

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-PF**

Department of the Treasury

Internal Revenue Service

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 Open to Public Inspection

For	caler	ndar year 2012, or tax year beginning			,	2012, and end	ding	, 20
		foundation		<u> </u>			A Employer identifi	cation number
Fi	<u>rs</u> t	Federal Foundation,	Inc	•		r	57-1141539	
Nun	nber a	and street (or P.O. box number if mail is not define	vered to st	reet address)		Room/suite	B Telephone numbe	r (see instructions)
<u>c/</u>	0 1	1329 Albion Avenue					(208) 878-0	466
City	or to	wn, state, and ZIP code					C If exempt, application	is pending, check here
ВU	RLE	EY ID 83318						_
G	heck	all that apply Initial return		Initial return o	of a former p	ublic charity	D 1. Foreign organiz	ations, check here
		Final return		Amended ret	urn		2. Foreign organization	ons meeting the 85%
		Address chang	e	Name change	9			id attach computation
НС	Check	type of organization. X Section 501(c)(3) exe	mpt private foun	dation		E If private foundation	on status was
	Sectio	on 4947(a)(1) nonexempt charitable trust		ner taxable priva		n	terminated under s 507(b)(1)(A), chec	
l Fa	ur ma	rket value of all assets at end of	Account	ng method X	Cash	Accrual]	
уe	ar (fr	om Part II, col (c), line 16)	Other	(specify)	_	,	F If the foundation is	
▶\$		1,257,695 (Pa	art I, colu	mn (d) must be	on cash bas	ıs)	termination under 507(b)(1)(B), chec	
Pa		Analysis of Revenue and Expenses	١.,	levenue and		İ		(d) Disbursements
		(The total of amounts in columns (b), (c), & (d) may not necessarily equal the	i .	penses per		vestment	(c) Adjusted net	for charitable
		amounts in column (a) (see instructions)		books	inco	ome	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received		35,579				
	2	(attach schedule)						·
	3	Interest on savings and temp, cash investments		61,807		61,807	61,807	
	4	Dividends and interest from securities						
	5 a	Gross rents						
R	b	Net rental					,	
E V	6 a	Net gain/(loss) from sale of assets not on line 10						
E	b	Gross sales price for all assets on line 6a						-
N	7	Capital gain net income (from Part IV, line 2)				0		
U	8	Net short-term capital gain					0	
Ε	9	Income modifications					0	
	10 a	Gross sales less						
	þ	Less Cost of goods sold						
	ლ ი	Gross profit or (loss) (attach schedule)						
	17	Other income (attach schedule) -					- · · ·	
	<u>12</u>	Total, Add lines 1 through 11		97,386		61,807	61,807	
O P	₫3	Compensation of officers, directors, trustees, etc		0				
E	14	Other employee salaries and wages · ·						
	45	Pension plans, employee benefits						
A T	7 6 a	Legal fees (attach schedule)					***************************************	
I.	∭ Þ	Accounting fees (attach schedule)						
N G		Other professional fees (attach schedule)						
&		Interest · · · · · ·		//	RECEI			
	₫§	Taxes (attach schedule) (see instructions# 1		/ p /622	L'CEI	622	622	
A D	49	Depreciation (attach sch.) and depletion		181		ED	,	
M	20	Occupancy		1°3/ 1V(1/200	\rightarrow		
Ň	21	Travel, conferences, and meetings ·			20 20	113 /8/		~~~
Ε	22	Printing and publications		OG	DEN I	1.41	•	
X	23	Other expenses (attach schedule)			KEN I	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
E	24	Total operating and administrative			''9	<u>'</u>		
N		expenses. Add lines 13 through 23		622		622	622	
S	25	Contributions, gifts, grants paid-		61,102			······································	61,102
Š	26	Total exp & disbursements Add lines 24 and 25		61,724		622	622	61,102
	27 a	Subtract line 26 from line 12 Excess of revenue over expenses				}		
	l	and disbursements		35,662		61 105		
	ł .	Net investment income (if neg , enter -0-)	}			61,185	C1 10F	
) C	Adjusted net income (if neg., enter -0-)	1				61,185	1

JVA

Da	rt II	Attached schedules and amounts in the description column should be for	Beginning of year	End o	of year
Га		end-of-year amounts only (See inst)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash non-interest-bearing · · · · ·	-294	32,068	
	2	Savings and temporary cash investments	1,222,326	1,225,627	1,225,627
	3	Accounts receivable ▶			·
		Less allowance for doubtful accts			
	4	Pledges receivable			
		Less allowance for doubtful accts			
	5	Grants receivable · · · ·			
A	6 7	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) Other notes and loans receivable (attach schedule)		as in a management management or again	
S		Less allowance for doubtful accounts		_	
S	8	Inventories for sale or use			
Т	9	Prepaid expenses and deferred charges			
S	10a	Investments U S and state govt. obligations (attach schedule)			
	b	Investments corporate stock (attach schedule)			
	11 C	Investments corporate bonds (attach schedule) Investments land, buildings, and equipment basis Less accumulated depreciation (attach schedule)			
	12	Investments mortgage loans · · · · · · · · ·			
	13	Investments other (attach schedule) · · · · · · · · · · · · · · · · · · ·			
	14	Land, buildings, and equipment basis			
		(attach schedule)			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers see the	1 222 222	1 257 605	1 257 605
		Instructions Also, see page 1, item I) · ·	1,222,032	1,257,695	1,257,695
L	17	Accounts payable and accrued expenses			-
A B	18	Grants payable · · · · · · ·			_
Ī	19	Deferred revenue · · · · ·			-
L	20	Loans from officers, directors, trustees, and other disqualified persons			
Ť	21	Mortgages and other notes payable (attach schedule)			
Ė	22	Other liabilities (describe			- 1
E S	23	Total liabilities (add lines 17 through 22)	0		<u>'</u>
	1	Foundations that follow SFAS 117, check here			!
ΝĒ.		and complete lines 24 through 26 and lines 30 and 31.	50 000	F 0 000	
ZEN.	24	Unrestricted ·	50,000	50,000	
T N D	25	Temporarily restricted · · · · · · · · · · · · · · · · · · ·	222,032	257,695	
A B	26	Permanently restricted · · · · · · · · · · · ·	950,000	950,000	4
ASSETS		Foundations that do not follow SFAS 117, ck. here And complete lines 27 through 31.			
ŢΑ	27	Capital stock, trust principal, or current funds	1,222,032	1,257,695	<u> </u>
ŠĊ	28	Paid-in or capital surplus, or land, bldg, and equipment fund			_
OE RS	29	Retained earnings, accumulated income, endowment, or other funds · · · ·			
- 3	30	Total net assets or fund balances (see instructions)	1,222,032	1,257,695	-
,	31	Total liabilities and net assets/fund balances (see instructions)	1,222,032	1,257,695	5
Pa	rt III	Analysis of Changes in Net Assets or Fund Ba	lances	·····	
1	Tota	I net assets or fund balances at beginning of year Part II, colum	n (a), line 30 (must agree	with	
	end	-of-year figure reported on prior year's return)	• • • • •	<u>1</u>	1,222,032
2	Ente	r amount from Part I, line 27a		2	35,662
3	Othe	er increases not included in line 2 (itemize)		3	
4	Add	lines 1, 2, and 3		4	1,257,694
5	Dec	reases not included in line 2 (itemize)		5	
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5)	Part II, column (b), line 30	. 6	1,257,694

First Federal Foundation, 57-1141539

Page 2

JVA

Form 990-PF (2012)

		Losses for Tax on Inv		<u>ome</u>			
• •		d(s) of property sold (e g , real		(b) How acquired P Purchase	(-)	e acquired	(d) Date sold
	2-story brick warehouse, or common stock, 200 shs MLC Co)			D Donation	(mo ,	day, yr)	(mo , day, yr.)
<u>1a</u>							
<u>b</u>							
							
е							
		(f) Depreciation allowed	(a) Cost	or other basis		(h) Gain	or (loss)
(e) Gross sales price		(or allowable)	, ,,,	pense of sale		• •	minus (g)
а				·			
b							
С							
d							
<u>e</u>			<u> </u>	4 4			
Complete only for ass	ets showing	gain in column (h) and owned					(h) gain minus
(i) F M V as of 12/31/6	59	(j) Adjusted basis as of 12/31/69	1 ' '	ess of col (i) ol. (j), if any	COI		less than -0-) or om col (h))
		23 01 12/01/03	0,010	OI. (j), II arry			
b							
C							
d							
е							
2 Capital gain net incom	e or (net cap	ortal loss) · If gain, a	lso enter in Part enter -0- in Part	I, line 7	2		(
3 Net short-term capital	gaın or (loss) as defined in sections 1222(5					····
If gain, also enter in Pa	art I, line 8, c	olumn (c) (see instructions)	•	→	İ		
If (loss), enter -0- in P					3		
		r Section 4940(e) for I				come	
(For optional use by dome	stic private to	oundations subject to the secti	on 4940(a) tax o	n net investment inco	me)		
If section 4940(d)(2) applie	s, leave this	part blank					
Was the foundation liable t	or the section	n 4942 tax on the distributable	amount of any	vear in the base perior	d?		∏ Yes ☒ No
		under section 4940(e) Do no			•		
1 Enter the appropriate	amount in ea	ach column for each year, see	the instructions	before making any en	tries		
(a)		(b)		(c)		5	(d)
Base period year Calendar year (or tax yea	r beg in)	Adjusted qualifying distribut	111	Net value of oncharitable-use assets		(col (b) c	ribution ratio livided by col (c))
2011			, 974	1,164,			0.05151
2010			, 466	1,166,			0.050115
2009			,895 ,210	1,091, 1,104,		 	0.052140
2008			,519	1,068,			0.050007 0.050092
2007			, 3 1 3	1,000,	100		0.030092
2 Total of line 1, colum	n (d)				.	2	0.253871
3 Average distribution r	atio for the 5	-year base penod divide th	e total on line 2	by 5, or by the number	-		0.2000
-		n existence if less than 5 years		•		3	0.050774
4 Enter the net value of	noncharitab	le-use assets for 2012 from P	art X, line 5 · · · ·			4	1,221,26
5 Multiply line 4 by line	3 .				_	5	62,00
5	. .	- (40(- 4 David Lag - 07h)				_	611
■ Enter 1% of net inves	unent incom	e (1% of Part I, line 27b)	•		·. -	6	61:
7 Add lines 5 and 6 ·						7	62,62
ridd iiridd o dirid o		·			-	-	32, 32.
8 Enter qualifying distri	butions from	Part XII, line 4				8	61,10
If line 8 is equal to or instructions	greater than	line 7, check the box in Part \	I, line 1b, and co	omplete that part using	g a 1% t	tax rate See	the Part VI

JVA

Form 990-PF (2012)

	990-PF(2012) First Federal Foundation, 57-1141539			F	age 4
Pai	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 see	instruc	ctions)	
1 a	Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary see inst.)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check				612
	here ► X and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%				
	of Part I, line 12, col (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				(
3	Add lines 1 and 2				612
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4			-	(
5	Tax based on investment Income. Subtract line 4 from line 3 If zero or less, enter -0 5				612
6	Credits/Payments			-	
а	2012 estimated tax payments and 2011 overpayment credited to 2012 · . 6a				
b	Exempt foreign organizations tax withheld at source 6b				
С	Tax paid with application for extension of time to file (Form 8868) 6c				
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d				(
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8				15
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	1			627
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
11	Enter the amount of line 10 to be Credited to 2013 estimated tax ▶ Refunded ▶ 11	1	-		
Pai	t VII-A Statements Regarding Activities				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate o	r	Γ.,	Yes	No
	intervene in any political campaign?		1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for				
	definition)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published				
	or distributed by the foundation in connection with the activities				
С	Did the foundation file Form 1120-POL for this year?		1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation . \blacktriangleright \$ 0 (2) On foundation managers \blacktriangleright \$	0	ļ		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers · • \$0				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		Χ
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		Χ
b	If "Yes," has it filed a tax return on Form 990-T for this year?		4b	N/A	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		_X
	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 yr? If "Yes," complete Part II, col (c), & Part XI	٧	7	Χ	
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	▶ ID				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or				
	designate) of each state as required by General Instruction G? If "No," attach explanation		8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	ļ			
	4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete	te			
	Part XIV		9	Χ_	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names	į			
	and addresses		10		Х
JVA	12 990PF4 TWF 990 Copyright Forms (Software Only) - 2012 TW	Form	990-	PF (2	2012)

Form	990-PF (2012)		P	age 5
Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	T		
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person			
	had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	L.
	Website address ▶ http://firstfd.com			
14	The books are in care of See attachment #2 Telephone no			
	Located at ► ZIP+4 ►			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 Check here			▶ [
	and enter the amount of tax-exempt interest received or accrued during the year 15			
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of the	ł		
	foreign country •			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			,
	File Form 4720 If any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)? Yes 🗓 No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in			
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		X
_	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
2	that were not corrected before the first day of the tax year beginning in 2012? Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	1c		X
2	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d			
а	and 6e, Part XIII) for tax year(s) beginning before 2012? Yes			
	If (Van " light the supers No. 20			
ь	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement see instructions)	2b		X
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20 , 20 , 20 , 20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business			
	enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	If the foundation had excess business holdings in 2012.)	1	1	3,7

JVA

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable

mm 990-PF (2012) First Federal Foundation,		Pa
Part VIII Information About Officers, Directors, Trustees, F and Contractors (continued)	oundation Managers, Highl	y Paid Employees
Five highest-paid independent contractors for professional services (see	instructions). If none, enter "NONI	<u> </u>
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
ONE		
otal number of others receiving over \$50,000 for professional services	· · ·	>
Summary of Direct Charitable Activities ist 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 produc		Expenses
,		
artix B Summary of Program-Related Investments (see ins	tructions)	
Describe the two largest program-related investments made by the foundation du		Amount
Contract in comment of the formation of	g jour on miles i und z	ATTOUT

Total, Add lines 1 through 3.

2

3

All other program-related investments See instructions

•

Pa	位义 Minimum Investment Return (All domestic foundations must complete this part. Foreign found see instructions.)	lations,	
1	Fair market value of assets not used (or held for use) directly in carrying out chantable, etc.,	- A	
	purposes		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	1,239,863
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	1,239,863
е	Reduction claimed for blockage or other factors reported on lines 1a and	77 ki to 167 188 t	
	1c (attach detailed explanation) .	5,80 E	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	1,239,863
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	18,598
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	1,221,265
6	Minimum investment return. Enter 5% of line 5	6	61,063
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating		
	foundations and certain foreign organizations check here 🕨 🛛 and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1 1	
2a	Tax on investment income for 2012 from Part VI, line 5 2a	f^\.	-
b	Income tax for 2012 (This does not include the tax from Part VI)		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	
Pai	ThXIII Qualifying Distributions (see instructions)		
	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	- - - - - - - - - -	
1	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	200	61,102
a	Program-related investments total from Part IX-B	1a	01,102
b	•	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Suitability test (prior IRS approval required)	1	
a		3a	
b	Cash distribution test (attach the required schedule)	3b	C1 100
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	61,102
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		<i></i>
_	Enter 1% of Part I, line 27b (see instructions)	. 5	612
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	60,490
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	e foundati	on
	qualifies for the section 4940(e) reduction of tax in those years		000 DE (

	TOXIV. Private Operating Found		-			
1a				ating		
	foundation, and the ruling is effective for		_	•	J . T	T -
	Check box to indicate whether the found		ating foundation des		4942(J)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	(L) 0044	Prior 3 years	(I) 0000	(e) Total
	investment return from Part X for each	(a) 2012 61,063	(b) 2011 59, 630	(c) 2010	(d) 2009	
L	year listed	51,904	50,686	58,332 49,582	54,559 46,375	
	85% of line 2a	31,904	30,666	49,362	40,3/3	198,546
С	Qualifying distributions from Part XII, line 4 for each year listed	61,102	50,686	49,582	56,895	218,265
d	Amounts included in line 2c not used directly for active conduct exempt act					0
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	61,102	50,686	49,582	56,895	218,265
3 a	Complete 3a, b, or c for the alternative test relied upon "Assets" alternative test enter.					
	(1) Value of all assets	1,257,695	1,222,032	1,199,486	1,169,324	4,848,537
b	section 4942(j)(3)(B)(i)	1,257,695	1,222,032	1,199,486	1,169,324	4,848,537
	2/3 of min investment return shown in Part X, line 6 for each year listed	40,709	39,773	38,888	37,877	157,247
С	"Support" alternative test enter (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)					
	(5)), or royalties). (2) Support from general public and	35,579	22,432	30,991	32,066	121,068
	5 or more exempt organizations as provided in section 4942(j)(3) (B)(III)	35,579	22,432		32,066	121,068
	(3) Largest amount of support from an exempt organization					0
	(4) Gross investment income	61,807	60,688	58,661	56,249	
Paı	nt XV Supplementary Informati	•	•	he foundation	had \$5,000 or ı	more in assets
	at any time during the ye		uctions.)			
1	Information Regarding Foundation Ma	-				
а	List any managers of the foundation who close of any tax year (but only if they have				ved by the foundation	on before the
	None					
b	List any managers of the foundation who of a partnership or other entity) of which t				arge portion of the	ownership
	None				***	
2	Information Regarding Contribution, G Check here ▶ ☐ If the foundation only requests for funds If the foundation make complete items 2a, b, c, and d	makes contributions t	o preselected charit	able organizations ar	·	
а	The name, address, and telephone numb	per or e-mail of the pe	rson to whom applic	ations should be ad	dressed	· · · · · · · · · · · · · · · · · · ·
b	The form in which applications should be	submitted and inform	ation and materials t	they should include		·
С	Any submission deadlines					
d	Any restrictions or limitations on awards,	such as by geographic	cal areas, charitable	fields, kinds of institu	itions or other factor	ors
	, s. minimum on arrando,		a sas, onanasic	midd of malitt	aono, or other facto	

JVA

Grants and Contributions Paid Dur	ing the Year or Ap	provea to	or Future Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)		recipient		
Name and address (home or business) a Paid during the year See attachment #4	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	Amount
Total · · · · · · · · · · · · · · · · · · ·			▶ 3a	61,10
b Approved for future payment				
Total			▶ 3h	1

TWF 990

Part XVI-A Analysis of Income-Prod	ucing Activ	ities			
Enter gross amounts unless otherwise indicated	Unrelate	ed business income	Excluded	by section 512, 513, or 514	(e)
	(a)	(b)	(c)	(d)	Related or exempt function income
	Business	Amount	Excl	Amount	(See instructions)
1 Program service revenue	code		code		
a					
b					
c					
d					
е					
f					
9 Fees & contracts from government agencies					
2 Membership dues and assessments		· · · · · · · · · · · · · · · · · · ·			
3 Interest on savings and temporary cash investments	999999				61,807
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate					
a Debt-financed property				11-	
b Not debt-financed property					
6 Net rental income or (loss) from personal property.					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events · · · ·					
10 Gross profit or (loss) from sales of inventory		•			
11 Other revenue a					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)			0	0	61,807
13 Total. Add line 12, columns (b), (d), and (e)	\			13	61,807
See worksheet in line 13 instructions to verify calcul	ations)				·
Part XVI-B Relationship of Activities		omplishment of F	xempt	Purnoses	
Line No. Explain below how each activity for					ntly to the
accomplishment of the foundation's					

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the
T	accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)

(;	a) Name of organization	(b) Type of organi	zation	(c) Descrip	tion of rela	tionship	
Sign Here	der penalties of perjury, I declare that I have lief, it is true, correct, and complete. Declarati	examined this return, including a on of preparer (other than taxpa	ccompanying schedules and sta yer) is based on all information	itements, and to	rer has any k May the IR	my knowledge nowledge S discuss this r	return
	Signature of officer or trustee	Date	Title			tions)? X Yes	
Paid	Print/Type preparer's name Scoper D. West Fall	Preparer's signature	Date 11-07-2		ck lf employed	PTIN P00021	176
Preparer 1 Use Only	Firm's name > WESTFALL &	WESTFALL /	/		▶82-0	527818	

Firm's address ▶ 1

Phone no

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

2012

Employer identification number

First Federal Foundation, Inc. 57-1141539 Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 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 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, chantable, 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 rt 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)

	3 (Form 990, 990-EZ, or 990-PF) (2012) First Federal F	oundation, 57-1	Page 2
	rganization : <u>Federal Foundation, Inc.</u>		ployer identification number -1141539
Part I	Contributors (see instructions) Use duplicate copies of Part I if a		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	First Federal Savings Bank 383 Shoshone St N Twin Falls, ID 83301-	\$ <u>29,742</u>	Person X Payroli Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution)

990 SCHEDULE OF TAXES PAID

<u>page 1 - 990- PF Page 1, Part I, Line 18</u> Attachment 1: Open to Public Inspection For calendar year 2012, or tax period beginning , and ending Name of Organization Employer Identification Number 57-1141539 First Federal Foundation, Inc. Adjusted Disbursements for Net Investment Category Amount Net Income Charity Income 622 622 622 Excise Tax 622 622 622 Total:

JVA

990 BOOKS ARE IN CARE OF

Attachment 2 - 990-PF Page 5, Part	VII-A, Line 14
Open to Public	
Inspection For calendar year 2012, or tax period beginning	
Name of Organization	Employer Identification Number
First Federal Foundation, Inc.	57-1141539
Part VII-A - Line 14	
Individual Name	Michael Traveller
or	
Business Name	
Street Address .	383 Shoshone St N.
U.S. Address	
Zip code 83301 City Twin Fal	<u>ls</u> State <u>ID</u>
Foreign Address	
Toroign Addicas	
City	
Province or State	
Country	· · · · · · · · · · · · · · · · · · ·
Postal code	
Phone Number	· · <u>(208)733-4222</u>
Fax Number	

990 CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

Attachment 3: page 1 - 990-PF Page 6, Part VIII
Open to Public

Inspection For calendar year 2012, or tax period beginning , and ending

Name of Organization Employer Identification Number

First Federal Foundation	, Inc.	Enc. 57-1141539				
(A) Name and Address				(E) Expense Account		
	Hrs per Week	not paid, enter 0)	Ben Plans & Def. Comp	& Other Allowances		
Rex Lytle 1925 Kimberly Rd TWIN FALLS, ID 83301	President 4.00	0	0	0		
Becky Curtis 819 Canyon Park Ave Twin Falls, ID 83301	Secretary	0	0	0		
Kevin Welch 18 Granada Place BURLEY, ID 83318	Director	0	0	0		
Jan McBride 2749 Suncrest Twin Falls, ID 83301	Director	0	0	0		
Barbara Gietzen 601 11th Buhl, ID 83316	Director	0	0	0		
Rob Newman 1021 I St Rupert, ID 83350	Director	0	0	0		
Linda Watkins 4038 N Canyon Ridge Dr Twin Falls, ID 83301	Director	0	0	0		
Ron Rasmussen 3697 N 2570 E Twin Falls, ID 83301	Director	0	0	0		
Brian Williams 339 N 300 E JEROME, ID 83338	Director	0	0	0		

990 GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

Attachment 4: page 1 990-PF Page 11, Part XV Line 3a

Open to Pu

Inspection For calendar year 2012, or tax period beginning , and ending Name of Organization

Name of Organization Employer Identification Number First Federal Foundation, Inc. 57-1141539

Recipient	If Recipient is an Individual Show any Relationship to Any Foundation Manager	Foundation Status of	Purpose of Grant or Contribution	Amount
Name and Address (home or business)	or Substantial Contributor			
Jerome County Senior Citizens Servi 520 N. Lincoln Jerome ID 83338	none	501c3	Repair damaged flooring	1,000
Magic Valley Symphony Orchestra Inc PO Box 1805 Twin Falls ID 83303	none	501c3	Music equipment	1,000
Twin Falls County Idaho PO Box 126 Twin Falls ID 83303	none	govt	purchase safety equipment	1,225
Twin Falls Senior Citizen Foundtn I 530 Shoshone St W	none	501c3	purchase safety equipment	1 075
Twin Falls ID 83303				1,275
West End Ministerial Assn PO Box 206 Buhl ID 83316	none	501c3	Concrete walkway	1,300
Fiddlers Inc 104 S 1st Ave Bellevue ID 83313	none	501c3	mobile stage	1,500
Salvation Army PO Box 166 Twin Falls ID 83303	none	501c3	upgrade hot water system	1,564
Crisis Center of Magic Valley PO Box 2444	none	501c3	safety equipment & safety doors	
Twin Falls ID 83303				1,630
Lincoln County Historical Society 102 S Rail St E Shoshone ID 83352	none	501c3	display cases	1,945
Oakley Valley Arts Council PO Box 176 Oakley ID 83346	none	501c3	Repair and paint facility	1,950
Jerome Public Library 100 1st Ave E	none	govt machir	DVD cleaning mmachine	
			Total:	14,389

990 GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

Attachment 4: page 2 990-PF Page 11, Part XV Line 3a

Open to Pu

Inspection For calendar year 2012, or tax period beginning , and ending

Name of Organization Employer Identification Number First Federal Foundation, Inc. 57-1141539

Recipient	If Recipient is an individual,	1	1	
	Show any Relationship to Any Foundation Manager	Status of	Purpose of Grant or Contribution	Amount
Name and Address (home or business)	or Substantial Contributor	Recipient		
Jerome ID 83338				1,995
Magic Valley Arts Council 195 River Vista Place Twin Falls ID 83301	none	501c3	video audio support	2,000
South Central Public Health Dist 1020 Washington St N Twin Falls ID 83301	none	govt	health equipment	2,000
Valley Housing Coalition PO Box 774 Twin Falls ID 83303	none	501c3	renovate building	2,000
Victory Home Twin Falls 450 3rd Ave West Twin Falls ID 83301	none	501c3	purchase copy machine	2,000
Murtaugh School District PO Box 117 Murtaugh ID 83344	none	govt	purchase equipment	2,250
North Canyon Medical 267 North Canyon Drive Gooding ID 83330	none	501c3	life support equipment	2,390
City of Twin Falls Baseball PO Box 1182 Twin Falls ID 83303	none	govt	new facility construction	2,500
Ida Ed Services for Deaf Blind 714 Main St	none	501c3	computers and televisions	·
Gooding ID 83330 Boys & Girls Clubs MV 999 Frontier Road	none	501c3	repair facility	2,632
Twin Falls ID 83301 Jubilee House Inc 315 Grandview Drive Twin Falls ID 83301	none	501c3	purchase furniture for group home	2,983 3,020
Magic Valley Philharmonic PO Box 939 Twin Falls ID 83303	none	501c3	purchase music equipment	3,533
			Total:	29,303

990 GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

Attachment 4: page 3 990-PF Page 11, Part XV Line 3a

Open to Pu

Inspection For calendar year 2012, or tax period beginning and ending

Name of Organization

Employer Identification Number

57-1141539

First Federal Foundation,	Foundation, Inc. 57-11415			339
Recipient	If Recipient is an Individual, Show any Relationship to Any Foundation Manager	Status of	Purpose of Grant or Contribution	Amount
Name and Address (home or business)	or Substantial Contributor	Recipient		
Rotary District 5400 Charitable Pro 441 Eastgate Drive Twin Falls ID 83301	none	501c3	new youth building	3,750
New Hope Transition Center 425 2ne Ave N Twin Falls ID 83301	none		bedding and office equipment	4,175
Kimberly School District 141 Center St W Kimberly ID 83341	none	govt	sound system	4,485
Minidoka Memorial Hospital 1224 8th St	none	govt	replace carpet	
Rupert ID 83350				5 , 000
			Total	17 410

Total: 17,410

12_EOPFGR152

	68 (Rev. 1-2013)							ge 2
	are filing for an Additional (Not Automatic) 3-Me							$\overline{\mathbf{V}}$
	Only complete Part II if you have already been gran				filed	Form 88	68.	
	are filing for an Automatic 3-Month Extension,							
Part	Additional (Not Automatic) 3-Month E	xtension	of Time. Only file th	e original (no copi	es ne	eeded).		
				Enter filer's identifyin				ions
Гуре о	Name of exempt organization or other filer, see in	nstructions.	E	mployer identification	ployer identification number (EIN) or			
orint	FIRST FEDERAL FOUNDATION, INC				1415			
ile by th	Number, street, and room or suite no. If a P.O. box, see instructions. Social security number			(SSN))			
lue date	for C/O 1329 ALBION AVE							
ilıng you eturn. Sı		r a foreign a	ddress, see instructions.					
nstructio								
Enter tl	he Return code for the return that this application i	s for (file a	separate application f	or each return) .			0	4
Applic	cation	Return	Application	 			Retur	rn
Is For		Code	Is For				Code	
Form	990 or Form 990-EZ	01						33
Form	990-BL	02	Form 1041-A				08	
Form	4720 (individual)	03	Form 4720				09	
	990-PF	04	Form 5227				10	
Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069				11				
Form 990-T (trust other than above) 06 Form 8870			12					
STOP!	Do not complete Part II if you were not already gra	anted an au	ntomatic 3-month exte	ension on a previous	ly file	ed Form 8	3868.	
The b	pooks are in the care of ► STEPHEN D WESTFALL,							
	phone No. ► 208-878-0466			08-878-0467				
	organization does not have an office or place of b						•	Ш
	is for a Group Return, enter the organization's fou					If thi		
	whole group, check this box $\dots \blacktriangleright \square$. If		t of the group, check t	his box	▶ [_ and att	ach a	
ist with	the names and EINs of all members the extension	n is for.						
	Lucione de la constitución de disease de din	mail	NOVEMBED 15	20 12				
4	I request an additional 3-month extension of time	unu	NOVEWBER 13	, 20 13			20	
5	For calendar year 2012, or other tax year beginning	ng	, ZU	i return Final	l rotuu		. ' 20	· ·
	If the tax year entered in line 5 is for less than 12 r	nonths, ch	eck reason. Initia	птетитт — гна	retui	11		
	Change in accounting period							
	State in detail why you need the extension					•		·
	WAITING FOR COMPLETE INFORMATION							
8a	If this application is for Form 990-BL, 990-PF, 990	D-T 4720	or 6069, enter the tent	tative tax, less any		l		
	nonrefundable credits. See instructions.	0 1, 4720,	or cood, critor the term	ativo tas, 1000 any	8a	s		
	If this application is for Form 990-PF, 990-T,	4720 or 6	069 enter any refun	dable credits and	5	Ť		
b	estimated tax payments made. Include any price			a credit and any				
	amount paid previously with Form 8868.	n year ove	apaymont anowed as	a order and any	8b			
С	Balance due. Subtract line 8b from line 8a. Include yo	our navmen	t with this form if requir	ed, by using FFTPS	00			—
U	(Electronic Federal Tax Payment System). See instruc		uno tottin ii roquii	, -,g 1. 0	8c	\$		

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete, and that I am authorized to prepare this form.

Signature Title

Dorector

Date \$ //3 //3 Form 8868 (Rev. 1-2013)

mailed 8-13-13

Form **8868**

(Rev January 2013)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No. 1545-1709

• If you	are filing for an Automatic 3-Month Extension, of are filing for an Additional (Not Automatic) 3-Month complete Part II unless you have already been of	onth Exten	sion, complete onl	y Part II (on page 2 of	this f	orm).	
Electro a corpo 8868 to Return	onic filing (e-file). You can electronically file Form oration required to file Form 990-T), or an addition or request an extension of time to file any of the for Transfers Associated With Certain Persona ions). For more details on the electronic filing of the	8868 if yo al (not auto forms listed Benefit (u need a 3-month a omatic) 3-month ext d in Part I or Part II Contracts, which me	utomatic extension of ension of time. You ca with the exception of ust be sent to the IR	time in ele Forn IS in	to file (6 ctronica n 8870, paper	months for ally file Form Information format (see
	oration required to file Form 990-T and reque	sting an a	utomatic 6-month	extension-check this			
	nly (including 1120-C filers), partnersh			7004 to rece			
	er corporations (including 1120-C tilers), partnersh ncome tax returns.	iips, HEIVIIC	os, and trusts must t	use ronn 7004 to requ	iest a	ii exteri	sion or unie
				Enter filer's identifying	g num	ber, see	instructions
Type o	Name of exempt organization or other filer, see in	nstructions.		Employer identification	numb	er (EIN) c	or
print	FIRST FEDERAL FOUNDATION, INC			57-1	14153	19	
File by the	Number, street, and room or suite no. If a P.O. be	ox, see instr	uctions.	Social security number	(SSN)		
due date	for C/O 1329 ALBION AVE						
filing your return Se instructio	e Oily, to my or post smoot state, and an occurre	r a foreign a	ddress, see instruction	s.			
Enter th	ne Return code for the return that this application	is for (file a	separate application	n for each return) .			. 0 4
Applic Is For		Return Code	Application Is For				Return Code
Form 9	990 or Form 990-EZ	01	Form 990-T (corpo	oration)			07
	990-BL	02	Form 1041-A				08
	4720 (individual)	03	Form 4720				09
	990-PF	04	Form 5227				10
Form 9	990-T (sec. 401(a) or 408(a) trust)	05	Form 6069				11
Form 9	990-T (trust other than above)	06	Form 8870				12
Telep	shone No. ► 208-878-0466	F	:AX No. ►	208-878-0467			
• If the	organization does not have an office or place of b	ousiness in	the United States, c	heck this box			
	is for a Group Return, enter the organization's for					. If th	
	whole group, check this box $\dots \blacktriangleright \square$. If ith the names and EINs of all members the extens		t of the group, chec	k this box	▶ [_ and a	tacn
	I request an automatic 3-month (6 months for a co		required to file Form	990-T) extension of ti	me		
•	until AUGUST 15 , 20 13 , to file the exe	mpt organi	zation return for the	organization named al	bove.	The ext	tension is
	for the organization's return for:			J			
	► ☑ calendar year 20 12 or						
	► ☐ tax year beginning	, 20	, and ending			, 20	
	tax year beginning If the tax year entered in line 1 is for less than 12 is Change in accounting period	months, ch	eck reason: 🔲 Initi	al return 🔲 Final ret	um		
3a	If this application is for Form 990-BL, 990-PF, 99	0-T, 4720,	or 6069, enter the t	entative tax, less any			
	nonrefundable credits. See instructions.				3a	\$	00
b	If this application is for Form 990-PF, 990-T, estimated tax payments made. Include any prior	4120, or to year overpa	ayment allowed as a	credit.	3b	\$	00
	Balance due. Subtract line 3b from line 3a. Include	de your pay	ment with this form				
Caution	EFTPS (Electronic Federal Tax Payment System). If you are going to make an electronic fund withdrawa			53-EO and Form 8879-E	3c O for p		instructions.

mailed 5-14-13

Form **8868** (Rev. 1-2013)