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# Form **990-PF**

# Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

| OMB No 1545-0052 |
|------------------|
| 2012             |
|                  |

Department of the Treasury Internal Revenue Service

| 201            | 12         |
|----------------|------------|
| Open to public | inspection |

| For cale                           | ndar year 2012 or tax year beginning DEC  | 27, 2012   | , and ending       | DEC 31, 2012                          |  |
|------------------------------------|---|--|--------------------|---------------------------------------|--|
| Name o                             | f foundation  | - <del></del> -                                      |                    | A Employer identification             | number                                       |
|                                    |   |  |                    |                                       |  |
| STE                                | VENS FAMILY FOUNDATION,   | 46-1618021   |                    |                                       |  |
|                                    | and street (or P O box number if mail is not delivered to street  | B Telephone number                                   |                    |                                       |  |
| 102                                | 50 CONSTELLATION BLVD.  |  |                    |                                       |  |
| City or f                          | town, state, and ZIP code   | C If exemption application is p                      | ending, check here |                                       |  |
| LOS                                | ANGELES, CA 90067   |  |                    |                                       |  |
| G Chec                             | k all that apply: X Initial return  | D 1. Foreign organizations                           | , check here       |                                       |  |
|                                    | Final return  | 2  | -A Ab - 0.50V AA   |                                       |  |
|                                    | Address change  | Foreign organizations me<br>check here and attach co | mputation          |                                       |  |
|                                    | k type of organization: X Section 501(c)(3) ex  |  |                    | E If private foundation sta           | tus was terminated                           |
| S                                  | ection 4947(a)(1) nonexempt charitable trust  | Other taxable private founda                         | ation              | under section 507(b)(1)               | (A), check here                              |
| I Fair m                           |   | ng method: X Cash                                    | Accrual            | F If the foundation is in a           | 60-month termination                         |
|                                    |   | her (specify)  |                    | under section 507(b)(1)               | (B), check here                              |
| <b>_</b> \$                        | 5 , 000 , 000 . (Part I, colu   | mn (d) must be on cash l                             | basis)             |                                       |  |
| Part                               | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not   | (a) Revenue and                                      | (b) Net investment | (c) Adjusted net                      | (d) Disbursements<br>for charitable purposes |
|                                    | necessarily equal the amounts in column (a).)   | expenses per books                                   | income             | ıncome                                | (cash basis only)                            |
| 1                                  | Contributions, gifts, grants, etc., received  | 5,000,000.   |                    |                                       |  |
| 2                                  | Check If the foundation is not required to attach Sch. B. Interest on savings and temporary   |  |                    | REC                                   | FINED  |
| 3                                  | cash investments  |  |                    |                                       |  |
| 4                                  | Dividends and interest from securities  |  |                    | ା <mark>ଛା </mark> NOV :              | 5 2013 191                                   |
| 5                                  | a Gross rents   |  |                    |                                       | 1 " ("   S                                   |
| י ן                                | Net rental income or (loss)   |  |                    |                                       |  |
| 6ء<br><u>م</u>                     | Net gain or (loss) from sale of assets not on line 10<br>Gross sales price for all  |  |                    | L OGD                                 | <u>ENULL</u>                                 |
| Revenue 7                          | assets on line 6a   |  |                    |                                       |  |
| 7 <u>ا</u> ق                       | Capital gain net income (from Part IV, line 2)  |  | 0.                 |                                       |  |
| - B                                | Net short-term capital gain   |  |                    |                                       |  |
| 9                                  | Income modifications Gross sales less returns   |  |                    |                                       |  |
| 108                                | and allowances  |  |                    |                                       |  |
|                                    | Less Cost of goods sold   |  |                    |                                       |  |
| ର୍ଷ । ଏ                            | Gross profit or (loss)  |  |                    |                                       |  |
|                                    | Other income  | F 000 000  |                    | · · · · · · · · · · · · · · · · · · · |  |
| SCANNED 13                         | Total. Add lines 1 through 11   | 5,000,000.   | 0.                 | 0.                                    |  |
| <b>Z</b> 13                        | Compensation of officers, directors, trustees, etc  | 0.   | 0.                 | 0.                                    | 0.   |
| $\mathbf{O}$                       | Other employee salaries and wages   |  |                    |                                       |  |
| <b>Ζ</b> φ 15                      | Pension plans, employee benefits  |  |                    |                                       |  |
| . اع⁄ے                             | a Legal fees  |  |                    |                                       |  |
| ا قو                               | Accounting fees   |  |                    |                                       | <u> </u>                                     |
| ' [پُنِي                           | Other professional fees   |  |                    |                                       |  |
| ) 17<br>  17                       | Interest  |  |                    |                                       |  |
| 18                                 | Taxes   |  |                    |                                       |  |
| 19                                 | Depreciation and depletion  |  |                    |                                       |  |
| E 20                               | Occupancy .   |  |                    |                                       | <del></del>                                  |
| Ž 21                               | Travel, conferences, and meetings   |  |                    |                                       |  |
| E 22                               | Printing and publications   |  |                    |                                       |  |
| B 23                               | Other expenses  |  |                    |                                       |  |
| ita 24                             | Total operating and administrative  | 0.   | 0.                 | 0.                                    | _  |
| Operating and Administrative Expel | expenses. Add lines 13 through 23   | 0.   | U •                | U .                                   | 0.   |
| 25                                 | Contributions, gifts, grants paid   | <del>-</del>   |                    |                                       | <u> </u>                                     |
| 26                                 | Total expenses and disbursements.   | 0.   | 0.                 | 0.                                    | 0.   |
| <del></del>                        | Add lines 24 and 25   | <u> </u>   | <u> </u>           | ļ ————·                               | <u> </u>                                     |
|                                    | Subtract line 26 from line 12:  | l l  |                    |                                       |  |
|                                    |   | I 5 በበበ በበባ I  |                    |                                       |  |
|                                    | Excess of revenue over expenses and disbursements   |  |                    |                                       |  |
|                                    | Excess of revenue over expenses and disbursements     Net investment income (if negative, enter -0-)     Adjusted net income (if negative, enter -0-) | 5,000,000.   | 0.                 | 0.                                    |  |

Form 990-PF (2012) STEVENS FAMILY FOUNDATION, INC. 46-1618021 Page 2 Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only Beginning of year End of year (a) Book Value (b) Book Value (c) Fair Market Value 1 Cash - non-interest-bearing 5,000,000. 5,000,000. 2 Savings and temporary cash investments 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 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment, basis Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment basis Less accumulated depreciation 15 Other assets (describe ▶ 5,000,000. 5,000,000. 16 Total assets (to be completed by all filers) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue  $20\,$  Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 0 0. 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Balances 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Fund  $\triangleright X$ Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ō 0 27 Capital stock, trust principal, or current funds Ô 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 0. 5,000,000. Ō. 5,000,000 30 Total net assets or fund balances 5,000,000 0 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances 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) 2 Enter amount from Part I, line 27a 5,000,000. 3 Other increases not included in line 2 (itemize)

223511 12-05-12

4 Add lines 1, 2, and 3

5 Decreases not included in line 2 (itemize)

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

5,000,000.

223521 12-05-12

See the Part VI instructions.

8 Enter qualifying distributions from Part XII, line 4

Form **990-PF** (2012)

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.

| _   | m 990-PF (2012) STEVENS FAMILY FOUNDATION, INC.  |                               |       | 1618     |       |       | Page 4    |
|-----|--|-------------------------------|-------|----------|-------|-------|-----------|
| Pa  | art VI Excise Tax Based on Investment Income (Section 4940(a), 494   | i0(b), 4940(e), or 4          | 948   | - see i  | nstru | ıctio | ns)       |
| 18  | a Exempt operating foundations described in section 4940(d)(2), check here 🕨 📖 and enter "N/A" on                                | n line 1.                     |       |          |       |       |           |
|     | Date of ruling or determination letter: (attach copy of letter if necessary-see  | instructions)                 |       |          |       |       |           |
| ŧ   | b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🔲 and                                  | enter 1%                      | _1    |          |       |       | 0.        |
|     | of Part I, line 27b  |                               |       |          |       |       |           |
| (   | c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, lir                      | ne 12, col. (b). 丿            |       |          |       |       | _         |
|     | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -                           | 0-)                           | 2     |          |       |       | <u>0.</u> |
| 3   | Add lines 1 and 2  | •                             | 3     |          |       |       | 0.        |
| 4   | (-)(-)   | -0-)                          | 4     |          |       |       | 0.        |
|     | · · · · · · · · · · · · · · · · · · ·  |                               | 5     |          |       |       | 0.        |
|     | Credits/Payments:  |                               |       |          |       |       |           |
|     | a 2012 estimated tax payments and 2011 overpayment credited to 2012  |                               |       |          |       |       |           |
|     | b Exempt foreign organizations - tax withheld at source 6b   |                               |       |          |       |       |           |
|     | c Tax paid with application for extension of time to file (Form 8868)  |                               |       |          |       |       |           |
|     | d Backup withholding erroneously withheld 6d 6   |                               |       |          |       |       | _         |
|     | Total credits and payments. Add lines 6a through 6d  |                               | 7     |          |       |       | 0.        |
| _   | Enter any penalty for underpayment of estimated tax. Check here 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  | <b>•</b>                      | 9     |          |       |       | 0.        |
|     | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  | <b>▶</b>                      | 10    | ļ        |       | _     |           |
|     | Enter the amount of line 10 to be: Credited to 2013 estimated tax  | Refunded <b>▶</b>             | 11    | <u> </u> |       |       |           |
|     | art VII-A Statements Regarding Activities  |                               |       | ,        |       | V     | N-        |
| 18  | a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did                  | it participate or intervene   | ın    |          |       | Yes   |           |
|     | any political campaign?  Did it speed more than \$100 during the way (ather directly or advertis) for a literal average (as each |                               |       |          | 1a    |       | X         |
|     | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see inst                    | •                             |       |          | 1b    |       | <u> </u>  |
|     | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of                                | t any materials publishe      | ed or |          |       |       |           |
| _   | distributed by the foundation in connection with the activities  |                               |       |          |       |       | v         |
|     | Did the foundation file Form 1120-POL for this year?   |                               |       |          | 1c    |       | <u> </u>  |
| 0   | 1 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:                             | 0.                            |       |          |       |       |           |
|     | (1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$  |                               |       |          |       |       |           |
| e   | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax implemanagers. ► \$ 0 •    | osed on foundation            |       |          |       |       |           |
| ,   | Has the foundation engaged in any activities that have not previously been reported to the IRS?                                  |                               |       |          |       |       | X         |
| 2   | If "Yes," attach a detailed description of the activities  |                               |       |          | 2     |       |           |
| 2   | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, a                          | articles of incorporation o   |       |          |       |       |           |
| Ü   | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes   | articles of incorporation, of | ı     |          | 3     |       | х         |
| A s | a Did the foundation have unrelated business gross income of \$1,000 or more during the year?                                    |                               |       |          | 4a    |       | X         |
|     | of "Yes," has it filed a tax return on Form 990-T for this year?   |                               | N     | /A       | 4b    |       |           |
| 5   | Was there a liquidation, termination, dissolution, or substantial contraction during the year?                                   |                               | -1    | ,        | 5     | -     | <u>x</u>  |
| ٠   | If "Yes," attach the statement required by General Instruction T.  |                               |       |          |       |       |           |
| 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?  |                               |       |          | 6     |       | X         |
| 7   | Did the foundation have at least \$5,000 in assets at any time during the year?  |                               |       |          | 7     | Х     |           |
|     | If "Yes," complete Part II, col (c), and Part XV.  |                               |       |          |       |       |           |
| 8a  | a Enter the states to which the foundation reports or with which it is registered (see instructions)                             |                               |       |          |       |       |           |
|     | CA   |                               |       |          |       |       |           |
| b   | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gene                        | eral (or designate)           |       |          |       |       |           |
|     | of each state as required by General Instruction G? If "No," attach explanation  | ,                             |       |          | 8b    | х     |           |
| 9   | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)                        | ı)(3) or 4942(ı)(5) for caler | ndar  |          |       |       |           |
|     | year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Pa                           |                               |       |          | 9     | l     | X         |
| 10  | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their                   |                               | TMT   | 1        | 10    | х     |           |
|     |  |                               |       | Forn     | 990   | -PF ( | 2012)     |

| Form 990-PF (20       |                        |                            | FAMILY                    |                     |                   |  |               |                     | 46-1618   | 021   | 1                            | Page 6 |
|-----------------------|------------------------|----------------------------|---------------------------|---------------------|-------------------|--|---------------|---------------------|---|-------|------------------------------|--------|
| Part VII-B            | Statements             | Regard                     | ding Activi               | ties for V          | Which For         | m 4720 May B                                   | e Requir      | ed (contir          | nued)   |       |                              |        |
| 5a During the y       | ear did the found      | lation pay or              | incur any amo             | unt to:             |                   |  |               |                     |   |       |                              |        |
| (1) Carry o           | n propaganda, or       | otherwise a                | ttempt to influe          | nce legislatio      | on (section 494   | 5(e))?   |               | Y                   | es 🗓 No   |       |                              |        |
| (2) Influen           | ce the outcome of      | f any specifi              | c public election         | ı (see sectio:      | n 4955); or to o  | arry on, directly or in                        | directly,     |                     |   |       |                              |        |
| any vot               | er registration dri    | ve?                        |                           |                     |                   |  |               | Y                   | es 🗓 No   | 1     |                              |        |
| (3) Provide           | e a grant to an ind    | ividual for tr             | avel, study, or o         | other sımılar       | purposes?         |  |               | Y                   | es 🗓 No   |       |                              |        |
| (4) Provide           | e a grant to an org    | anızatıon ot               | her than a char           | table, etc., o      | rganization des   | cribed in section                              |               |                     |   |       |                              | İ      |
| 509(a)(               | (1), (2), or (3), or   | section 494                | 0(d)(2)?                  |                     |                   |  |               | Y                   | es X No   |       |                              |        |
| (5) Provide           | for any purpose        | other than r               | eligious, charita         | ıble, scientifi     | c, literary, or e | ducational purposes,                           | or for        |                     |   |       |                              |        |
| the pre               | vention of cruelty     | to children (              | or animals?               |                     |                   |  |               | Y                   | es 🗶 No   |       |                              |        |
| <b>b</b> If any answe | er is "Yes" to 5a(1)   | )-(5), did <mark>an</mark> | y of the transac          | tions fail to (     | qualify under th  | e exceptions describ                           | ed in Regulat | tions               |   | Ì     |                              | İ      |
| section 53.4          | 1945 or in a curre     | nt notice reg              | arding disaster           | assistance (        | (see instruction  | s)?  |               |                     | N/A   | 5b    |                              |        |
| Organization          | ns relying on a cu     | rrent notice               | regarding disas           | ter assistanc       | ce check here     |  |               |                     | ightharpoons  |       |                              |        |
| c If the answe        | er is "Yes" to quest   | tion 5a(4), d              | oes the foundat           | iion claim ex       | emption from t    | he tax because it mai                          | ntained       |                     |   |       |                              |        |
| expenditure           | responsibility for     | the grant?                 |                           |                     |                   |  | N/A           | Y                   | es 🔙 No   | ļ     |                              |        |
| If "Yes," at          | tach the statem        | ent require                | ed by Regulati            | ons sectioi         | n 53 4945-5(d     | t).  |               |                     |   |       |                              |        |
| 6a Did the four       | dation, during the     | e year, recen              | ve any funds, di          | rectly or ind       | rectly, to pay p  | remiums on                                     |               |                     |   |       |                              |        |
| a personal b          | enefit contract?       |                            |                           |                     |                   |  |               | Y                   | es 🗓 No   |       |                              |        |
| <b>b</b> Did the four | idation, during the    | e year, pay p              | remiums, direc            | tly or indirec      | tly, on a perso   | nal benefit contract?                          |               |                     |   | 6b    |                              | X      |
| If "Yes" to           | 6b, file Form 88       | 70.                        |                           |                     |                   |  |               |                     |   |       |                              |        |
| 7a At any time        | during the tax yea     | ir, was the fo             | oundation a par           | ty to a prohil      | bited tax shelte  | r transaction?                                 |               | Y                   | es 🗓 No   |       |                              |        |
| b If "Yes," did       | the foundation red     | ceive any pro              | oceeds or have            | any net inco        | me attributable   | to the transaction?                            |               |                     | N/A   | 7b    |                              |        |
| Part VIII             | Information Paid Emplo | n About (<br>yees, ar      | Officers, D<br>nd Contrac | irectors<br>ctors   | , Trustees        | , Foundation N                                 | Manager       | s, Highl            | у   |       |                              |        |
| 1 List all offic      | ers, directors,        | trustees, f                | foundation m              | anagers a           | nd their com      | pensation.                                     |               |                     |   |       |                              |        |
|                       |                        | M                          | 44                        |                     |                   | b) Title, and average<br>ours per week devoted |               | pensation           | (d) Contributions to<br>employee benefit plan         |       | e) Exp<br>count,             | ense   |
|                       | (a)                    | Name and a                 | agress                    |                     | "                 | to position                                    |               | ot paid,<br>er -0-) | and deferred<br>compensation                          |       | allowar                      | ices   |
| M. BRENT              |                        |                            |                           |                     | PR                | ESIDENT  |               | _                   |   |       |                              |        |
| 127 LAKE              |                        |                            | DRIVE                     |                     |                   |  |               |                     |   |       |                              |        |
| KETCHUM,              | ID 8334                | 40                         |                           |                     |                   | 0.00   |               | 0.                  | j 0   | •     |                              | 0.     |
|                       | •                      |                            |                           |                     |                   |  |               |                     |   |       | •                            |        |
|                       |                        |                            |                           |                     |                   |  |               |                     |   |       |                              |        |
|                       |                        |                            |                           |                     |                   |  |               |                     |   |       |                              |        |
|                       |                        |                            |                           |                     |                   |  |               |                     |   |       |                              |        |
|                       |                        |                            |                           |                     |                   |  |               |                     |   |       |                              |        |
|                       | <u>.</u> .             |                            | ··                        |                     |                   |  |               |                     |   |       |                              |        |
|                       |                        |                            | . <u> </u>                |                     |                   |  |               |                     | İ   |       |                              |        |
|                       |                        |                            |                           |                     |                   |  |               |                     |   |       |                              |        |
| 0.0                   | inn af Ein Link        | 4:                         |                           | <u> 41 4</u>        | <u> </u>          |  |               | 10115               |   |       |                              |        |
| 2 Compensat           | ion of five nigh       | est-paid e                 | imployees (or             | ner than t          |                   | d on line 1). If nor<br>b) Title, and average  | ie, enter "r  | NONE."              | (d) Contributions to                                  |       | -1 Evn                       |        |
| (a) Nam               | e and address of       | each employ                | ee paid more t            | han <b>\$50,000</b> | '                 | hours per week<br>devoted to position          | (c) Com       | pensation           | employee benefit plar<br>and deferred<br>compensation | s lad | e) Expo<br>count,<br>allowar | other  |
| NC                    | NE                     |                            |                           |                     |                   |  |               |                     |   |       |                              |        |
|                       |                        |                            |                           |                     |                   |  |               |                     |   |       |                              |        |
|                       |                        |                            |                           |                     |                   |  |               |                     |   |       |                              |        |
|                       |                        |                            |                           |                     |                   |  |               |                     |   |       |                              |        |
|                       |                        |                            |                           |                     |                   |  |               |                     |   |       |                              |        |
|                       |                        |                            |                           |                     |                   |  |               |                     |   |       |                              |        |
|                       |                        |                            |                           |                     |                   |  |               |                     |   |       |                              |        |
|                       |                        |                            |                           |                     | l_                |  |               |                     |   |       |                              |        |
|                       |                        |                            |                           |                     |                   |  |               |                     |   |       |                              |        |
|                       |                        |                            |                           |                     |                   |  |               | ,                   |   |       |                              |        |
| Total number of       | other employees        | paid over \$5              | 50,000                    |                     |                   |  |               |                     |   |       |                              | 0      |

| Form 990-PF (2012) STEVENS FAMILY FOUNDATION, INC.   | 46-1618021 Page 7         |
|--|---------------------------|
| Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)   |                           |
| 3 Five highest-paid independent contractors for professional services. If none, enter "NONE."  |                           |
| (a) Name and address of each person paid more than \$50,000 (b) Type of serving  | ce (c) Compensation       |
| NONE   |                           |
|  |                           |
|  |                           |
|  |                           |
|  |                           |
|  |                           |
|  |                           |
|  |                           |
| Total number of others receiving over \$50,000 for professional services   | ▶ 0                       |
| 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 N/A  |                           |
|  |                           |
|  |                           |
| 2  | <del> </del>              |
|  |                           |
| 3  |                           |
|  |                           |
| A  |                           |
| 4  |                           |
|  |                           |
| Part IX-B   Summary of Program-Related Investments   |                           |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  1 N/A   | Amount                    |
| 1 N/A  |                           |
|  |                           |
| 2  |                           |
|  |                           |
| All other program-related investments. See instructions.   |                           |
| All other program-related investments, see instructions.   |                           |
| · · · · · · · · · · · · · · · · · · ·  |                           |
|  |                           |
| Total. Add lines 1 through 3   | ▶ 0.                      |
|  | Form <b>990-PF</b> (2012) |

| P  | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four  | ndations     | , see instructions ) |
|----|--|--------------|----------------------|
| 1  | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:  |              | <del></del>          |
| а  |  | 1a           | 0.                   |
| b  | Average of monthly cash balances   | 1b           | 5,000,000.           |
| C  |  | 1c           |                      |
| d  | Total (add lines 1a, b, and c)   | 1d           | 5,000,000.           |
| е  | Reduction claimed for blockage or other factors reported on lines 1a and   |              |                      |
|    | 1c (attach detailed explanation) le l 0.   |              |                      |
| 2  | Acquisition indebtedness applicable to line 1 assets   | 2            | 0.                   |
| 3  | Subtract line 2 from line 1d   | 3            | 5,000,000.           |
| 4  | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)  | 4            | 75,000.              |
| 5  | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4   | 5            | 4,925,000.           |
| 6  | Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD  | 6            | 3,374.               |
| P  | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.) | nd certain   |                      |
| 1  | Minimum investment return from Part X, line 6  | 1            | 3,374.               |
| 2a | Tax on investment income for 2012 from Part VI, line 5   |              |                      |
| b  | Income tax for 2012. (This does not include the tax from Part VI.)   | 1 1          |                      |
| C  | Add lines 2a and 2b  | 2c           | 0.                   |
| 3  | Distributable amount before adjustments. Subtract line 2c from line 1  | 3            | 3,374.               |
| 4  | Recoveries of amounts treated as qualifying distributions  | 4            | 0.                   |
| 5  | Add lines 3 and 4  | 5            | 3,374.               |
| 6  | Deduction from distributable amount (see instructions)   | 6            | 0.                   |
| 7_ | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1   | 7            | 3,374.               |
| P  | art XII Qualifying Distributions (see instructions)  |              |                      |
| 1  | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:   |              | •                    |
| а  | Expenses, contributions, gifts, etc total from Part I, column (d), line 26   | 1a           | 0.                   |
| b  | Program-related investments - total from Part IX-B   | 1b           | 0.                   |
| 2  | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes  | 2            |                      |
| 3  | Amounts set aside for specific charitable projects that satisfy the:   |              |                      |
| a  | Suitability test (prior IRS approval required)   | 3a           |                      |
|    | Cash distribution test (attach the required schedule)  | 3b           |                      |
| 4  | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4   | 4            | 0.                   |
| 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   | 5            | 0.                   |
| 6  | Adjusted qualifying distributions. Subtract line 5 from line 4   | 6            | 0.                   |
|    | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of  | qualities fo | or the section       |

|  | (a)<br>Corpus | (b)<br>Years prior to 2011 | (c)<br>2011 | ( <b>d</b> )<br>2012 |
|--|---------------|----------------------------|-------------|----------------------|
| 1 Distributable amount for 2012 from Part XI,  | оограз        | rears prior to 2011        | 2011        | 3,374.               |
| 2 Undistributed income, if any, as of the end of 2012  |               |                            |             | 3,3,11               |
| a Enter amount for 2011 only   |               |                            | 0.          |                      |
| b Total for prior years:   |               |                            |             |                      |
|  |               | 0.                         |             |                      |
| 3 Excess distributions carryover, if any, to 2012:   |               |                            |             | ·                    |
| a From 2007  |               |                            |             |                      |
| <b>b</b> From 2008   |               |                            |             |                      |
| c From 2009  |               |                            |             |                      |
| dFrom 2010   |               |                            |             |                      |
| e From 2011  |               |                            |             |                      |
| f Total of lines 3a through e  | 0.            |                            |             |                      |
| 4 Qualifying distributions for 2012 from   |               |                            |             |                      |
| Part XII, line 4: ►\$ 0 •  |               |                            |             |                      |
| a Applied to 2011, but not more than line 2a   | İ             |                            | 0.          |                      |
| b Applied to undistributed income of prior   |               |                            |             |                      |
| years (Election required - see instructions)   |               | 0.                         |             |                      |
| c Treated as distributions out of corpus   |               |                            |             |                      |
| (Election required - see instructions)   | 0.            |                            |             |                      |
| d Applied to 2012 distributable amount   |               |                            |             | 0.                   |
| e Remaining amount distributed out of corpus   | 0.            |                            |             |                      |
| Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))   | 0.            |                            |             | 0.                   |
| 6 Enter the net total of each column as indicated below:   |               |                            |             |                      |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5  | 0.            |                            |             |                      |
| 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 |               | 0.                         |             |                      |
| 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 instr.   |               |                            | 0.          |                      |
| f Undistributed income for 2012. Subtract  |               |                            |             |                      |
| lines 4d and 5 from line 1. This amount must   | į             |                            |             |                      |
| be distributed in 2013   |               |                            |             | 3,374.               |
| 7 Amounts treated as distributions out of  |               |                            |             |                      |
| corpus to satisfy requirements imposed by  |               |                            |             |                      |
| section 170(b)(1)(F) or 4942(g)(3)   | 0.            |                            |             |                      |
| 8 Excess distributions carryover from 2007   |               |                            |             |                      |
| not applied on line 5 or line 7  | 0.            |                            | ·           |                      |
| 9 Excess distributions carryover to 2013.  | ا م           |                            |             |                      |
| Subtract lines 7 and 8 from line 6a  | 0.            |                            |             |                      |
| 10 Analysis of line 9:   |               |                            |             |                      |
| a Excess from 2008   |               |                            |             |                      |
| b Excess from 2009   |               |                            |             |                      |
| c Excess from 2010 d Excess from 2011  |               |                            |             |                      |
| e Excess from 2012   |               | i                          |             |                      |

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|  |                                       | NDATION, IN                                      |                                       | _ 46-16                      | 18021             | Page 10     |
|--|---------------------------------------|--|---------------------------------------|------------------------------|-------------------|-------------|
| Part XIV   Private Operating F   | oundations (see in                    | structions and Part VII                          | -A, question 9)                       | N/A                          |                   |             |
| 1 a If the foundation has received a ruling of                             | r determination letter tha            | t it is a private operating                      |                                       |                              |                   |             |
| foundation, and the ruling is effective fo                                 |                                       |  | ▶                                     |                              |                   |             |
| b Check box to indicate whether the found                                  |                                       | <del>-</del>                                     | n section                             | 4942(j)(3) or 49             | 942(j)(5)         |             |
| 2 a Enter the lesser of the adjusted net                                   | Tax year                              | <u>,                                     </u>    | Prior 3 years                         |                              | T                 |             |
| income from Part I or the minimum  | (a) 2012                              | (b) 2011   | (c) 2010                              | (d) 2009                     | (e) Tot           | al          |
| investment return from Part X for  |                                       | <del>                                     </del> | · · · · · · · · · · · · · · · · · · · | <del> </del>                 | <del> `</del>     |             |
|  |                                       |  |                                       |                              |                   |             |
| each year listed   | <del></del>                           |  | <del></del>                           | <del></del>                  | <del> </del> -    |             |
| b 85% of line 2a   | <del></del>                           |  | ļ <u></u>                             | <del></del>                  | <del></del>       |             |
| c Qualifying distributions from Part XII,                                  |                                       |  |                                       |                              | 1                 |             |
| line 4 for each year listed  |                                       |  |                                       |                              | <del> </del>      |             |
| d Amounts included in line 2c not  |                                       | 1  |                                       |                              |                   |             |
| used directly for active conduct of  |                                       | 1  |                                       |                              |                   |             |
| exempt activities  |                                       |  |                                       |                              | <u> </u>          |             |
| e Qualifying distributions made directly                                   |                                       |  | 1                                     |                              |                   |             |
| for active conduct of exempt activities.                                   | ļ                                     |  | ļ                                     |                              | l .               |             |
| Subtract line 2d from line 2c  |                                       |  |                                       |                              | 1                 |             |
| 3 Complete 3a, b, or c for the   |                                       |  |                                       |                              | 1                 |             |
| alternative test relied upon;<br>a "Assets" alternative test - enter;      |                                       |  |                                       |                              |                   |             |
| (1) Value of all assets  |                                       |  |                                       |                              |                   |             |
| • •  |                                       |  |                                       |                              |                   | <del></del> |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i)              |                                       |  |                                       |                              |                   |             |
| b "Endowment" alternative test - enter<br>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   | Ì                                     | Ì  |                                       |                              | Ĭ                 |             |
| investment income (interest,   |                                       |  |                                       |                              |                   |             |
| dividends, rents, payments on  |                                       |  |                                       |                              |                   |             |
| securities loans (section 512(a)(5)), or royalties)                        |                                       |  |                                       |                              | 1                 |             |
| (2) Support from general public  |                                       |  |                                       | <del> </del>                 |                   |             |
| and 5 or more exempt   | •                                     |  | ļ                                     |                              | 1                 |             |
| organizations as provided in   |                                       |  |                                       |                              |                   |             |
| section 4942(j)(3)(B)(iii)   | · · · · · · · · · · · · · · · · · · · | <u> </u>   |                                       |                              |                   |             |
| (3) Largest amount of support from   |                                       |  |                                       |                              | 1                 |             |
| an exempt organization   | ļ                                     |  |                                       |                              |                   |             |
| (4) Gross investment income  |                                       | <u>                                     </u>     |                                       | 1 105 000                    | L <u>.</u>        |             |
| Part XV Supplementary Info   |                                       |  | if the foundatio                      | n had \$5,000 or m           | ore in asse       | ts          |
| at any time during t   | ne year-see insti                     | ructions.)                                       |                                       |                              |                   |             |
| 1 Information Regarding Foundation   | •                                     |  |                                       |                              |                   |             |
| a List any managers of the foundation wh                                   |                                       |  | ributions received by th              | e foundation before the clo  | se of any tax     |             |
| year (but only if they have contributed n                                  | nore than \$5,000). (See s            | section 507(d)(2).)                              |                                       |                              |                   |             |
| M. BRENT STEVENS   |                                       |  |                                       |                              |                   |             |
| b List any managers of the foundation wh                                   |                                       |  | or an equally large por               | tion of the ownership of a p | artnership or     |             |
| other entity) of which the foundation ha                                   | s a 10% or greater intere             | st.  |                                       |                              |                   |             |
| NONE   |                                       |  |                                       |                              |                   |             |
| 2 Information Regarding Contribut  | ion, Grant, Gift, Loan                | Scholarship, etc., Pr                            | ograms:                               |                              |                   |             |
| Check here > if the foundation of  |                                       |  |                                       | not accept unsolicited requ  | ests for funds. I | lf .        |
| the foundation makes gifts, grants, etc.                                   | (see instructions) to indi-           | viduals or organizations u                       | nder other conditions,                | complete items 2a, b, c, and | d.                |             |
| a The name, address, and telephone num                                     | ber or e-mail of the perso            | on to whom applications s                        | hould be addressed:                   |                              | -                 |             |
| a The hame, address, and totophone ham                                     | bor or o man or the perso             | m to whom apphoalions o                          | modia de adaressea.                   |                              |                   |             |
|  |                                       |  |                                       |                              |                   |             |
| b The form in which applications should t                                  | ne submitted and informa              | tion and materials they sh                       | nould include.                        | <del></del>                  |                   |             |
|  |                                       |  |                                       |                              |                   |             |
| c Any submission deadlines:  |                                       |  |                                       |                              |                   |             |
| d Any restrictions or limitations on award                                 | s, such as by geographic              | al areas, charitable fields,                     | kınds of ınstitutions, oi             | other factors:               |                   |             |
|  |                                       |  |                                       |                              |                   |             |
|  | <del></del>                           |  |                                       |                              |                   |             |
|  |                                       |  |                                       |                              |                   |             |

# Part XVI-A Analysis of Income-Producing Activities

| Enter gross amounts unless otherwise indicated.  | Unrelated business income |                                       |               | ided by section 512, 513, or 514 | (e)                                     |
|--|---------------------------|---------------------------------------|---------------|----------------------------------|---|
| 2.10. g. 555 2.110ditto 2111055 Citio Wise Indicated.  | (a)<br>Business           | (b)                                   | (C)<br>Exclu- | (d)                              | Related or exempt                       |
| 1 Program service revenue:   | Business<br>code          | Amount                                | sion          | Amount                           | function income                         |
| a  | COGC                      | <del> </del>                          | 10000         |                                  |   |
|  |                           | <del></del>                           | +             |                                  |   |
| 0  |                           |                                       | 1             |                                  |   |
| 4  |                           |                                       | +             | <u> </u>                         | <del></del>                             |
| e  |                           |                                       | +-            |                                  |   |
| f  |                           |                                       | +             | <u></u>                          |   |
| g Fees and contracts from government agencies  |                           |                                       | +             |                                  |   |
| 2 Membership dues and assessments  |                           |                                       | 1-            |                                  |   |
| 3 Interest on savings and temporary cash investments   |                           | · · · · · · · · · · · · · · · · · · · |               |                                  |   |
| 4 Dividends and interest from securities   |                           |                                       |               |                                  | *************************************** |
| 5 Net rental income or (loss) from real estate:  |                           |                                       |               |                                  |   |
| a Debt-financed property   |                           |                                       |               |                                  |   |
| b Not debt-financed property   |                           |                                       |               |                                  |   |
| 6 Net rental income or (loss) from personal property   |                           |                                       |               |                                  |   |
| 7 Other investment income  |                           |                                       | 1             |                                  |   |
| 8 Gain or (loss) from sales of assets other than inventory   |                           |                                       |               |                                  |   |
| 9 Net income or (loss) from special events   |                           | · · · · · · · · · · · · · · · · · · · |               |                                  |   |
| 10 Gross profit or (loss) from sales of inventory  |                           |                                       |               |                                  |   |
| 11 Other revenue:  | ŀ                         |                                       |               |                                  |   |
| a  |                           |                                       |               |                                  |   |
| b  |                           |                                       | L.            |                                  |   |
| c  |                           |                                       |               |                                  |   |
| d  |                           |                                       | +             |                                  |   |
| e  |                           |                                       |               |                                  |   |
| 12 Subtotal. Add columns (b), (d), and (e)   |                           | 0 .                                   |               | 0.                               | 0.                                      |
| 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) |                           |                                       |               | 13                               | 0.                                      |

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

| Line No.<br>▼      | Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). |
|--------------------|---|
|                    |   |
|                    |   |
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| <del> </del>       |   |
| <del></del>        |   |
| 223621<br>12-05-12 | Form <b>990-PF</b> (2012  |

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

| 1  | Did the o   | rnanization directly or indi  | rectly engage in any       | of the followin      | o with any other organizat            | ion described in sec    | tion 501/c) of                        |              | Yes                  | No         |  |
|--|---|---|----------------------------|----------------------|---------------------------------------|-------------------------|---------------------------------------|--------------|----------------------|------------|--|
| •  | 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? |   |                            |                      |                                       |                         |                                       |              |                      |            |  |
| a Transfers from the reporting foundation to a noncharitable exempt organization of: |   |   |                            |                      |                                       |                         |                                       |              |                      |            |  |
| (1) Cash   |   |   |                            |                      |                                       |                         |                                       |              |                      | X          |  |
| · · · · · · · · · · · · · · · · · · ·  |   |   |                            |                      |                                       |                         |                                       |              |                      | X          |  |
| ь  |   | nsactions:  |                            |                      |                                       |                         |                                       | 1a(2)        |                      | 21         |  |
| U  |   | s of assets to a noncharital  | bla avamet organizat       | ıon                  |                                       |                         |                                       | 16/4\        |                      | X          |  |
|  |   | chases of assets from a noi   |                            |                      |                                       |                         |                                       | 1b(1)        |                      | X          |  |
|  | • •   | tal of facilities, equipment,   | •                          | i yanizanon          |                                       |                         |                                       | 1b(2)        |                      | X          |  |
|  | ٠,  |   |                            |                      |                                       |                         |                                       | 1b(3)        |                      | X          |  |
|  |   | nbursement arrangements<br>ns or loan guarantees                          |                            |                      |                                       |                         | •                                     | 1b(4)        |                      | X          |  |
|  | ٠,,   | •   | mbarahin ar fundrair       |                      |                                       |                         |                                       | 1b(5)        |                      | X          |  |
| _  |   | ormance of services or me   |                            |                      |                                       |                         |                                       | 1b(6)        |                      | X          |  |
|  | _   | of facilities, equipment, ma  | -                          |                      | • •                                   |                         |                                       | 1c           |                      | Λ          |  |
| a  |   |   |                            |                      |                                       |                         | market value of the goods, ot         |              | ets,                 |            |  |
|  |   |   |                            |                      | ed less man fair market va            | iue in any transactio   | n or sharing arrangement, sh          | ow in        |                      |            |  |
| /a\.   |   | (b) Amount involved   |                            |                      | exempt organization                   | (d) o                   |                                       |              |                      |            |  |
| (4)  | ine no  | Amount involved   | (c) Name of                |                      | exempt organization                   | (u) Description         | on of transfers, transactions, and sh | aring an     | angeme               | nts        |  |
|  |   |   | ļ                          | N/A                  |                                       |                         |                                       |              |                      |            |  |
|  |   |   |                            |                      |                                       |                         |                                       |              |                      |            |  |
|  |   |   |                            |                      |                                       |                         |                                       |              |                      |            |  |
|  |   |   |                            |                      |                                       |                         |                                       |              |                      |            |  |
|  |   |   |                            |                      |                                       |                         |                                       |              |                      |            |  |
|  |   |   |                            |                      |                                       |                         | · ···                                 |              |                      |            |  |
|  |   |   |                            |                      | · · · · · · · · · · · · · · · · · · · |                         |                                       |              |                      |            |  |
|  |   |   |                            |                      |                                       |                         |                                       |              |                      |            |  |
|  |   | <del> </del>  |                            |                      |                                       |                         |                                       |              |                      |            |  |
|  |   |   |                            |                      |                                       |                         |                                       |              |                      |            |  |
|  |   |   |                            |                      |                                       |                         |                                       |              |                      |            |  |
|  |   |   |                            |                      | · · ·                                 |                         |                                       |              |                      |            |  |
|  |   |   |                            |                      |                                       |                         |                                       |              |                      |            |  |
|  |   |   |                            |                      |                                       |                         |                                       |              |                      |            |  |
|  |   |   |                            |                      |                                       |                         |                                       |              |                      |            |  |
|  |   |   |                            |                      |                                       |                         |                                       |              |                      |            |  |
| 2a   | is the fou  | ındatıon dırectly or ındırect   | tly affiliated with, or r  | elated to, one       | or more tax-exempt organ              | izations described      |                                       | _            |                      |            |  |
|  | ın sectior  | n 501(c) of the Code (other   | r than section 501(c)      | (3)) or in sect      | ion 527 <b>?</b>                      |                         |                                       | Yes          | X                    | ] No       |  |
| <u>b</u>   | If "Yes," c   | complete the following sch  | <del></del>                |                      |                                       |                         |                                       |              |                      |            |  |
|  |   | (a) Name of org   | janization                 |                      | (b) Type of organization              |                         | (c) Description of relationshi        | p            |                      |            |  |
|  |   | N/A   |                            |                      |                                       |                         |                                       | _            |                      |            |  |
|  |   | 1/2   |                            |                      |                                       |                         |                                       |              |                      |            |  |
|  |   | !(/)  | 1                          |                      |                                       |                         |                                       |              |                      |            |  |
|  |   | ( / 1 ×   | 1                          |                      |                                       |                         |                                       |              |                      |            |  |
|  |   |   | 7                          |                      |                                       |                         |                                       |              |                      |            |  |
|  | and b   | er penalties of perjuly, I declared pelief, it is true, correct, and con- |                            |                      |                                       |                         | May                                   | he IRS c     | liscuss t            | his        |  |
| Sig  | gn   👢  | beller, it is due, correct, and con                                       | There pecial attort of big | :parer (Otrier tria) |                                       | Mation of which prepare | - 101011                              | with the     | prepare<br>(see inst | er<br>er)? |  |
| He   | re  | 0 1   | 0                          |                      |                                       |                         |                                       | Yes          |                      | No         |  |
|  | Sig   | nature of officer or trustee  | !                          |                      | Date                                  | Title                   |                                       |              |                      |            |  |
|  |   | Print/Type preparer's na  | ime                        | Preparer's si        | •                                     | Date                    | Check if PTIN                         |              |                      |            |  |
|  |   |   |                            | R                    | n / n Brad Mc                         |                         | self- employed                        |              |                      |            |  |
| Pa   |   | BRAD MCNUL  | TY                         | Buch                 | Mr. Mult 2013.11                      | d7 12 58.34 -06'00'     | P00                                   | 018          | 338                  |            |  |
|  | eparer  | Firm's name ► DEL   | OITTE TAX                  |                      | ·                                     |                         | Firm's EIN ▶ 86-10                    | 657          | 72                   |            |  |
| Us   | e Only  |   |                            |                      |                                       |                         |                                       |              |                      |            |  |
|  |   | Firm's address ▶ 45   | 50 E. 53R                  | D STRE               | ET, SUITE 11                          | LO                      | 1                                     |              |                      |            |  |
|  |   | DA  | VENPORT,                   | IA 528               | 07-3171                               |                         | Phone no. 563-3                       | 22-          | 441                  | 5          |  |
|  |   |   |                            |                      |                                       |                         | Forn                                  | n <b>990</b> | -PF(                 | 2012)      |  |
|  |   |   |                            |                      |                                       |                         |                                       |              |                      |            |  |

#### 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 **Employer identification number** STEVENS FAMILY FOUNDATION, 46-1618021 Organization type (check one): Filers of: Section: 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt chantable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 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** [X] 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).

Name of organization

Employer identification number

#### STEVENS FAMILY FOUNDATION, INC.

46-1618021

| Part I       | Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. |                            |  |  |  |
|--------------|--|----------------------------|--|--|--|
| (a)<br>No.   | (b)<br>Name, address, and ZIP + 4  | (c) Total contributions    | (d) Type of contribution   |  |  |
| 1            | M. BRENT STEVENS  127 LAKE CREEK MEADOW DRIVE  KETCHUM, ID 83340                               | \$ 5,000,000.              | Person  Payroll  Noncash  (Complete Part II if there is a noncash contribution.) |  |  |
| (a)<br>No.   | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions | (d)<br>Type of contribution  |  |  |
|              |  | <b>\$</b>                  | Person Payroll Noncash (Complete Part II if there is a noncash contribution.)    |  |  |
| (a)<br>No.   | (b)<br>Name, address, and ZIP + 4  | (c) Total contributions    | (d) Type of contribution   |  |  |
|              |  | -<br>-<br>-<br>-           | Person Payroll Noncash (Complete Part II if there is a noncash contribution.)    |  |  |
| (a)<br>No.   | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions | (d) Type of contribution   |  |  |
|              |  | -<br>-<br>-<br>-           | Person Payroll Noncash (Complete Part II if there is a noncash contribution.)    |  |  |
| (a)<br>No.   | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions | (d) Type of contribution   |  |  |
|              |  | -<br>-<br>-<br>-           | Person Payroll Noncash (Complete Part II if there is a noncash contribution.)    |  |  |
| (a)<br>No.   | (b)<br>Name, address, and ZIP + 4  | (c) Total contributions    | (d) Type of contribution   |  |  |
| 223452, 12.2 |  | \$Schodulo B //Sorm        | Person Payroll Noncash (Complete Part II if there is a noncash contribution.)    |  |  |

Employer identification number

#### STEVENS FAMILY FOUNDATION, INC.

46-1618021

| Part II                      | Noncash Property (see instructions). Use duplicate copies of P | art II if additional space is needed.          |                           |
|------------------------------|--|--|---------------------------|
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                     | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received      |
|                              |  |  |                           |
|                              |  |  |                           |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                     | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received      |
|                              |  |  |                           |
|                              |  | \$   |                           |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                     | (c) FMV (or estimate) (see instructions)       | (d)<br>Date received      |
|                              |  |  |                           |
|                              |  | \$   |                           |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                     | (c) FMV (or estimate) (see instructions)       | (d)<br>Date received      |
|                              |  |  |                           |
|                              |  | \$   |                           |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                     | (c) FMV (or estimate) (see instructions)       | (d)<br>Date received      |
|                              |  |  |                           |
|                              |  | <br>  \$                                       |                           |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                     | (c) FMV (or estimate) (see instructions)       | (d)<br>Date received      |
|                              |  |  |                           |
|                              |  |  |                           |
| 453 12-21                    | 10   | Schedule R /Form (                             | 990, 990-EZ, or 990-PF) ( |

| Name of org               | ganization   | Employer identification number   |   |  |  |  |
|---------------------------|--|--|---|--|--|--|
| STEVE                     | NS FAMILY FOUNDATION, I  | ·NC .  | 46-1618021  |  |  |  |
| Part III                  | Exclusively religious, charitable, etc., indiverse year. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc.  Use duplicate copies of Part III if addition | ividual contributions to section 501(c)(<br>the following line entry. For organizations<br>tc., contributions of <b>\$1,000 or less</b> for th | 7), (8), or (10) organizations that total more than \$1,000 for the |  |  |  |
| (a) No.<br>from<br>Part I | (b) Purpose of gift  |  |   |  |  |  |
|                           |  |  |   |  |  |  |
|                           | (e) Transfer of gift   |  |   |  |  |  |
| -                         | Transferee's name, address, and ZIP + 4  |  | Relationship of transferor to transferee                            |  |  |  |
|                           |  |  |   |  |  |  |
| (a) No.<br>from<br>Part I | (b) Purpose of gift  | (c) Use of gift  | (d) Description of how gift is held                                 |  |  |  |
|                           |  |  |   |  |  |  |
| F                         | (e) Transfer of gift   |  |   |  |  |  |
| -                         | Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee   |  |   |  |  |  |
|                           |  |  |   |  |  |  |
| (a) No                    |  |  |   |  |  |  |
| (a) No.<br>from<br>Part I | (b) Purpose of gift  | (c) Use of gift  | (d) Description of how gift is held                                 |  |  |  |
|                           |  |  |   |  |  |  |
|                           |  |  |   |  |  |  |
|                           | (e) Transfer of gift   |  |   |  |  |  |
| -                         | Transferee's name, address, and ZIP + 4 Re   |  | Relationship of transferor to transferee                            |  |  |  |
|                           |  |  |   |  |  |  |
| (a) No.                   |  |  |   |  |  |  |
| from<br>Part I            | (b) Purpose of gift  | (c) Use of gift  | (d) Description of how gift is held                                 |  |  |  |
|                           |  |  |   |  |  |  |
|                           |  |  |   |  |  |  |
|                           | (e) Transfer of gift   |  |   |  |  |  |
| -                         | Transferee's name, address, and ZIP + 4  |  | Relationship of transferor to transferee                            |  |  |  |
|                           |  |  |   |  |  |  |
|                           |  |  |   |  |  |  |

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS

PART VII-A, LINE 10

NAME OF CONTRIBUTOR

ADDRESS

127 LAKE CREEK MEADOW DRIVE KETCHUM, ID 83340