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DLN: 93493211008143

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

The organization may have to use a copy of this return to satisfy state reporting requirements

2012

OMB No 1545-0047

Open to Public Inspection

, 2012, and ending 12-31-2012 A For the 2012 calendar year, or tax year beginning 01-01-2012 D Employer identification number B Check if applicable ABBOTT HOUSE FOUNDATION INC Address change 46-0379896 Doing Business As Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number Terminated City or town, state or country, and ZIP + 4 MITCHELL, SD 57301 _____Amended return Application pending G Gross receipts \$ 1,332,294 F Name and address of principal officer Is this a group return for ┌ Yes 🗸 No affiliates? **H(b)** Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ **Website: ►** WWW ABBOTTHOUSE ORG L Year of formation M State of legal domicile Part I Summary Briefly describe the organization's mission or most significant activities PROVIDE SUPPORT TO ABBOTT HOUSE, INC Activities & Governance 2 Check this box 🛏 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . 8 Number of independent voting members of the governing body (Part VI, line 1b) 4 8 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 0 6 Total number of volunteers (estimate if necessary) . . . 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a \boldsymbol{b} Net unrelated business taxable income from Form 990-T, line 34 $\,$ 7b **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . . 491,191 204.346 0 Program service revenue (Part VIII, line 2g) . 59,808 113.000 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 550,999 317,346 236,504 13 611,047 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 0 14 Benefits paid to or for members (Part IX, column (A), line 4) . . Salaries, other compensation, employee benefits (Part IX, column (A), lines **15** 0 **Expenses** 16a Professional fundraising fees (Part IX, column (A), line 11e) . 0 b Total fundraising expenses (Part IX, column (D), line 25) \blacktriangleright 7,985 **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e). 35,831 23,030 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 646,878 259,534 18 19 Revenue less expenses Subtract line 18 from line 12 -95,879 57,812 t Assets or id Balances **Beginning of Current End of Year** 3,110,072 20 Total assets (Part X, line 16) . 2,880,733 22,046 21 Total liabilities (Part X, line 26) . . 22,046 22 Net assets or fund balances Subtract line 21 from line 20 2,858,687 3,088,026 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2013-05-15 Signature of office Sign Here ERIC KLOOZ EXECUTIVE DIRECTOR Type or print name and title Print/Type preparer's name JAY TOLSMA CPA Date 2013-07-09 Preparer's signature Check self-employed Paid Firm's name FLO PROF LLC Firm's EIN F

MITCHELL, SD 57301

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

Firm's address PO BOX 249

Preparer

Use Only

Phone no (605) 996-7717

✓ Yes ☐ No

Part IV Checklist of Required Schedules

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

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

·C	Statements Regarding Other 1RS Fillings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V		Yes	. l No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 1			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		
la	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		14 0
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
ia.	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5c 6a		No
	organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
,	were not tax deductible?	6b		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
Ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			NI.
d	file Form 8282?	7c		No
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
)	Sponsoring organizations maintaining donor advised funds.	- -		
a	Did the organization make any taxable distributions under section 4966?	9a		
u b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
-	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
}	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	į Į	ļ	
а	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ection A. Governing Body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		res	No_
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14		Νο
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		No
	Other officers or key employees of the organization	15b		Νo
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply			

- - Own website Another's website Upon request Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization FKIMBERLY MOORE 909 COURT MERRILL MITCHELL, SD (605) 996-2486

Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

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

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

(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than son is	one bot rect	not box h ar	chec (, unle n offic ustee	ess er e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) BOB SMETANA	1 00	х						0	0	(
SEC/TREAS (2) GOPAL VYAS	1 00									
PRESIDENT		×						0	0	(
(3) ROD COLVIN	1 00	<u> </u>								
DIRECTOR		Х						0	0	(
(4) JACK BUSCHELMAN	1 00	×						0	0	(
DIRECTOR (F) CENTE NUESER								_	_	
(5) GENE JUFFER	1 00	x						0	0	(
VP (6) BOYD BLUMER	1 00									
DIRECTOR		X						0	0	(
(7) TONA ROZUM	1 00	х						0	0	(
DIRECTOR								0	U	(
(8) PAM NIELSON BOLINE	1 00	x						0	0	(
DIRECTOR										

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

	(A) (B) (C) (D) (E)									(E)	T	(F)		
	Name and Title	Average hours per	Position (do not check more than one box, unless			Reporta compens		Reportable compensation	_	Estima mount of				
		week (list	perso	n is	both	and	officer	•	from th	ne	from related	- -	compens	ation
		for related 2/1000 MICC)						organizations (W 2/1099-MISC)		from t rganızatı				
		organizations below	Individual trustae or director	Institutional Trustee	Office	Key employee	Highest compensated employee	Former					relate organiza	
		dotted line)	2 2 2 2	<u>∏</u>	<u> -</u>) P) () () () () () () () () () () () () ()	单					J	
			trus	<u>5</u>) ee	을							
			8	Til St.			ensa							
				ď			# ed							
												+		
												-		
1b	Sub-Total			•				►						
C	Total from continuation sheet	s to Part VII, S	ection A	١.		•		•						
d						•	•	•						
2	Total number of individuals (in \$100,000 of reportable compe					liste	d abov	e) w	ho received	more th	ian			
													Yes	No
3	Did the organization list any fo						emplo	yee	, or highest o	ompen	sated employee			
	on line 1a? If "Yes," complete S						• .	•		•		3		N o
4	For any individual listed on line organization and related organ													
	ındıvıdual		• •		•	•		•				4		No
5	Did any person listed on line 1 services rendered to the organ									nization 	or individual for	_		
			5.1101							_ •	· · ·	5		No_
	ection B. Independent Co											_		
1	Complete this table for your five compensation from the organization												tax year	
		(A) lame and business	-						<u>-</u>		(B) cription of services		(C)	
	IV	Lattic and Dublic55								Des	Supplier of Services	\pm	Сотпрен	544011
												+		
												#		
									ı			- 1		

2 Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

Part V	1 1	Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII											
		Check if Schedule O contains a r	esponse to any question	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514						
0	1a	Federated campaigns	1a										
Contributions, Giffs, Grants and Other Similar Amounts	ь	Membership dues	1b										
Gra	С	Fundraising events	1c										
IS.	_												
Giff ilar	d	Related organizations	1d										
i, š	e	Government grants (contributions)	1e										
tior r S	f	All other contributions, gifts, grants, and similar amounts not included above	1f 204,346	į	j								
bu the		Noncash contributions included in lines											
ntri d O	g	1a-1f \$											
Col	h	Total. Add lines 1a-1f		204,346									
			Business Code										
Program Serwce Revenue	2a												
Fe v.	ь		_										
eg	С		_										
er vi	d		_										
Š	e		_										
jran	f	All other program service revenu	_ e										
₹													
	g 3	Total. Add lines 2a-2f											
	3	Investment income (including divaded and other similar amounts)		64,041			64,041						
	4	Income from investment of tax-exempt	bond proceeds										
	5	Royalties	🛌										
		(ı) Real	(II) Personal										
	6a	Gross rents											
	b	Less rental expenses											
	С	Rental income or (loss)											
	d	Net rental income or (loss)											
		(ı) Securities	(II) Other										
	7a	Gross amount from sales of 1,058,1 assets other than inventory	18 5,789										
	ь	Less cost or	40										
		other basis and 1,014,96 sales expenses											
	С	Gain or (loss) 43,1	·										
	d	Net gain or (loss)		48,959	43,170		5,789						
Other Revenue	8a	Gross income from fundraising events (not including \$ of contributions reported on line See Part IV, line 18	1c)										
<u>.</u>			a										
를	C B	Less direct expenses Net income or (loss) from fundrai											
)		Gross income from gaming activi See Part IV, line 19											
			a										
	Ь	Less direct expenses											
	с 10а	Net income or (loss) from gaming Gross sales of inventory, less	gacuviues										
	va	returns and allowances .											
			a										
	ь		b										
	С	Net income or (loss) from sales of											
		Miscellaneous Revenue	Business Code										
	11a		_										
	Ь		_										
	С		_										
	d	All other revenue											
	е	Total. Add lines 11a-11d											
	12	Total revenue. See Instructions		317,346	43,170	·	69,830						
			l l	527,510	.5,1,0								

Form 990 (2012) Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns All	other organizati	ons must comp	olete column (A)	
	Check if Schedule O contains a response to any question in this Pai	t IX			
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	236,504	236,504		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying		1		
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	INVESTMENT FEES	11,121		11,121	
b	MOTORCYCLE RAFFLE	7,680			7,680
c	OTHER	2,874		2,569	305
d	SCHOLARSHIPS	1,000		1,000	
е	All other expenses	355		355	
25	Total functional expenses. Add lines 1 through 24e	259,534	236,504	15,045	7,985
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Form 990 (2012) Page **11** Part X **Balance Sheet** Check if Schedule O contains a response to any question in this Part X (B) (A) End of year Beginning of year Cash—non-interest-bearing 58,509 65,068 1 1 2 301,174 2 416,940 Savings and temporary cash investments 169,203 76,724 3 Pledges and grants receivable, net 3 4 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Assets 6 7 8 8 9 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 10b Less accumulated depreciation 10c

	11	Investments—publicly traded securities	2,351,847	11	2,551,340
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	2,880,733	16	3,110,072
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
)	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			_
}		persons Complete Part II of Schedule L		22	
i	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule	22.046		22.040
		D	22,046	25	22,046
	26	Total liabilities. Add lines 17 through 25	22,046	26	22,046
		Organizations that follow SFAS 117 (ASC 958), check here ► ✓ and complete lines 27 through 29, and lines 33 and 34.			
	27	Unrestricted net assets	1,662,908	27	3,088,026
	28	Temporarily restricted net assets	1,086,439	28	
	29	Permanently restricted net assets	109,340	29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	2,858,687	33	3,088,026
	34	Total liabilities and net assets/fund balances	2,880,733	34	3,110,072
				F	orm 990 (2012)

Net Assets or Fund Balances

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3	317,346
2	Total expenses (must equal Part IX, column (A), line 25)	2			259,534
3	Revenue less expenses Subtract line 2 from line 1	3			57,812
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			358,687
5	Net unrealized gains (losses) on investments	5			.71,527
6	Donated services and use of facilities	6			•
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		3,0	88,026
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	F Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		į !		
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	1			i.
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the readily or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

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As Filed Data -

DLN: 93493211008143

Employer identification number

OMB No 1545-0047

SCHEDULE A Public Cl

(Form 990 or 990EZ)

Name of the organization

ABBOTT HOUSE FOUNDATION INC

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

2012

Open to Public Inspection

Par	t T	Reas	on for Pu	ıblic Charity Sta	tus (All or	nanization	is must com	nlete this	46-0379		ıs
				te foundation becaus						iiisti uctioii	
1	Г			on of churches, or a							
2				in section 170(b)(1							
3				perative hospital se				on 170(b)(1	L)(A)(iii).		
4				h organization opera						(1)(A)(iii).	Enter the
		hospita	al's name, c	ity, and state							
5	Γ	An org	anızatıon op	erated for the benefi	t of a colleg	e or univers	ity owned or	operated by	a governme	ntal unit des	scribed in
		sect ior	170(b)(1)((A)(iv). (Complete P	art II)						
6	Γ	A fede	ral, state, or	· local government o	r governmen	ital unit des	cribed in sec	tion 170(b)((1)(A)(v).		
7 8	<u></u>	descril	oed in sectio	at normally receives on 170(b)(1)(A)(vi). : described in sectio r	(Complete	Part II)	• •		iental unit or	from the ge	neral public
9	<u>'</u>		-	at normally receives			-	-	ibutions mor	nharchin fac	os and gross
9	'	_		rities related to its e					=	=	=
				oss investment inco							
				ganızatıon after June						. tax/iioiii i	74311163363
10	\vdash			ganized and operated							
11	<u>'</u>	_		ganized and operated							t the nurnoses of
	•	one or the box	more public	ly supported organiz ibes <u>th</u> e type of supp	ations desc oorting organ	ribed in sec nization and	tion 509(a)(: complete lin	l) or sectior es 11e thro	n 509(a)(2) : ugh 11h	See section	509(a)(3). Check
е	Γ	othert	_	ox, I certify that the ion managers and ot	_			•			•
f			organization this box	received a written d	eterminatior	n from the II	RS that it is a	Type I, Ty	pe II, or Typ	e III suppoi	ting organization,
g				2006, has the organ	ızatıon acce	pted any gif	ft or contribut	tion from an	y of the		
			ng persons?	rectly or indirectly o	controls outl	har alana ar	togothorwat	narcana di	accribad in (i	. \	Yes No
				governing body of th				i persons ut	escribed iii (i		Yes No
				er of a person descr		_)II·				g(ii)
			•	lled entity of a perso	• •		ahove2				g(iii)
h		• •		ng information about		., .,				[9(/
••		110114		ng mormation about	the support	.ca organiza	(3)				
SI	uppor	ne of (ii) EIN (iii) Type of organization (described on lines 1 - 9 above or IRC section		(iv) Is organizat col (i) lis your gove docume	tion in sted in erning	(v) Did yo the organ in col (i) suppo	ization of your	(vi) Is organiza col (i) or in the l	tıon ın ganızed	(vii) A mount of monetary support	
				(see instructions))				_			
				instructions))	Yes	No	Yes	No	Yes	No	
Total				l	1	1					

instructions

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🕨 1 Gifts, grants, contributions, and membership fees received (Do not 218,064 1,034,565 457,294 491,191 204,346 2,405,460 include any "unusual grants ") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 218,064 1,034,565 457,294 491,191 204,346 2,405,460 4 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 45,107 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column **Public support.** Subtract line 5 from 2,360,353 line 4 Section B. Total Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 218,064 1,034,565 457,294 491,191 204,346 2,405,460 Amounts from line 4 Gross income from interest, dividends, payments received on 93,797 52,469 54,734 74,133 64,041 339,174 securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support (Add lines 7 2,744,634 through 10) **12** Gross receipts from related activities, etc (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check 13 Section C. Computation of Public Support Percentage Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) 14 86 000 % Public support percentage for 2011 Schedule A, Part II, line 14 15 83 530 % 16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ┢┎ and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test – 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

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

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

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

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

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DLN: 93493211008143

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

.cmul	TOTAL DELIVER F ALL ACTI LO FOII	il 990. F See separate ilistructions.		Zilopeetion
	ne of the organization DTT HOUSE FOUNDATION INC			oloyer identification number
Pa	organizations Maintaining Donor Advorganization answered "Yes" to Form 990			
		(a) Donor advised funds		(b) Funds and other accounts
L	Total number at end of year			
	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
ļ	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or	_	or adv	rsed Yes No
5	Did the organization inform all grantees, donors, and do used only for charitable purposes and not for the benef conferring impermissible private benefit?			
Pai	t II Conservation Easements. Complete if	the organization answered "Yes" t	o Forn	n 990, Part IV, line 7.
·	Purpose(s) of conservation easements held by the organization of land for public use (e.g., recreation) Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a	or education) Preservation of an Preservation of a	certifie	d historic structure
	easement on the last day of the tax year			
				Held at the End of the Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
C	Number of conservation easements on a certified histo	` '	2c	
d	Number of conservation easements included in (c) acq historic structure listed in the National Register		2d	
3	Number of conservation easements modified, transferr	ed, released, extinguished, or terminate	ed by th	ne organization during
	the tax year ►			
	Number of states where property subject to conservati	on easement is located ►		
	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?	he periodic monitoring, inspection, hand	dling of	f violations, and Yes No
	Staff and volunteer hours devoted to monitoring, inspec	cting, and enforcing conservation easer	ments o	during the year
,	A mount of expenses incurred in monitoring, inspecting	, and enforcing conservation easement	s durın	g the year
	▶ \$			
1	Does each conservation easement reported on line 2 (and section $170(h)(4)(B)(II)$?	l) above satisfy the requirements of sec	tion 1	70(h)(4)(B)(ı)
)	In Part XIII, describe how the organization reports cor balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the organization's financial nts	stater	ments that describes
ar	Organizations Maintaining Collection Complete if the organization answered "Y	s of Art, Historical Treasures, es" to Form 990, Part IV, line 8.	or Ot	her Similar Assets.
a	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide, in Part XIII, the text of the footnote t	ts held for public exhibition, education,	or rese	earch in furtherance of public
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide the following amounts relating to these	ts held for public exhibition, education,		
	(i) Revenues included in Form 990, Part VIII, line 1			► \$
	(ii) Assets included in Form 990, Part X			► \$
	If the organization received or held works of art, historic following amounts required to be reported under SFAS			· · · · · · · · · · · · · · · · · · ·
a	Revenues included in Form 990, Part VIII, line 1			▶ \$
ь				
_	Assets included in Form 990, Part X			▶ \$

Part	Organizations Maintaining C	ollections of Art,	Hist	torio	cal Treas	ures, or C	ther	Similar Asse	ets (co	ntınued)
3	Using the organization's acquisition, acces collection items (check all that apply)	sion, and other records	s, che	eck a	any of the fo	llowing that	are a	significant use o	fits	
а	Public exhibition		d	Γ	Loan or exc	change prog	rams			
b	Scholarly research		e	Γ	Other					
С	☐ Preservation for future generations									
4	Provide a description of the organization's of Part XIII	collections and explain	how	they	further the	organızatıoı	ı's ex	empt purpose in		
5	During the year, did the organization solicit assets to be sold to raise funds rather than								Yes	┌ No
Par	Escrow and Custodial Arran Part IV, line 9, or reported an a					n answere	d "Ye	es" to Form 99	0,	
1a	Is the organization an agent, trustee, custo included on Form 990, Part X?	dıan or other ıntermed	ıary '	for c	ontributions	or other ass	ets n		Yes	┌ No
b	If "Yes," explain the arrangement in Part X.	III and complete the fo	llow	ing ta	able	[Amo	unt	
c	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	Form 990, Part X, line 2	21?					Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	II Check here if the ex	xplaı	natio	n has been	provided in I	art X	III		Γ
Pa	t V Endowment Funds. Complete				ed "Yes" to	Form 990	Part	t IV, line 10.		
		(a)Current year	(b) F	Prior y		*		Three years back (e) Four y	ears back
1a	Beginning of year balance	109,340			1 560	107,00 78	+	107.000		
b	Contributions				1,560	78	<u> </u>	107,000		
С	Net investment earnings, gains, and losses	5								
d	Grants or scholarships									
е	Other expenditures for facilities and programs									
f	Administrative expenses									
g	End of year balance	109,340			109,340	107,78	0	107,000		
2	Provide the estimated percentage of the cu	rrent year end balance	(lıne	e 1g,	column (a))	held as				
а	Board designated or quasi-endowment 🕨									
b	Permanent endowment ► 100 000 %									
c	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c sho	ould equal 100%								
За	Are there endowment funds not in the poss	ession of the organizati	ıon t	hat a	re held and	admınıstere	d for t	the		
	organization by							2-42	Yes	No
	(i) unrelated organizations			•			•	3a(i) 3a(ii)	_	No No
ь	If "Yes" to 3a(II), are the related organizati						٠. ٠	3b		<u> </u>
4	Describe in Part XIII the intended uses of									
Par	t VI Land, Buildings, and Equipm	ent. See Form 990,	, Pai	rt X,	lıne 10.					
	Description of property				a) Cost or othe sıs (ınvestmen			(c) Accumulated depreciation	(d) B	ook value
1a	_and									
b	Buildings									
С	_easehold improvements									
d	Equipment									
	Other									
Tota	L Add lines 1a through 1e (Column (d) must	equal Form 990 Part X	colur	mn (F	3) line 10(c))	_		1	

Part VII Investments—Other Securities. Se	e Form 990, Part X, line 12	
(a) Description of security or category	(b) Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
Other		
T-t-1 (Caluma (h)	F	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		2
Part VIII Investments—Program Related. S (a) Description of investment type		
(a) Description of Investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		out of one of your manner value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	j -	
Part IX Other Assets. See Form 990, Part X,		
	IIIC 13.	
		(b) Book value
(a) Desc		(b) Book value
		(b) Book value
(a) Desc	ription	
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15.)	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Par	15.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of liability	15.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of liability Federal income taxes	15.) t X, line 25. (b) Book value	
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes DUE TO ABBOTT HOUSE, INC	15.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of liability Federal income taxes	15.) t X, line 25. (b) Book value	
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes DUE TO ABBOTT HOUSE, INC	15.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes DUE TO ABBOTT HOUSE, INC	15.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes DUE TO ABBOTT HOUSE, INC	15.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes DUE TO ABBOTT HOUSE, INC	15.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes DUE TO ABBOTT HOUSE, INC	15.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes DUE TO ABBOTT HOUSE, INC	15.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes DUE TO ABBOTT HOUSE, INC	15.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes DUE TO ABBOTT HOUSE, INC	15.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes DUE TO ABBOTT HOUSE, INC	15.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes DUE TO ABBOTT HOUSE, INC	15.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes DUE TO ABBOTT HOUSE, INC	15.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of liability Federal income taxes DUE TO ABBOTT HOUSE, INC	15.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes DUE TO ABBOTT HOUSE, INC	15.)	

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Identifier

1 2 a	Total revenue, gains, and other support per audited financial statements	1	488,873
	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а			
	Net unrealized gains on investments		
b	Donated services and use of facilities	1	
C	Recoveries of prior year grants	1	
d	Other (Describe in Part XIII)	1	
e	Add lines 2a through 2d	2e	171,527
3	Subtract line 2e from line 1	3	317,346
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)	1	
С	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	317,346
Part	Reconciliation of Expenses per Audited Financial Statements With Expense	s per	Return
1	Total expenses and losses per audited financial statements	1	259,534
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	259,534
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)		
С	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	259,534
Part	XIII Supplemental Information		

Return Reference

Explanation

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Schedule I (Form 990)

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

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

OMB No 1545-0047

DLN: 93493211008143

Department of the Treasury ► Attach to Form 990 **Inspection** Internal Revenue Service **Employer identification number** Name of the organization ABBOTT HOUSE FOUNDATION INC 46-0379896 **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (a) Name and address of **(b)** EIN (c) IRC Code section (d) Amount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant ıf applıcable valuation organization non-cash assistance or assistance grant cash or government assistance (book, FMV, appraisal, other) (1) ABBOTT HOUSE INC 46-0229822 236,504 SUPPORT OF PO BOX 700 MISSION 909 COURT MERRILL MITCHELL, SD 57301

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d) A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplemental Information.

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

Complete this part to provid	e the information required in Fart 1, 1	me 2, Fait III, Column (b), and any other additional information
Identifier	Return Reference	Explanation
	SCHEDULE I, PAGE 1, PART I, LINE 2	THE BOARD IS PROVIDED WITH FINANCIALS ON REGULAR BASIS TO REVIEW THE USE OF GRANT FUNDS

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493211008143

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2012

Open to Public

Inspection

Name of the organization
ABBOTT HOUSE FOUNDATION INC

Employer identification number

46-0379896

ldentifier	Return Reference	Explanation
ORGANIZATION'S PROCESS USED TO REVIEW FORM 990	FORM 990, PAGE 6, PART VI, LINE 11B	THE FORM 990 IS INITIALLY REVIEWED BY THE EXECUTIVE DIRECTOR FOR ACCURACY OF INFORMATION THE FORM IS THEN PRESENTED TO THE BOARD OF DIRECTORS FOR FINAL APPROVAL BEFORE SUBMISSION TO THE FEDERAL GOVERNMENT THE EXECUTIVE DIRECTOR HAS ALSO BEEN GRANTED AUTHORITY TO APPROVE THE SUBMISSION
ENFORCEMENT OF CONFLICTS POLICY	FORM 990, PAGE 6, PART VI, LINE 12C	SITUATIONS ARE REVIEWED ON ANNUAL BASIS TO DETERMINE ANY NEW OR CHANGED CONFLICTS OF INTEREST
GOVERNING DOCUMENTS DISCLOSURE EXPLANATION	FORM 990, PAGE 6, PART VI, LINE 19	THE ORGANIZATION PROVIDES THESE DOCUMENTS UPON REQUEST THE FORM 990 IS AVAILABLE ONLINE THROUGH THE IRS WEBSITE

ABBOTT HOUSE FOUNDATION INCAGY

Forms 1099 for 2012

1099-B Proceeds From Broker and Barter Exchange Transactions (OMB No. 1545-0715)

Copy B, For Recipient

A schedule of your net gains and losses is shown below. Although we have shown quantity sold on the sales with either two decimal places, as a whole number, or as a fractional share, all of these amounts will be filed with the IRS as whole numbers per IRS publication 1220 Please note that if you have applicable, we have shown IRC Section 988 translation gains and losses separately within the sales sections. Please note these gains or losses are not the tax cost has been adjusted for current year's return of capital. However, we have not made any adjustments to the cost basis of all partnerships If sold an asset for which we do not have cost basis information, it is either shown separately in the section entitled Cost Not Available or it may appear with a zero tax cost. Please review these carefully when preparing your return. Note also that an asterisk symbol (*) next to tax cost indicates that entitled to capital gains treatment. Rather, under IRC Section 988, they are either ordinary income or loss.

Proceeds from Short Term Covered Security Transactions

includes only sales of covered securities. If applicable, transactions subject to wash sale are shown separately. If wash sales are not shown separately, This category includes transactions that are short-term gain or loss on Form 1099-B, Box 1c. Form 1099-B, Box 6b is checked because this category your account has no wash sales in this category. For individual taxpayers, these transactions are reportable on Form 8949, Part I, Box A.

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\$1,922.44	\$0.00	\$1,922.44	93.06	\$20,993.06	\$22,915.50		n 8949, Part I, Box A	Report each transaction on Form 8949, Part I, Box A
Net Gain or Loss	Loss Disallowed	Gain or Loss		Tax Cost	Gross Proceeds		n covered security transaction	Total short term gain/loss from covered security transactions:
\$1,922.44	\$20,993.06	\$22,915.50			subject to wash sale:		n covered security transaction	Total short term gain/loss from covered security transactions not
\$0.40	\$50.61	\$51.01	12/17/12	11/30/12	0.98	G29183103	ETN	EATON CORP PLC
\$299.05	\$9,467.20	\$9,766.25	12/13/12	02/03/12	80	464287176	S BOND FUN TIP	ISHARES BARCLAYS TIPS BOND FUN TIP
\$2,193.13	\$7,330.79	\$9,523.92	11/30/12	02/06/12	120	G24140108	C NEW IREL CBE	COOPER INDUSTRIES PLC NEW IREL CBE
\$-570.14	\$4,144.46	\$3,574.32	11/30/12	80 02/06/12	80	887389104	TKR	TIMKEN CO
Net gain or loss	Cost or other basis (Box 3)	Sales price less commissions (Box 2a)	Sale date (Box 1a)	Date of acquisition (Box 1b)	Quantity sold (Box 1e)	disnO	Symbol (Box 1d)	Description (Box 8)

Page

ABBOTT HOUSE FOUNDATION INC AGY

Proceeds from Long Term Noncovered Security Transactions

loss. If applicable, transactions subject to wash sale are shown separately. If wash sales are not shown separately, your account has no wash sales in This category includes transactions that are long-term gain or loss. Form 1099-B, Box 6a is checked because this category includes only sales of nonheld and gross proceeds to the Internal Revenue Service but we do not report acquisition date, tax cost, wash sale loss disallowed and type of gain or covered securities. For sales of noncovered securities we report security description, symbol, cusip, quantity sold, sale date, federal income tax withthis category. For individual taxpayers, these transactions are reportable on Form 8949, Part II, Box B.

Long Term Noncovered Security Transactions (Form 8949, Part II, Box B)

Description (Box 8)	Symbol (Box 1d)	Cusip	Quantity sold (Box 1e)	Date of acquisition	Sale date (Box 1a)	Sales price less commissions (Box 2a)	Cost or other basis	Net gain or loss
FED NATL MTG ASSN 9.000% 10		31358FEE5	7.87	01/10/01	01/25/12	\$7.37	\$7.80	\$-0.43
VANGUARD REIT VIPER VI	ONV	922908553	20	01/19/11	02/03/12	\$3,149,44	\$2,773.49	\$375.95
T ROWE PRICE EMG MKTS STOCK FI PRINSX	RMSX	77956H864	56 85	12/16/10	02/03/12	\$1,841.81	\$1,954 38	\$-112.57
T ROWE PRICE EMG MKTS STOCK FI PRIMSX	RMSX	77956H864	340.41	12/18/07	02/03/12	\$11,029.22	\$13,970.34	\$-2,941.12
DODGE & COX INCOME FD COM 147 DODIX	XIGO	256210105	1011 37	12/22/10	02/03/12	\$13,724 32	\$13,340.00	\$384.32
DODGE & COX INCOME FD COM 147 DODIX	XIGO	256210105	100 08	08/20/10	02/03/12	\$1,358 02	\$1,341 00	\$17.02
DODGE & COX INCOME FD COM 147 DODIX	XIQO	256210105	1507.16	01/16/10	02/03/12	\$20,452.15	\$20,000.00	\$452 15
SPDR DJ WILSHIRE INTERNATIONAL RWX	ΧM	78463X863	435	01/12/11	02/03/12	\$15,503.14	\$16,925.85	\$-1,422.71
SPDR DJ WILSHIRE INTERNATIONAL RWX	WX	78463X863	125	01/19/11	02/03/12	\$4,454.93	\$4,888.75	\$-433.82
IPATH DOW JONES-UBS COMMODIT DJP	G.	06738C778	260	12/17/08	02/03/12	\$11,283.81	\$8,974.26	\$2,309.55
WF ADV SMALL CAP OPPOR FD-ADM NVSOX	VSOX	94975G488	452.9	12/23/04	02/03/12	\$15,480.09	\$15,000 00	\$480.09
WF ADV SMALL CAP OPPOR FD-ADM NVSOX	VSOX	94975G488	283.78	10/03/05	02/03/12	\$9,699.43	\$9,977 53	\$-278.10
WF ADV SMALL CAP OPPOR FD-ADM NVSOX	VSOX	94975G488	326 47	12/13/05	02/03/12	\$11,158.85	\$10,920.52	\$238.33
WF ADV SMALL CAP OPPOR FD-ADM NVSOX	VSOX	94975G488	774.23	12/13/06	02/03/12	\$26,463.25	\$26,401.30	\$61.95
WF ADV SMALL CAP OPPOR FD-ADM NVSOX	vsox	94975G488	580.05	03/16/07	02/03/12	\$19,825.97	\$20,000 00	\$-174.03
WF ADV SMALL CAP OPPOR FD-ADM NVSOX	VSOX	94975G488	795 37	06/29/04	02/03/12	\$27,185.78	\$26,207 49	\$978.29
T ROWE PRICE SHORT TERM BD FD PRWBX	RWBX	77957P105	300	08/20/10	02/03/12	\$1,452.00	\$1,464.00	\$-12.00
T ROWE PRICE SHORT TERM BD FD PRWBX	RWBX	77957P105	250.51	10/22/10	02/03/12	\$1,212.47	\$1,225 00	\$-12.53
T ROWE PRICE SHORT TERM BD FD PRWBX	RWBX	77957P105	3581.72	01/16/10	02/03/12	\$17,335.53	\$17,442.98	\$-107 45
			1					

Account Number 31121700

ABBOTT HOUSE FOUNDATION INCAGY

Long Term Noncovered Security Transactions (Form 8949, Part II, Box B)

Description (Box 8)	Symbol (Box 1d)	Cusip	Quantity sold (Box 1e)	Date of acquisition	Sale date (Box 1a)	Sales price less commissions (Box 2a)	Cost or other basis	Net gan or loss
VANGUARD REIT VIPER	VNO	922908553	100	04/20/07	02/03/12	\$6,298.89	\$7,832.32	\$-1,533.43
VANGUARD REIT VIPER	VNQ	922908553	200	20/20/90	02/03/12	\$12,597.78	\$14,806.64	\$-2,208.86
VANGUARD REIT VIPER	VNQ	922908553	350	01/24/11	02/03/12	\$22,046.11	\$19,449.50	\$2,596.61
WF ADV SMALL CAP OPPOR FD-ADM NVSOX	M NVSOX	94975G488	444 31	10/22/04	02/03/12	\$15,186.62	\$15,000.00	\$186.62
T ROWE PRICE EMG MKTS STOCK FI PRIMSX	FI PRMSX	77956H864	220.03	05/01/07	02/03/12	\$7,128.97	\$7,527.23	\$-398.26
WELLS FARGO ADV DIV INTL FD-I	WFISX	949917322	1204 43	12/23/04	02/07/12	\$12,116.59	\$15,000.00	\$-2,883.41
WELLS FARGO ADV DIV INTL FD-I	WFISX	949917322	1405 07	12/14/07	02/07/12	\$14,135.03	\$23,800.61	\$-9,665.58
WELLS FARGO ADV DIV INTL FD-I	WFISX	949917322	1432.08	12/21/05	02/07/12	\$14,406.72	\$20,000.00	\$-5,593.28
WELLS FARGO ADV DIV INTL FD-I	WFISX	949917322	1673 16	11/23/04	02/07/12	\$16,831.97	\$20,000.00	\$-3,168.03
WELLS FARGO ADV DIV INTL FD-I	WFISX	949917322	1777 36	10/22/04	02/07/12	\$17,880.21	\$20,000.00	\$-2,119.79
WELLS FARGO ADV DIV INTL FD-I	WFISX	949917322	2262 86	12/12/08	02/07/12	\$22,764.41	\$17,149.18	\$5,615.23
WELLS FARGO ADV DIV INTL FD-I	WFISX	949917322	2927.53	12/21/06	02/07/12	\$29,450.99	\$50,000 00	\$-20,549.01
WELLS FARGO ADV DIV INTL FD-I	WFISX	949917322	883 18	06/29/04	02/07/12	\$8,884.77	\$10,000 00	\$-1,115.23
WELLS FARGO ADV DIV INTL FD-I	WFISX	949917322	446.72	07/07/04	02/07/12	\$4,494.04	\$5,000 00	\$-505.96
WELLS FARGO ADV DIV INTL FD-1	WFISX	949917322	445.13	06/23/04	02/07/12	\$4,478.03	\$5,000.00	\$-521 97
WELLS FARGO ADV DIV INTL FD-1	WFISX	949917322	1220.12	12/06/04	02/07/12	\$12,274 45	\$15,000.00	\$-2,725 55
WELLS FARGO ADV DIV INTL FD-I	WFISX	949917322	3679 27	01/24/11	02/07/12	\$37,013 48	\$39,405 00	\$-2,391.52
FHLMC POOL G11473 5.000% 11/		31283KT65	113.83	03/23/04	02/15/12	\$113.83	\$98 63	\$15.20
FNMA POOL 754289 6.000% 11/		31403N7A9	5.09	12/11/03	02/25/12	\$5 09	\$5.31	\$-0.22
FED NATL MTG ASSN 9.000% 10		31358FEE5	2.06	10/01/10	02/25/12	\$7.06	\$7.47	\$-0 41
FHLMC POOL G11473 5.000% 11/		31283KT65	92.5	03/23/04	03/15/12	\$92.50	\$80.15	\$12.35
FNMA POOL 754289 6.000% 11/		31403N7A9	5.11	12/11/03	03/25/12	\$5.11	\$5.33	\$-0.22
FED NATL MTG ASSN 9 000% 10		31358FEE5	39.06	01/10/01	03/25/12	\$39.06	\$41.31	\$-2.25
T ROWE PRICE EMG MKTS STOCK FI PRMSX	FI PRMSX	77956H864	5187 75	05/01/07	04/03/12	\$168,964.89	\$177,472.77	\$-8,507 88
WF ADV SMALL CAP OPPOR FD-ADM NVSOX	M NVSOX	94975G488	1151	06/29/04	04/03/12	\$3,996.23	\$3,792.51	\$203.72
WF ADV SMALL CAP OPPOR FD-ADM NVSOX	M NVSOX	94975G488	115.32	06/23/04	04/03/12	\$4,003 77	\$3,793.90	\$209.87

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ABBOTT HOUSE FOUNDATION INCAGY

Long Term Noncovered Security Transactions (Form 8949, Part II, Box B)

Description (Box 8)	Symbol (Box 1d)	Cusip	Quantity sold (Box 1e)	Date of acquisition	Sale date (Box 1a)	Sales price less commissions (Box 2a)	Cost or other basis	~	Net gain or loss
VANGUARD MID CAP INDEX-SIGNFD VMISX) VMISX	922908447	311.53	03/16/07	04/03/12	\$10,000.00	\$9,013.59		\$986 41
SPDR DJ WILSHIRE INTERNATIONAL RWX	L RWX	78463X863	140	01/12/11	04/03/12	\$5,153 56	\$5,447 40		\$-293.84
VANGUARD REIT VIPER	VNQ	922908553	110	01/19/11	04/03/12	\$7,025.65	\$6,084 47	*	\$941 18
VANGUARD REIT VIPER	VNQ	922908553	50	01/12/11	04/03/12	\$3,193.48	\$2,746.17	*	\$447 31
FHLMC POOL G11473 5.000% 11/		31283KT65	77 72	03/23/04	04/15/12	\$77.72	\$67 34		\$10.38
FNMA POOL 754289 6.000% 11/		31403N7A9	29.27	12/11/03	04/25/12	\$29 27	\$30.51		\$-1.24
FED NATL MTG ASSN 9.000% 10		31358FEE5	7.67	10/01/10	04/25/12	\$7.67	\$8 11		\$-0 44
FHLMC POOL G11473 5.000% 11/		31283KT65	110 51	03/23/04	05/15/12	\$110.51	\$95.75		\$14.76
FNMA POOL 754289 6.000% 11/		31403N7A9	4 96	12/11/03	05/25/12	\$4.96	\$5.17		\$-021
FED NATL MTG ASSN 9.000% 10		31358FEE5	7.02	01/10/01	05/25/12	\$7 02	\$7.43		\$-0 41
FHLMC POOL G11473 5.000% 11/		31283KT65	74 15	03/23/04	06/15/12	\$74 15	\$64.25		\$9.90
FNMA POOL 754289 6.000% 11/	:	31403N7A9	103 82	12/11/03	06/25/12	\$103.82	\$108.22		\$-4.40
FED NATL MTG ASSN 9.000% 10		31358FEE5	693	01/10/01	06/25/12	\$6.93	\$7.33		\$-0 40
FHLMC POOL G11473 5.000% 11/		31283KT65	97.42	03/23/04	07/15/12	\$97.42	\$84.41		\$13 01
FNMA POOL 754289 6.000% 11/		31403N7A9	5 23	12/11/03	07/25/12	\$5 23	\$5.45		\$-0 22
FED NATL MTG ASSN 9.000% 10		31358FEE5	7 29	10/01/10	07/25/12	\$7.29	\$7.71		\$-0 42
ECOLAB INC	ECL	278865100	100	03/11/10	08/03/12	\$6,426.87	\$4,228.46		\$2,198 41
TRACTOR SUPPLY CO COM	TSCO	892356106	280	05/23/08	08/03/12	\$25,395.46	\$4,419.10		\$20,976.36
NEXTERA ENERGY INC	NEE	65339F101	09	01/24/06	08/03/12	\$4,247.31	\$2,526.60		\$1,720,71
EXXON MOBIL CORPORATION	XOM	30231G102	80	05/05/02	08/03/12	\$6,997 00	\$3,307.84		\$3,689 16
FHLMC POOL G11473 5.000% 11/		31283KT65	82.13	03/23/04	08/15/12	\$82 13	\$71 16		\$10.97
FNMA POOL 754289 6.000% 11/		31403N7A9	18 41	12/11/03	08/25/12	\$18 41	\$19.19		\$-0.78
FED NATL MTG ASSN 9.000% 10		31358FEE5	8.65	10/01/10	08/25/12	\$8 65	\$9.15		\$-0.50
HEWLETT PACKARD CO	HPQ	428236103	200	05/23/08	09/05/12	\$3,449 92	\$8,993 50		\$-5,543.58
FHLMC POOL G11473 5.000% 11/		31283KT65	67.73	03/23/04	09/15/12	\$67.73	\$58.69		\$9.04
HOME DEPOT INC	유	437076102	200	05/18/04	09/19/12	\$11,915.75	\$7,030.60		\$4,885.15

Account Number 31121700

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ABBOTT HOUSE FOUNDATION INCAGY

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Description (Box 8)	Symbol (Box 1d)	Cusip	Quantity sold (Box 1e)	Date of acquisition	Sale date (Box 1a)	Sales price less commissions (Box 2a)	Cost or other basis	Net gain or loss
ECOLAB INC	ECL	278865100	100	03/11/10	09/19/12	\$6,372.87	\$4,228.46	\$2,144.41
FNMA POOL 754289 6.000% 11/		31403N7A9	66.38	12/11/03	09/25/12	\$66.38	\$69.19	\$-2.81
FED NATL MTG ASSN 9.000% 10		31358FEE5	7.09	01/10/01	09/25/12	60'2\$	\$7.50	\$-0.41
KRAFT FOODS GROUP INC	KRFT	50076Q106	0.33	10/06/04	10/11/12	\$15.24	\$5.85	89.39
FHLMC POOL G11473 5.000% 11/		31283KT65	110.71	03/23/04	10/15/12	\$110.71	\$95.93	\$14.78
FED NATL MTG ASSN 9,000% 10		31358FEE5	12.55	01/10/01	10/25/12	\$12.55	\$13.27	\$-0.72
FNMA POOL 754289 6.000% 11/		31403N7A9	5.1	12/11/03	10/25/12	\$5.10	\$5.32	\$-0.22
EXXON MOBIL CORPORATION	MOX	30231G102	09	05/02/02	11/01/12	\$5,410.68	\$2,480.88	\$2,929.80
GENERAL ELECTRIC CO	GE	369604103	340	66/08/60	11/01/12	\$7,146.64	\$13,545.32	\$-6,398.68
CHEVRON CORP	CVX	166764100	280	11/04/98	11/01/12	\$30,765.70	\$11,152.75	\$19,612.95
NEXTERA ENERGY INC	NE NE	65339F101	100	03/01/06	11/01/12	\$7,002.84	\$4,161.00	\$2,841.84
CVS/CAREMARK CORPORATION	cvs	126650100	140	60/90/90	11/01/12	\$6,502.85	\$1,857 59	\$4,645.26
TRACTOR SUPPLY CO COM	TSCO	892356106	80	05/23/08	11/01/12	\$7,702 23	\$1,262 60	\$6,439.63
NEXTERA ENERGY INC	NEE	65339F101	40	01/24/06	11/01/12	\$2,801.14	\$1,684.40	\$1,116.74
FHLMC POOL G11473 5.000% 11/		31283KT65	123 16	03/23/04	11/15/12	\$12316	\$106 71	\$16.45
FED NATL MTG ASSN 9.000% 10		31358FEE5	18.46	01/10/01	11/25/12	\$18.46	\$19 52	\$-1 06
FNMA POOL 754289 6.000% 11/		31403N7A9	51.07	12/11/03	11/25/12	\$51 07	\$53.23	\$-216
MONDELEZ INTERNATIONAL INC	MDLZ	609207105	69.2	05/22/03	11/30/12	\$1,786.07	\$632.76	\$1,153.31
MCDONALDS CORP	MCD	580135101	120	12/17/02	11/30/12	\$10,404.97	\$1,964.16	\$8,440.81
ABBOTT LABORATORIES	ABT	002824100	220	03/01/06	11/30/12	\$14,304.59	\$9,649.20	\$4,655 39
MONDELEZ INTERNATIONAL INC	MDLZ	609207105	27.68	12/03/02	11/30/12	\$714 43	\$243.63	\$470 80
MONDELEZ INTERNATIONAL INC	MDLZ	609207105	69.12	10/06/04	11/30/12	\$1,783.86	\$748.02	\$1,035.84
CVS/CAREMARK CORPORATION	CVS	126650100	80	02/05/03	11/30/12	\$3,716.72	\$1,022.68	\$2,694.04
CVS/CAREMARK CORPORATION	cvs	126650100	120	05/06/03	11/30/12	\$5,575.09	\$1,592.22	\$3,982.87
NEXTERA ENERGY INC	NEE	65339F101	09	03/01/06	11/30/12	\$4,097.90	\$2,496 60	\$1,601.30
WALT DISNEY COMPANY 4.700% 12	2	254687AV8	40000	05/01/08	12/01/12	\$40,000.00	\$40,800.80	\$-800.80

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ABBOTT HOUSE FOUNDATION INCAGY

Long Term Noncovered Security Transactions (Form 8949, Part II, Box B)

SHARES BARCLAYS TIPS BOND FUN TIP 464287176 330 10/22/10 12/13/12 \$40,285.80 \$36,863.44 \$3,422.36 FHLMC POOL G11473 5.000% 11/ 31283KT65 79.91 03/23/04 12/15/12 \$7.08 \$70.91 \$70.81 \$7.08 \$7.08 \$7.08 \$7.08 \$7.08 \$7.08 \$7.08 \$7.08 \$7.08 \$7.09	ription Symbol (Box 1d) (Box 1d) (GENERAL DYNAMICS COR 5.375% 8 369	Cusip 9550AM0	Quantity sold (Box 1e) 75000	Date of acquisition 11/25/08	Sale date (Box 1a) 12/07/12	Sales price less commissions (Box 2a) \$84,494.25	Cost or other basis \$75,690.75	Net gain or loss \$8,803.50
31283KT65 79.91 03/23/04 12/15/12 \$79.91 \$69.24 31358FE5 7.08 01/10/01 12/25/12 \$7.08 \$7.49 \$7.49 31403N7A9 72.42 12/11/03 01/15/13 \$89.65 \$77.68 \$77.68 ytransactions not subject to wash sale: 12/11/03 01/25/13 \$1,013,998.61 \$970,342.11 \$43,656.50 \$600 S Disallowed Net Gallowed Net Gallowed	ISHARES BARCLAYS TIPS BOND FUN TIP	1287176	330	10/22/10	12/13/12	\$40,285.80	\$36,863.44	\$3,422.36
31358FEE5 7.08 01/10/01 12/25/12 \$7.08 \$7.49 31403N7A9 72.42 12/11/03 12/25/12 \$72.42 \$75.49 31283KT65 89.65 03/23/04 01/15/13 \$89.65 \$77.68 31403N7A9 123.07 12/11/03 01/25/13 \$1,013,998.61 \$970,342.11 3 transactions Gross Proceeds Tax Cost Gain or Loss Loss Disallowed Net Gain or Loss \$1,013,998.61 \$970,342.11 \$443,656.50 \$0.00	FHLMC POOL G11473 5.000% 11/	83KT65	79.91	03/23/04	12/15/12	\$79.91	\$69.24	\$10.67
31403N7A9 72.42 12/11/03 12/25/12 \$72.42 \$75.49 31283KT65 89.65 03/23/04 01/15/13 \$89.65 \$77.68 31403N7A9 123.07 12/11/03 01/25/13 \$1,013,998.61 \$970,342.11 y transactions: Gross Proceeds Tax Cost Gain or Loss Loss Disallowed Net Gain or Loss \$1,013,998.61 \$970,342.11 \$43,656.50 \$0.00	FED NATL MTG ASSN 9,000% 10	SBFEES	2.08	10/01/10	12/25/12	\$7.08	\$7.49	\$-0.41
31283KT65 89.65 03/23/04 01/15/13 \$89.65 \$77.68 31403N7A9 123.07 12/11/03 01/25/13 \$123.07 \$128.28 y transactions not subject to wash sale: \$1,013,998.61 \$970,342.11 \$1,013,998.61 \$970,342.11 y transactions: Gross Proceeds Tax Cost Gain or Loss Loss Disallowed Net Gain or Loss \$1,013,998.61 \$970,342.11 \$970,342.11 \$43,656.50 \$0.00	FNMA POOL 754289 6 000% 11/	03N7A9	72.42	12/11/03	12/25/12	\$72.42	\$75.49	20.6-\$
31403N7A9 123.07 12/11/03 01/25/13 \$123.07 \$128.28 y transactions not subject to wash sale: Tax Cost Gain or Loss Loss Disallowed Net Gain or Loss y transactions: \$1,013,998.61 \$970,342.11 \$43,656.50 \$0.00	FHLMC POOL G11473 5.000% 11/	:83KT65	89.65	03/23/04	01/15/13	\$89.65	\$77.68	\$11.97
y transactions not subject to wash sale: y transactions: Gross Proceeds Tax Cost Gain or Loss Disallowed Net Ga \$43,656.50 \$0.00	FNMA POOL 754289 6.000% 11/	03N7A9	123.07	12/11/03	01/25/13	\$123.07	\$128.28	\$-5.21
y transactions: Gross Proceeds Tax Cost Gain or Loss Loss Disallowed Net Gain or Loss \$1,013,998.61 \$970,342.11 \$43,656.50 \$0.00	Total long term gain/loss from noncovered security transaction	s not subject	t to wash sale:			\$1,013,998.61	\$970,342.11	\$43,656.50
\$1,013,998.61 \$970,342.11 \$43,656.50 \$0.00	noncovered security transaction		oss Proceeds	Tax	Cost		ss Disallowed	Net Gain or Loss
	Report each transaction on Form 8949, Part II, Box B		\$1,013,998.61	\$970,	942.11	\$43,656.50	\$0.00	\$43,656.50

Total proceeds reported to IRS on Form 1099-B

\$1,036,914.11

Proceeds From Broker and Barter Exchange Transactions

This is important tax information and is being furnished to the Internal Revenue Service. If, ou are required to file a return a negligence penalt, or other sanction ma, be imposed on jount this income is taxable and the IRS determines that it has not been reported.

OMB No.

Form 1099-B

2012

1545-0715

Copy B

For Recipient

Recipient's Name. Street Address. Orty. State & Zip Code

Abbott House Foundation PO Box 700 Mitchell SD 57301

Payer's Name istreet address inty istate & zip code

First Dakota National Bank Trust Dept 101 N Main Ave Sioux Falls SD 57164

605-333-8254

Payer's Federal Identification no

46-6041874

Recipient's Social Security Number

46-0379896

☐ CORRECTED (if checked)

'Gross Proceeds less commissions and option premiums

CUSIP No. | 1a Data of | 1b Acquired | 1c Type | 1d Stock or other | 1e Quen'ny sold

Account Number 400002 Abbott Houce Foundation Agency Ernie Peters Soh Fund 3 Cost or other 4 Federal 5 Wash sale | 6a Chack of 6b Check | 7 Sertemp

2a Stocks, bands, etc. 2b (fbox

8		of gala or loss	of gain symbol or loss		chacked, loss based on amoun' in 2a is not allowed	loss bosis 2a wed	encome lass withheld	- Demolrand ceol	o K bess noncoveredraported security 'o IRS	f bess reported to IRS	1	
31591580203 28 2512 05 21 2006	05.21.2006		FPWX	1 112300	32.00	29.84				7		Fiderly Diversified International Fund
77551710803.28.2012 05.21.2006	05 21 2006		PPTCA	12 464000	과 - 10	352.00				-		T Rowe Price Equity Income Fund
92290849503 28 2012 05 21 2006	05.21.2006		VF2)	B 262300	983.86	828 33				,		Vargusid 300 hidex Fund argus
D255842D803.28.2012 05.21.2D06	05.21.2006		AADDA	15 29 1000	225.09	352.00				,		Arrie man Bescon Lange Cap Value Insil
92290849503 28 2012 02 15 200	02 15 2007		VESV	1 702000	182 19	189.00				-		Parguard 500 Index Fund Signs
31591580203 28 2012 02 15 2007	02.15.2007		FENX	1 569300	45 1E	8.8				,		Fiderly Everyfied International Fund
D2558A2D8 03 28 2512 02 15 200	02 15 2007		AADDA	0.420300	1.5.	28				,		Arrie man Beacan Lange Cap Value Insil
77551710803 28 2012 02 15 200	02.15.2007		PPTCA	2 529300	96 93	90 29				-		T Rowe Price Equity Insume Fund
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77551710803.28.2012 10.17.200	15.17.2007		PPTCA	22 586200	7 009	8 2				/		T Rowe Price Equity Income Fund
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92290849503.28.2312 15.1 250	15.1 ⁻ 200 ⁻		VED.	11 225300	121188	1 329 19				,		Varguard 500 Index Fund signs
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315915802 <mark>03.28.2012</mark>	07 31 2D0B	<u>_</u>	FDWX	4 05-300	116.1	145.00				,		Fiderly Diversified International Fund
31591680203282612 06.182009	06.18.2005	느	FENX	B 51D300	18 38	152.00				,		Fiderly Diversified Internst chall Fund
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02103785703 28 2012 02 11 2010	02 1 ⁺ 2010	5	VBS()	36 095300	57.12	100.00				~		Variousid plant Term Band projet

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B Description	Variguald oliver Term Bond original	Purce All Asset A. Audworty Fund D.	Varguard GNMA Bond Adm	Tempeton Glocal Bond Fund Adviso	Fiderly Pighlinone Fand	Dodye & Cas Income Fand	Scout inter satural Fund	Varguard 500 Index Fund signs	T Fowe Price Mid Car, Value Fund	Scout intersations Fund	Arre wan Beacon Large Cup Value Incil	T Rowe Price Growth plact	T Rowe Price Equity Income Fund	T Fowe Pive Mid Cap (arowth Fund	Opperhenser Develoung Markets Y	Codye à (az inter salo se plock	Eston Vance Tax Maraged Emerg MHs	Rovce Permss halfu al Fulid	Columbia D adend Opportunity Z	Exton Vance Tax Maraged Energ MHs	Eston Vance Tax Maraged En erg Mho	T Rowe Price Mid Caulyane Fund	Scout interishens Fund	T Rowe Price Mid Caulyane Fund	T Rowe Price Mid Cap (arowth Fund	T Rowe Price Mid Cap (stowd) Fund	Royce Permss National Fund	Dodge & Cashite is to be stock	T Rowe Price Mid Cap (stowd) Fund	Exton Vance Succided Crienging Markets	Estat Varue Sunduled Crieding Markets
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6b Check if basis reported re IRS	-	-	-	-		,	,	~	-	,	~	-	,,,	~		,,	,,,	,		,,,	~	,,	,	,	~	,	,	~	-	-	-
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2b if box checked, loss based on amount in 2e is not allowed		•	.,	•	<u> </u>				19	<u></u>		.,			ויו	ш.	_	UI		•	PI.	ш		rı	PI.		PI.	TN.	וט	·	-
a Stacks, bands, etc. "2b if bax checked, based on amount is	B- 000	1,000	131 54	949.2	1 129 7	D9 5 2 6	31.24	125 60	27 - 27	98 O.	146 14	11-04		131 64	2133	131 08	16.11	11011	152.28	30.630	51 23	312.98	1C9 2E	138 83	282 13	136 18	25.125	16_32	382.59	145 03	652.30
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0 4																															
1a Date of 1b Acquired to Type 1d Stock or other Sale Date of pain symbol or loss	VBS;3.	PAUDX	XIIIX	TGBAX	SPHIX	1001	LMBWA	VESV	TPMC	LMBWA	AADDA	PF(sFX	PPTDA	RPMCX	CDVYX	DODEX	CTC	PCNNX	XZOGO	OT3	ΩĽ	PMC	LMBWA	PMC	RPMCX	RPMGX	PENNX	DODEX	RPMGX	COM	COM
10 Type of gala or loss	5	급	ե	t	占	급								5	디	ե	H	디	ħ	급	ŗ	5	占	느	<u>_</u>	<u>_</u>	ti	13	ti	ħ	급
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Regulated Futures Contracts

12 Apgragate profit or (loss) on contracts	
11 Unrelized profit or (bast) on oben contracts - 12/81/2012	
10 Univestigad proff or (loss) on open contracts - 12/31/2011	
8 Profit or (1935) realized in 2012 on closed confects	

State Withholdings

15 S'ete tax withheld	
14 State Identification no	
2000 PL	