4,398.
<u>MARCHELLE MURRAY</u> <u>P.O. BOX 212</u> <u>KEOSAUQUA IA 52565</u>	<u>NONE</u>	<u>N/A</u>	<u>MEDICAL EDUCATION</u> <u>LOAN PROGRAM</u> <u>DEBT FORGIVENESS</u>	Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/> 5,145.
<u>PITTSBURG CEMETARY</u> <u>LOCAL</u> <u>KEOSAUQUA IA 52565</u>	<u>NONE</u>	<u>PUBLIC</u>	<u>CEMETARY</u> <u>MAINTENANCE</u>	Person or <input type="checkbox"/> Business <input type="checkbox"/> 218.
<u>VAN BUREN CO EXTENSION SERVICE</u> <u>200 DODGE ST</u> <u>KEOSAUQUA IA 52565</u>	<u>NONE</u>	<u>PUBLIC</u>	<u>4-H TRIP</u>	Person or <input type="checkbox"/> Business <input type="checkbox"/> 1,000.
<u>KEOSAUQUA CHAMBER OF COMMERCE</u> <u>P.O. Box 511</u> <u>KEOSAUQUA IA 52565</u>	<u>NONE</u>	<u>PUBLIC</u>	<u>UPDATE</u> <u>WEBSITE</u>	Person or <input type="checkbox"/> Business <input type="checkbox"/> 595.

Total

163,262.

Form 990-PF, Page 10, Part XV, line 3b

Line 3b statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
b Approved for future payment				
<u>VILLAGES FOLK SCHOOL</u> <u>809 1ST ST</u> <u>KEOSAUQUA IA 52565</u>	<u>NONE</u>	<u>PUBLIC</u>	<u>GREAT PLACES</u> <u>BUILDING</u> <u>RENOVATIONS</u>	Person or <input type="checkbox"/> Business <input type="checkbox"/> 10,000.
<u>CITY OF KEOSAUQUA</u> <u>CITY HALL 804 1ST ST</u> <u>KEOSAUQUA IA 52565</u>	<u>NONE</u>	<u>PUBLIC</u>	<u>WARNING SIREN</u>	Person or <input type="checkbox"/> Business <input type="checkbox"/> 5,000.
<u>VAN BUREN CO EXTENSION SERVICE</u> <u>200 DODGE ST</u> <u>KEOSAUQUA IA 52565</u>	<u>NONE</u>	<u>PUBLIC</u>	<u>4-H TRIPS</u>	Person or <input type="checkbox"/> Business <input type="checkbox"/> 2,500.

Form 990-PF, Page 10, Part XV, line 3b

Continued

Line 3b statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
b <i>Approved for future payment</i>				
<u>KEOSAUQUA CHAMBER OF COMMERCE</u> <u>P O BOX 511</u> <u>KEOSAUQUA IA 52565</u>	NONE	PUBLIC	<u>DOWNTOWN BANNERS</u>	Person or <input type="checkbox"/> Business <input type="checkbox"/> 2,500.
<u>HARMONY COMMUNITY SCHOOLS</u> <u>33727 RT J40</u> <u>FARMINGTON IA 52626</u>	NONE	PUBLIC	<u>SPORTS COMPLEX</u> <u>IMPROVEMENTS</u>	Person or <input type="checkbox"/> Business <input type="checkbox"/> 10,000.
<u>BENTONSPORT IMPROVEMENT ASSN</u> <u>21953 SANFORD ST</u> <u>KEOSAUQUA IA 52565</u>	NONE	PUBLIC	<u>STONE HOUSE</u> <u>RESTORATION</u>	Person or <input type="checkbox"/> Business <input type="checkbox"/> 5,000.
<u>FRIENDS OF LACEY STATE PARK</u> <u>20360 RTE J40</u> <u>KEOSAUQUA IA 52565</u>	NONE	PUBLIC	<u>PARK CAMPING</u> <u>SITES</u>	Person or <input type="checkbox"/> Business <input type="checkbox"/> 15,000.
<u>KEOSAUQUA ROTARY CLUB</u> <u>P.O. BOX 475</u> <u>KEOSAUQUA IA 52565</u>	NONE	PUBLIC	<u>VAN BUREN SCHOOL</u> <u>BAND EQUIPMENT</u>	Person or <input type="checkbox"/> Business <input type="checkbox"/> 1,000.
<u>VAN BUREN COUNTY HOSPITAL</u> <u>304 FRANKLIN ST</u> <u>KEOSAUQUA IA 52565</u>	NONE	PUBLIC	<u>DIGITAL MAMMOGRAPHY</u> <u>UNIT</u>	Person or <input type="checkbox"/> Business <input type="checkbox"/> 70,000.
<u>DOUDS HISTORICAL PRESERVATION SOCIETY</u> <u>17248 HWY 1</u> <u>KEOSAUQUA IA 52565</u>	NONE	PUBLIC	<u>STRUCTURAL REPAIRS</u> <u>TO OAK GROVE</u> <u>SCHOOL</u>	Person or <input type="checkbox"/> Business <input type="checkbox"/> 11,000.
<u>VILLAGES OF VAN BUREN</u> <u>902 4TH ST</u> <u>KEOSAUQUA IA 52565</u>	NONE	PUBLIC	<u>FANTASTIC</u> <u>ROAD TRIPS OF</u> <u>SE IOWA BROCHURE</u>	Person or <input type="checkbox"/> Business <input type="checkbox"/> 4,600.
<u>VAN BUREN COUNTY HEALTH DEPARTMENT</u> <u>905 BROAD ST</u> <u>KEOSAUQUA IA 52565</u>	NONE	PUBLIC	<u>SOFTWARE TO SHARE</u> <u>ELECTRONIC MEDICAL</u> <u>RECORDS WITH HOSPITAL</u>	Person or <input type="checkbox"/> Business <input type="checkbox"/> 6,000.
<u>VAN BUREN COUNTY AGRICULTURAL ASSOCIATION</u> <u>P O BOX 174</u> <u>KEOSAUQUA IA 52565</u>	NONE	PUBLIC	<u>LIVESTOCK</u> <u>BUILDING</u>	Person or <input type="checkbox"/> Business <input type="checkbox"/> 60,000.
<u>CITY OF BONAPARTE</u> <u>CITY HALL</u> <u>BONAPARTE IA 62620</u>	NONE	PUBLIC	<u>NEW RESTROOMS</u> <u>AT BALL FIELD</u>	Person or <input type="checkbox"/> Business <input type="checkbox"/> 2,500.

Total

205,100.

Form 990-PF, Page 1, Part I

Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Graf & Company, CPAS	ACCOUNTING SERVICES	6,850.	3,425.	3,425.	3,425.

Form 990-PF, Page 1, Part I
Line 16b - Accounting Fees

Continued

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
RIVERVIEW	ACCOUNTING SERVICES	180.	90.	90.	90.
Total		<u>7,030.</u>	<u>3,515.</u>	<u>3,515.</u>	<u>3,515.</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
COCA COLA COMPANY	3,450.	145,000.
EXXON MOBIL CORP	29,447.	123,334.
US BANCORP	31,646.	95,980.
GENERAL ELECTRIC COMPANY	7,793.	159,524.
WELLS FARGO & CO	40,096.	61,866.
PFIZER, INC	41,405.	59,287.
VANGUARD WELLESLEY INCOME FUND	763,243.	926,182.
VANGUARD STAR FUND	407,684.	453,029.
SMALLCAP WORLD FUND CL A	85,574.	106,536.
NEW WORLD FUND CL A	189,520.	240,521.
CAPITAL INCOME BUILDER FUND	224,899.	218,177.
AMERICAN MUTUAL FUND CL A	320,688.	346,498.
AMCAP FUND CL A	399,717.	446,989.
AMERICAN BALANCED FUND	4,522.	4,738.
INTERMEDIATE BOND FUND OF AMERICA	199,921.	199,631.
NEW PERSPECTIVE FUND	250,581.	249,942.
FRANKLIN GROWTH FUND	290,000.	291,035.
FRANKLIN TOTAL RETURN FUND	400,000.	392,030.
TEMPLETON GLOBAL BOND FUND	214,844.	210,487.
FRANKLIN RISING DIVIDEND FUND	200,000.	200,159.
Total	<u>4,105,030.</u>	<u>4,930,945.</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
CHESAPEAKE & POTOMAC TEL DEBENTURE	100,000.	101,662.
GMAC SMART NOTES	100,000.	98,729.
Total	<u>200,000.</u>	<u>200,391.</u>

Form 990-PF, Page 2, Part II, Line 14

L-14 Stmt

Line 14b - Description of Land, Buildings, and Equipment	(a) Cost/Other Basis	(b) Accumulated Depreciation	(c) Book Value
LAND	1,000.	0.	1,000.
BUILDING & IMPROVEMENTS	1,217,951.	604,603.	613,348.
FURNITURE, FIXTURES & EQUIPMENT	74,002.	66,753.	7,249.
Total	<u>1,292,953.</u>	<u>671,356.</u>	<u>621,597.</u>

Form 990-PF, Page 2, Part II, Line 15

Other Assets Stmt

Line 15 - Other Assets:	Beginning Year Book Value	End of Year	
		Book Value	Fair Market Value
DIVIDEND RECEIVABLE	296.	8,435.	8,435.
Total	<u>296.</u>	<u>8,435.</u>	<u>8,435.</u>