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For calendar year 2012 or tax year beginning

SCHMITZ FAMILY FOUNDATION

Number and street (or P O box number if mail is not delivered to street address)

Department of the Treasury Internal Revenue Service

Name of foundation

C/O ANNIE MCBOURNIE

### Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation

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

Room/suite

 $\overline{12/01}$  , 2012, and ending

OMB No 1545-0052

(303) 365-3700

A Employer identification number

B Telephone number (see instructions)

84-1548781

12/31, **20** 12

6500 E. HAMPDEN AVENUE 203 City or town, state, and ZIP code C If exemption application is pending, check here DENVER, CO 80224 G Check all that apply Initial return Initial return of a former public charity 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach Address change Name change computation . . . . . H Check type of organization X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here . Fair market value of all assets at end J Accounting method | X Cash Accrual If the foundation is in a 60-month termination of year (from Part II, col (c), line Other (specify) under section 507(b)(1)(B), check here . > 20,239,472. *16)* ▶ \$ (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net total of amounts in columns (b), (c), and (d) for charitable expenses per may not necessarily equal the amounts in ıncome ıncome purposes books column (a) (see instructions) ) (cash basis only) 250,000. 1 Contributions, gifts, grants, etc., received (attach schedule) if the foundation is not required to 2 attach Sch B . . . . . . . . . . . . Interest on savings and temporary cash investments 46,213 46,213 ATCH 1 Dividends and interest from securities . . . . SCANNED JUL 2 , b Net rental income or (loss) 23,660 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 282,149 assets on line 6a 23,660 Capital gain net income (from Part IV, line 2) . Income modifications Gross sales less returns and allowances · · · b Less Cost of goods sold c Gross profit or (loss) (attach schedule) Other income (attach schedule) ATCH 2... 224,887 224,887 544,760 294,760 Total. Add lines 1 through 11 . . . . . 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages . . . . . 15 Pension plans, employee benefits . . . . . . O: 16a Legal fees (attach schedule) ŭ **b** Accounting fees (attach schedule) . . . . . S **Administrative** 150. 1 5.0. c Other professional fees (attach schedule) . \*. . 2 17 18 Taxes (attach schedule) (see instructions) . . . . . 19 Depreciation (attach schedule) and depletion. 20 P 21 Travel, conferences, and meetings . . . . . Printing and publications . . . . . . . . . . 22 Operating Other expenses (attach schedule) . . . . . 23 24 Total operating and administrative expenses. 150 150. Add lines 13 through 23 ...... 25 Contributions, gifts, grants paid . . . . . . 150. 150 Total expenses and disbursements, Add lines 24 and 25 27 Subtract line 26 from line 12 544,610

JSA For Paperwork Reduction Act Notice, see instructions.

a Excess of revenue over expenses and disbursements

b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-). .

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294,610

\*ATCH 3

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E	art <sup>a</sup> l	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	f year
-	au cu	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	288,675.	452,157.	452,157.
	2	Savings and temporary cash investments	1 (00 707 1	987,979.	987,979.
	3	Accounts receivable			
		Less allowance for doubtful accounts ▶			<del>-</del>
	4	Pledges receivable			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)	I I		
	7	Other notes and loans receivable (attach schedule)   *		* 7,322,548.	,··· () =
	-	Less allowance for doubtful accounts			i
Ø	8	Inventories for sale or use		.,,	,,000,000
Assets	9	Prepaid expenses and deferred charges		<del></del>	·
As	10.0				
		Investments - U S and state government obligations (attach schedule).		···	
		Investments - corporate stock (attach schedule)			
	11 6	Investments - corporate bonds (attach schedule)			
		and equipment basis	1		
		(attach schedule)			
	12	Investments - mortgage loans	9,972,910.	11 240 002	11 476 700
	13 14	Land, buildings, and		11,249,883.	11,476,788
		equipment basis Less accumulated depreciation (attach schedule)  Other assets (describe)			
	15	Other assets (describe		······································	
	16	Total assets (to be completed by all filers - see the		00 010 545	
_		ınstructions Also, see page 1, item I)		20,012,567.	20,239,472.
	17	Accounts payable and accrued expenses			i
	18	Grants payable			
ies	19	Deferred revenue			
iabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
jab	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe			
			1		
_	23	Total liabilities (add lines 17 through 22)	<del></del>	0	
		Foundations that follow SFAS 117, check here $\blacktriangleright X$			
S		and complete lines 24 through 26 and lines 30 and 31.			
nces	24	Unrestricted	19,220,860.	20,012,567.	
or Fund Balar	25	Temporarily restricted			
8	26	Permanently restricted			
ù		Foundations that do not follow SFAS 117,			
ř		check here and complete lines 27 through 31. ▶			
S	27	Capital stock, trust principal, or current funds			
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
As	29	Retained earnings, accumulated income, endowment, or other funds			
	30	Total net assets or fund balances (see instructions)	19,220,860.	20,012,567.	
z	31	Total liabilities and net assets/fund balances (see			
		instructions)	19,220,860.	20,012,567.	
P	art II	Analysis of Changes in Net Assets or Fund	Balances		
		I net assets or fund balances at beginning of year - Part		must agree with	
		of-year figure reported on prior year's return)			19,220,860.
2	Ente	r amount from Part I, line 27a		2	544,610.
3	Othe	r amount from Part I, line 27a er increases not included in line 2 (itemize) ► ATCH 5		3	255,848.
4	Add				20,021,318
		eases not included in line 2 (itemize) ATCH 6		5	8,751
		I net assets or fund balances at end of year (line 4 minus	line 5) - Part II, column (b)		20,012,567
<u> </u>	. 5.0	the state of the s	o, i art ii, coluiiiii (b)	,, <u>0</u>	

(a) List and	and Losses for Tax on Investigation and Losses for Tax on Investig	e g , real estate,	(b) How acquired	(c) Date acquired	(d) Date sold
	rick warehouse, or common stock, 200	shs MLC Co.)	P - Purchase D - Donation	(mo , day, yr )	(mo , day, yr )
a SEE PART IV SCHE	DULE		<u> </u>		
b		<del></del>	ļ	_	ļ
<u>c</u>				_	
<u>d</u>	<del></del>		<u> </u>		
<u>e</u>	10.70	(a) Cook or other book	<del> </del>	1	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (le (e) plus (f) min	
<u>a</u>					
c					
d			<u> </u>		
e		<u> </u>	ļ		
Complete only for assets	showing gain in column (h) and owne	d by the foundation on 12/31/69		Gains (Col (h) g	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (j), ıf any	col	(k), but not less Losses (from c	
a					
b					
С					
d					
e			ļ		15
Capital gain net income or		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		23,660.
Net short-term capital gain	i or (loss) as defined in sections 12	,	-	<del> </del>	
	t I, line 8, column (c) (see insti				
_	<u> </u>		3		0
Part V Qualification L	Jnder Section 4940(e) for Red	duced Tax on Net Investment I	ncome		
	the section 4942 tax on the distrib not qualify under section 4940(e)	outable amount of any year in the b	ase perio	d? [	Yes X N
		, see the instructions before making	a any ontr		
(a)			g any enu	(d)	
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution (col (b) divided b	
2011	580,725.	18,375,661.		(cor (b) divided b	0.031603
2010	499,150.	12,338,273.	<del>                                     </del>		0.040455
2009	72,275.	3,860,865.	<del>                                     </del>		0.018720
2008	292,852.	3,502,623.			0.083609
2007	336,483.	4,627,631.	<u> </u>	-	0.072712
		<u> </u>			
Total of line 1, column (d)			2		0.247099
Average distribution ratio	for the 5-year base period - divide	the total on line 2 by 5, or by the			·-
number of years the found	dation has been in existence if less	s than 5 years	3	<del></del>	0.049420
Enter the net value of non	charitable-use assets for 2012 fro	om Part X, line 5	4	17	945,143.
Multiply line 4 by line 3			5	<del></del>	
Enter 1% of net investmen			1		886,849.
	nt income (1% of Part I, line 27b)		6		886,849. 2,946.
Add lines 5 and 6			7		
			7		2,946. 889,795.

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Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	struc	tions	)
1a	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 instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		5,8	92.
	here 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-) 2			
3	Add lines 1 and 2		5,8	92.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		5,8	92.
6	Credits/Payments			
а	2012 estimated tax payments and 2011 overpayment credited to 2012 6a 68,000.			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868) 6c 6c			
d	Backup withholding erroneously withheld		co c	
7	Total credits and payments Add lines 6a through 6d	-	68,0	<u> </u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		62,1	00
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.		02,1	.00.
11	Enter the amount of line 10 to be Credited to 2013 estimated tax   62,108. Refunded  11			
	t VII-A Statements Regarding Activities			N <sub>2</sub>
та	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate	1a	Yes	No X
<b>.</b>	or intervene in any political campaign?  Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the	ıa	-	
U		1b		х
	definition)?  If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	-10		
	distributed by the foundation in connection with the activities			
c	Did the foundation file Form 1120-POL for this year?	1c	-	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
_	(1) On the foundation \$ (2) On foundation managers \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
	foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
	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_		X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		
_	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			t
	<ul> <li>By language in the governing instrument, or</li> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict</li> </ul>			
	with the state law remain in the governing instrument?	6		х
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Х	
, 8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	CO,			
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			
	4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete			
	Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and			
	addresses	10		Х

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2b

3 b

4a

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here

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 

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

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise

Х

 $\overline{\mathbf{x}}$ 

rorm	990-PF (2012) SCHITTE FARITE	1 FOUNDATION			04-1	340/01	Page <b>b</b>		
Pa	rt VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requi	red (contin	ued)				
5a	During the year did the foundation pay or incur any amou	nt to		-					
	'(1) Carry on propaganda, or otherwise attempt to influer	nce legislation (section	1 4945(e))?	Yes	X No				
	(2) Influence the outcome of any specific public ele				Ш -	+ 1			
	directly or indirectly, any voter registration drive?	· · · · · · · · · · · · · · · · · · ·	•	· —	X No				
	(3) Provide a grant to an individual for travel, study, or other				X No				
	(4) Provide a grant to an organization other than a				110				
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (s				X No				
					LT NO		1		
	(5) Provide for any purpose other than religious, ch				[₹]				
	purposes, or for the prevention of cruelty to children or animals? Yes X No								
O	If any answer is "Yes" to 5a(1)-(5), did any of the								
		Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?							
	Organizations relying on a current notice regarding disast				▶[	_			
С	If the answer is "Yes" to question 5a(4), does the								
	because it maintained expenditure responsibility for the gi	rant?		Yes	X No				
	If "Yes," attach the statement required by Regulations sect	tion 53 4945-5(d)							
6a	Did the foundation, during the year, receive any fund								
	on a personal benefit contract?			. Yes	X No				
b	Did the foundation, during the year, pay premiums, direct					6b	X		
	If "Yes" to 6b, file Form 8870								
7 a	At any time during the tax year, was the foundation a pai	rty to a prohibited tax	shelter transaction?	Yes	No		'		
b	If "Yes," did the foundation receive any proceeds or have	anv net income attri	outable to the transaction			7b	X		
	t VIII Information About Officers, Directors	, Trustees, Foun	dation Managers.	Highly Pai	d Emplo				
1	and Contractors		_		-				
<u> </u>	List all officers, directors, trustees, foundation n	(b) Title, and average	(c) Compensation (see	(d) Contribut					
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee bend and deferred cor	efit plans	(e) Expense other allow			
			enter -0-j	and deteried cor	ilperisation				
ATO	CH 7		o		d		0		
					<del>}</del>	·			
				<del></del>					
					l				
2	Companyation of five highest said ampleyees	/a4ba- 4ba- 4ba-	a included on the	4	1		<del></del> -		
_	Compensation of five highest-paid employees "NONE."	(other than thos	se included on line	1 - See I	nstructio	ns). It nor	ie, enter		
		(b) Title, and average		(d) Contribu					
(a	) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee t plans and d		(e) Expense other allow			
		devoted to position	· · · · · · · · · · · · · · · · · · ·	compens	ation				
	NONE								
	NONE			·					
				-					
Tota	I number of other employees paid over \$50,000 .								
				_ · · · · · · · · · · · · · · · · · · ·					

Form 990-PF (2012) Page 7 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE 0 Total number of others receiving over \$50,000 for professional services Part IX-A **Summary of Direct Charitable Activities** List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc. Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount NONE All other program-related investments See instructions 3 NONE

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Total. Add lines 1 through 3.

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreity see instructions.)	gn founda	tions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		<del></del>
	purposes		
а	Average monthly fair market value of securities	1a	5,277,866.
b	Average of monthly cash balances	1b	1,690,117.
С	Fair market value of all other assets (see instructions)	1c	11,250,436.
d		1d	18,218,419.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3		3	18,218,419.
4	Subtract line 2 from line 1d		
	Instructions)  Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	4	273,276.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	17,945,143.
6	Minimum investment return. Enter 5% of line 5	6	75,997.
Pá	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating		
	foundations and certain foreign organizations check here ▶ and do not complete this	<del></del>	
1	Minimum investment return from Part X, line 6	1	75,997.
2 a		<u>.</u>	
b	/	<b>↓</b>	
C		2c	5,892.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	70,105.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	70,105.
6	Deduction from distributable amount (see instructions)  Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	70,105.
Pa	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	I I	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	
b	Program-related investments - total from Part IX-B  Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1b	
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		
а	Suitability test (prior IRS approval required)	3a	
b	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	
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see instructions)	5	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 ca qualifies for the section 4940(e) reduction of tax in those years	Iculating w	hether the foundation

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Part XIII Undistributed Income (see instructions) (a) (d) (c) Corpus Years prior to 2011 2011 2012 Distributable amount for 2012 from Part XI, 70,105. Undistributed income, if any, as of the end of 2012 Enter amount for 2011 only . . Total for pnor years 20 10 20 09 20 08 Excess distributions carryover, if any, to 2012 From 2007 . . . . . . From 2008 . . . . . . 37,265. From 2009 . . . . . . **d** From 2010 . . . . . . From 2011 . . . . . . 37,265. Total of lines 3a through e . . . . . . . . . . . . Qualifying distributions for 2012 from Part XII. line 4 ▶ \$ a Applied to 2011, but not more than line 2a . . . Applied to undistributed income of prior years (Election required - see instructions) . . . . . Treated as distributions out of corpus (Election d Applied to 2012 distributable amount . . . . . e Remaining amount distributed out of corpus . . Excess distributions carryover applied to 2012 37,265 37,265. (If an amount appears in column (d), the same amount must be shown in column (a) ) Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e. Subtract line 5 Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed . . . . . . . . . . . . . d Subtract line 6c from line 6b Taxable amount - see instructions . . Undistributed income for 2011 Subtract line 4a from line 2a Taxable amount - see f Undistributed income for 2012 Subtract lines 4d and 5 from line 1. This amount must be 32,840. Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) . . . Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions) . . . Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a . . . . . . . Analysis of line 9 a Excess from 2008 . . . Excess from 2009 . . . c Excess from 2010 . . . d Excess from 2011 . . . e Excess from 2012 . .

a The name, address, and telephone number or e-mail of the person to whom applications should be addressed

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

c Any submission deadlines

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

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Part XV Supplementary Information (continued)

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3 Grants and Contributions Paid During the Year or Approved for Future Payment  Recipient  Recipient  Name and address (home or business)  Recipient  Structure  Foundation status of recipient or substantial contributor or substantial contributor  Recipient  Foundation status of recipient  Foundation status of recipient  Foundation status of recipient						
Recipient	If recipient is an individual show any relationship to	Foundation status of	Purpose of grant or contribution	Amount		
Name and address (home or business)	or substantial contributor	recipient	contribution			
a Paid during the year						
ATCH 8						
ATCH 6		i				
		l I				
			•			
Total			▶ 3a			
<b>b</b> Approved for future payment		<u> </u>				
,,						
Total	<u> </u>		▶ 3b			

i Program s			ated business income	Excided b	y section 512, 513, or 514	(e)
Program s		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income
_		Dusiness code	Amount	Exclusion code	Amount	(See instructions)
				<del> </del>		<del></del>
				-		
	· · · · · · · · · · · · · · · · · · ·					
_				İ		
-						
-	d contracts from government agencies				<u> </u>	
	nip dues and assessments savings and temporary cash investments			<del></del>		
	and interest from securities		-	<del> </del>		46,21
	income or (loss) from real estate					
						-
	nanced property		<u>.</u>	<del></del>		
	bt-financed property					
	ncome or (loss) from personal property	<del></del>		<del>  </del>		248,54
	estment income					240,34
	ss) from sales of assets other than inventory		· · · · · · · · · · · · · · · · · · ·			
	e or (loss) from special events			-		
	fit or (loss) from sales of inventory			<del> </del>		·
	enue a			<del>-</del>	<del></del>	
			1 F-1			
_				<del> </del>		
	<del></del>			<u> </u>		
е				<del></del>		224 74
	Add columns (b), (d), and (e)   I line 12, columns (b), (d), and (e)					294,76 294,76
	- Valationenin of Activitiae		complichment of Ev	omnt Durn	ACAC	
	Relationship of Activities  Explain below how each activity					uted importantly to
		y for which	n income is reported	n column (	e) of Part XVI-A contrib	•
art XVI-B ine No. ▼	Explain below how each activity	y for which	n income is reported	n column (	e) of Part XVI-A contrib	•
ine No.	Explain below how each activity	y for which	n income is reported	n column (	e) of Part XVI-A contrib	•
ine No.	Explain below how each activity	y for which	n income is reported	n column (	e) of Part XVI-A contrib	
ine No.	Explain below how each activity	y for which	n income is reported	n column (	e) of Part XVI-A contrib	•
ine No.	Explain below how each activity	y for which	n income is reported	n column (	e) of Part XVI-A contrib	•
ine No.	Explain below how each activity	y for which	n income is reported	n column (	e) of Part XVI-A contrib	•
ine No.	Explain below how each activity	y for which	n income is reported	n column (	e) of Part XVI-A contrib	•
ine No.	Explain below how each activity	y for which	n income is reported	n column (	e) of Part XVI-A contrib	•
ine No.	Explain below how each activity	y for which	n income is reported	n column (	e) of Part XVI-A contrib	•
ine No.	Explain below how each activity	y for which	n income is reported	n column (	e) of Part XVI-A contrib	•
ine No.	Explain below how each activity	y for which	n income is reported	n column (	e) of Part XVI-A contrib	•
ine No.	Explain below how each activity	y for which	n income is reported	n column (	e) of Part XVI-A contrib	•
ine No.	Explain below how each activity	y for which	n income is reported	n column (	e) of Part XVI-A contrib	•
ine No.	Explain below how each activity	y for which	n income is reported	n column (	e) of Part XVI-A contrib	•
ine No.	Explain below how each activity	y for which	n income is reported	n column (	e) of Part XVI-A contrib	•
ine No.	Explain below how each activity	y for which	n income is reported	n column (	e) of Part XVI-A contrib	•
ine No.	Explain below how each activity	y for which	n income is reported	n column (	e) of Part XVI-A contrib	•
ine No.	Explain below how each activity	y for which	n income is reported	n column (	e) of Part XVI-A contrib	•
ine No.	Explain below how each activity	y for which	n income is reported	n column (	e) of Part XVI-A contrib	•
ine No.	Explain below how each activity	y for which	n income is reported	n column (	e) of Part XVI-A contrib	
ine No.	Explain below how each activity	y for which	n income is reported	n column (	e) of Part XVI-A contrib	•
ine No.	Explain below how each activity	y for which	n income is reported	n column (	e) of Part XVI-A contrib	•

1548781	Page	13
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		<ul><li>Exempt Organ</li></ul>	nizations						
1	'Did th	ne organization direct	ly or indirectly e	ngage in any of the fo	llowing with a	ny other organization described	,	Yes	No
						section 527, relating to political	ΙГ		
		nizations?			·				
а	Trans	fers from the reportin	g foundation to a	noncharitable exempt	organization o	f			i
							1a(1)		Х
	(2) 0	ther assets					1a(2)		Х
b	Other	transactions					1		
	(1) Sa	ales of assets to a no	ncharitable exem	ot organization			1b(1)		Х
	(2) Pi	urchases of assets fro	om a noncharitab	le exempt organization			1b(2)		X
	(3) R	ental of facilities, equi	nment or other s	ecate		• • • • • • • • • • • • • • • • • • • •	1b(2)		X
	(4) R	eimhursement arrange	ements	33013		• • • • • • • • • • • • • • • • • • • •			X
	(5) 10	nans or loan quarantee	ements	• • • • • • • • • • • • •		• • • • • • • • • • • • • • • • • • • •	1b(4)		X
	(6) P	erformance of service	e or mambarehi	or fundraising solicitat			1b(5)	-+	X
	Sharu	ng of facilities, equipm	ent mailing liets	of fulluraising solicitat	mployooo		1b(6)		$\frac{x}{x}$
4	If the	answer to any of th	nent, maning lists	" complete the follow	una sebedule	Column (b) should always show	1c		
u	value	of the goods other	accete or convic	, complete the follow	ing scriedule	If the foundation received less	the ta	iir m	arket
						of the goods, other assets, or s			
/a) I	ine no	(b) Amount involved		ncharitable exempt organizate					
(4)	ine no	N/A	(c) Name of no	nchamable exempt organization	N/A	scription of transfers, transactions, and shar	ing arrang	jemen	ıts
		II/ A		<del></del>	N/A				- <del>-</del>
			<del>-</del>	· · · · · · · · · · · · · · · · · · ·					
		<u>-</u>							
		<del></del>							
_									
2a	Is the	foundation directly	or indirectly affil	ated with, or related	to, one or mo	re tax-exempt organizations			
						on 527? [	Yes	X	No
b		s," complete the follow		` /	, ,,				
		(a) Name of organization		(b) Type of organiz	ation	(c) Description of relations	hip		
						· · · · · · · · · · · · · · · · · · ·			
	-								
							-	<del></del>	
		<del></del>	-			<del></del>			
						,			
	Und	er penalties of penury. I decla	ere that I have examine	d this return including accomp	anving schedules an	d statements, and to the best of my knowledg	e and hal	uaf it	is taio
Sigi		ect, and complete Declaration of	preparer (other than tax	payer) is based on all information of	of which preparer has	any knowledge	e and be	iei, it	is lide,
_		$\lambda = 0$	$M_{\rm C} \sim 1  \text{M}$	1 7/15/1-		May the IRS			
Her		gnature of officer or trustee	1.00	Date Page	Title	with the pro			
	3"	griature or ornicer or trustee	() 7	Date /	riue	(see instruction:	s)? X	Yes _	No
		Print/Type preparer's	name	Preparer's signature		Date Chart If F	OTINI		
Paid	t	1	name	i legaler s i giratur	raa	Clieck []ii	PTIN	000	
o <sub>re</sub> i	parer	BRAD RHODES	AD DUODES	11100	~ 1/7	07/03/2013 self-employed			3
		Filling Hallie		ASSOC, P.C.		Firm's EIN ▶84-0	<del>3</del> 2284	7	
JSE	Only								
		GR	EENWOOD VII	LAGE, CO	80	0111-2624 Phone no 303-74	<u> 11-35</u>	35	
						Fo	om 990	-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

Name of the organization		Employer identification number					
SCHMITZ FAMILY FOUNDA							
C/O ANNIE MCBOURNIE							
Organization type (check one)							
Filers of:	Section:						
Form 990 or 990-EZ	501(c)( ) (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private fou	ndation					
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundate	ion					
	501(c)(3) taxable private foundation						
Instructions  General Rule	(8), or (10) organization can check boxes for both the General Rule and a S	special Rule See					
X For an organization fil	ing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 of econtributor. Complete Parts I and II	or more (in money or					
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							
during the year, total of	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)							

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

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

Name of organization SCHMITZ FAMILY FOUNDATION
C/O ANNIE MCROURNIE

Employer identification number 84-1548781

	C/O ANNIE MCDOURNIE		84-1548/81
Part I	Contributors (see instructions) Use duplicate copies	of Part I if additional space is need	ded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	VINCENT SCHMITZ ESTATE  7201 W. BERRY AVENUE  GREENWOOD VILLAGE, CO 80111	\$250,000.	Person X 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)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<b>-</b>		   \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Name of organization SCHMITZ FAMILY FOUNDATION C/O ANNIE MCBOURNIE

Employer identification number 84-1548781

Part II	Noncash Property (see instructions) Use duplicate copies of Pa	art II if additional space is nee	ded
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	- <b></b>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<b>-</b>		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of organization SCHMITZ FAMILY FOUNDATION
C/O ANNIE MCBOURNIE

Employer identification number

84-1548781

Part III	Exclusively religious, charitable, etc., individual contributions to sect	tion 501(c)(7)	, (8), or (10) organizations
	that total more than \$1,000 for the year. Complete columns (a) throu		

For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once See instructions) > \$

	duplicate copies of Part III if addition	mai space is needed.			
) No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is hel		
		(e) Transfer of gift			
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee		
No. om ort I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is hel		
rt i					
<del></del>		(e) Transfer of gift	· · · · · · · · · · · · · · · · · · ·		
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee		
No.					
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is hel		
		(e) Transfer of gift			
	<b>-</b>				
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee		
No. om	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is hel		
rt I					
		(e) Transfer of gift			
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee		

### SCHMITZ FAMILY FOUNDATION

- DIVIDENDS AND INTEREST FROM SECURITIES FORM 990PF, PART I

NET INVESTMENT INCOME	18,463.		5.	3,562.	2,109.	1,375.	8,303.	46,213.
REVENUE AND EXPENSES PER BOOKS	18,463.	• •	· 0	3,562.	2,109.	1,375.	8,303.	46,213.
DESCRIPTION	CHARLES SCHWAB (#3292) UBS (#4783)	(#4619) -	$\overline{}$	CHARLES SCHWAB (#1406)	IWAB (	UBS (#8661)	CHARLES SCHWAB (#1406) - CORPORATE BONDS	TOTAL

### - OTHER INCOME FORM 990PF, PART I

SCHMITZ FAMILY FOUNDATION

	REVENUE AND
DESCRIPTION	EXPENSES PER BOOKS
FRTL - C2009, LLLP	13
FRTL-US2012, LLLP	-5
FRTL-US2010, LLLP	12,
VERDEAM PARTNERS 2010-2, LLLP	20,
FRTL-US2011, LLLP	36,
MORTGAGE OPPORTUNITY FUND VIII	37,
ABBEY CAPITAL MULTI-MANAGER	
BEAR CREEK MULTI-FAMILY FUND 2012	22,
VERDEAM PARTNERS 2012-1 LLLP	78,
MIMG XLI COUNTRY ESTATES LLC	
MIMG XLIV WALNUT CREEK LLC	1,
MIMG XL HARBOR POINTE LLC	Τ,
MIMG XXXVIII STONE GROVE LLC	-1,
BOW RIVER CAPITAL	-23,
BEAR CREEK LENDING 2012	38'

NET	INVESTMENT	INCOME	90	38	$\infty$	55	33	55	18	90	78,848	31	, 38	,24	, 92	3,64	00
AND	KPENSES	0	0	5,38	,82	0,55	6,33	7,55	7,18	2,06	$\infty$	31	, 38	, 24	, 92	4	8,00

TOTALS

224,887.

# FORM 990PF, PART I - OTHER PROFESSIONAL FEES

	NET	INVESTMENT	INCOME	150.	150.	
REVENUE	AND	EXPENSES	PER BOOKS	150.	150.	
					TOTALS	
			DESCRIPTION	UBS FEES		

84-1548781

## FORM 990PF, PART II - OTHER INVESTMENTS

ENDING <u>FMV</u>	37,216. 31,803. 1,121,184. 434,710. 2,385,044. 672,784. 384,350. 270,302. 827,717. 424,615. 121,233. 187,762. 130,009. 835,371. 1,017,131. 1,017,131. 1,017,151. 84,963. 301,381.
ENDING BOOK VALUE	37,216. 31,803. 1,063,585. 424,985. 2,350,410. 384,350. 251,978. 827,717. 424,615. 121,233. 187,762. 191,234. 130,009. 820,682. 1,172,131. 1,017,151. 85,743. 301,381.
BOOK VALUE	55,785. 27,160. 11,698. 1,035,758. 424,985. 2,223,487. 666,736. 397,541. 252,050. 696,946. 625,400. 190,333. 190,333. 130,233. 328,900. 979,147. 94,741.
DESCRIPTION	FRTL-C2009, LLLP FRTL-US2010, LLLP VERDEAM 2010-2, LLLP UBS #4783 UBS #4784 SCHWAB #3292 SCHWAB #8734 FRTL-C2011, LLLP UBS #8661 VERDEAM 2012-1 LLLP WORTGAGE OPPORTUNITY FUND VIII FRTL -US2012 BOW RIVER CAPITAL MIMG XXXVIII MIMG XLI MIMG XLI SCHWAB #1406 BEAR CREEK MULTI-FAMILY FUND BEAR CREEK LENDING 2012, LLLP ABBEY CAPITAL MULTI-MANAGER MIMG XLIV WALNUT CREEK

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION AMOUNT

SCHMITZ FAMILY FOUNDATION

PART VIII

FORM 990PF,

- LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

ATTACHMENT 7

0

0

0

0

ATTACHMENT 7 PAGE 25

### FORM 990PE. PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

PURPOSE OF GRANT OR CONTRIBUTION AMOUNT						
PURPOSE OF GRANT	SCHOLARSHIPS	SCHOLARSHIPS	SCHOLARSHIPS	SCHOLARSHIPS	SCHOLARSHIPS	SCHOLARSHIPS
AND FOUNDATION STATUS OF RECIPIENT	NONE	NONE	NONE	NONE	NONE	NONE
RECIPIENT NAME AND ADDRESS	BLESSED SACRAMENT 1973 ELM STREET DENVER, CO 80220	BISHOP MACHEBEUF HIGH SCHOOL 458 UINTA WAY DENVER, CO 80230	ST. JAMES SCHOOL 1250 NEWPORT ST. DENVER, CO 80220	ST. THERESE SCHOOL 1200 KENTON ST. AURORA, CO 80010	REGIS JESUIT HIGH SCHOOL 6400 S. LEWISTON WAY AURORA, CO 80016	ALL SOULS CATHOLIC SCHOOL 4951 S. PENNSYLVANIA ENGLEWOOD, CO 80113

10:34:33 AM

ATTACHMENT 8 (CONT.D)

### FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

PURPOSE OF GRANT OR CONTRIBUTION AMOUNT						
PURPOSE OF GE	SCHOLARSHIPS	SCHOLARSHIPS	SCHOLARSHIPS	SCHOLARSHIPS	GENERAL	SCHOLARSHIPS
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NONE	NONE	NONE	NONE	NONE	NONE
RECIPIENT NAME AND ADDRESS	ST. BERNADETTE SCHOOL 1100 UPHAM ST. LAKEWOOD, CO 80214	ST. VINCENT DE PAUL SCHOOL 1164 S. JOSEPHINE STREET DENVER, CO 80210	ACE SCHOLARSHIPS 1201 E. COLFAX AVE. DENVER, CO 80218	ASSUMPTION SCHOOL 2341 E. 78TH AVENUE DENVER, CO 80229	SEEDS OF HOPE 1300 SOUTH STEELE STREET DENVER, CO 80210	OUR LADY OF LOURDES CATHOLIC SCHOOL 2250 S. LOGAN STREET DENVER, CO 80210

10:34:33 AM

84-1548781

ATTACHMENT 8 (CONT'D)

### FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

PURPOSE OF GRANT OR CONTRIBUTION AMOUNT	SCHOLARSHIPS	SCHOLARSHIPS	SCHOLARSHIPS	SCHOLARSHIPS	SCHOLARSHIPS	SCHOLARSHIPS
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NONE	NONE	NONE	NONE	NONE	NONE
RECIPIENT NAME AND ADDRESS	ST. ANTHONY SCHOOL 326 SOUTH 3RD STREET STERLING, CO 80751	ST. CATHERINES SCHOOL 4200 NORTH FEDERAL BLVD. DENVER, CO 80211	ARRUPE JESUIT HIGH SCHOOL 4343 UTICA STREET DENVER, CO 80212	ST. LOUIS CATHOLIC SCHOOL 925 GRANT AVENUE LOUISVILLE, CO 80027	ST. MARY CATHOLIC SCHOOL 2351 22ND AVENUE GREELEY, CO 80631	ST. ROSE OF LIMA CATHOLIC ACADEMY 1345 W. DAKOTA AVENUE

TOTAL CONTRIBUTIONS PAID

### .SCHEDULE D (Form 1041).

**Capital Gains and Losses** 

► Attach to Form 1041, Form 5227, or Form 990-T. ▶ Information about Schedule D (Form 1041) and its separate instructions is at www.irs.gov/form1041. OMB No 1545-0092

Department of the Treasury Internal Revenue Service

SCHMITZ FAMILY FOUNDATION

Employer identification number 84-1548781

C/O ANNIE MCBOURNIE

Part   Short-Term Capital Gains and L	osses - Assets	Held One Yea	ar or Less		
(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) for the entire year Subtract (e) from (d)
1a					
	<del>- </del>		<del></del>	<del>                                     </del>	<del></del>
				<del>- </del>	
<b>b</b> Enter the short-term gain or (loss), if any,	, from Schedule D	-1, line 1b		1b	6,644
Short-term capital gain or (loss) from For	ms 4684, 6252,	6781, and 8824	<b>.</b>		
Net short-term gain or (loss) from partne Short-term capital loss carryover Ente	•		•	<u>3</u>	
Carryover Worksheet		•		-	(
Net short-term gain or (loss). Combine	e lines la throug	gn 4 in columi	i (i) Enter nere ai	na on line 13,	
column (3) on the back	OSSAS - ASSAts	Held More Th	an One Vear	▶   5	6,644
(a) Description of property	(b) Date acquired			(e) Cost or other basis	(f) Gain or (loss) for
(Example 100 shares 7% preferred of "Z" Co )	(mo , day, yr )	(mo , day, yr )	(d) Sales price	(see instructions)	the entire year Subtract (e) from (d)
a					
	-			<del></del>	
b Enter the long-term gain or (loss), if any,	6b	17,016			
Long-term capital gain or (loss) from For					
Net long-term gain or (loss) from partner	ships, S corporat	ions, and other e	estates or trusts	8	
Capital gain distributions				9	
Gain from Form 4797, Part I					
	هأ فينتمين مطلا	any from line	e 14 of the 2011	Capital Loss	
Long-term capital loss carryover. Enter	the amount, if	• •		•	1,
Long-term capital loss carryover. Enter Carryover Worksheet  Net long-term gain or (loss). Combine	the amount, if				(

Part III Summary of Parts I and II	_	(1) Beneficiaries'	(2) Esta	te's	Page 2
Caution: Read the instructions before completing this par	$_{t}$	(see instr)	or trus		(3) Total
Net short-term gain or (loss)			·- ·- ·		6,644.
4 Net long-term gain or (loss):					
a Total for year	a				17,016.
b Unrecaptured section 1250 gain (see line 18 of the wrksht) 14	b				
c 28% rate gain					
15 Total net gain or (loss). Combine lines 13 and 14a ▶ 15	5				23,660.
Note: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or 13)	Fon	n 990-T, Part I, line 4	a) If lines 14	a and	15, column (2), are ne
gains, go to Part V, and <b>do not</b> complete Part IV. If line 15, column (3), is a net lo necessary	oss,	complete Part IV and	tne Capital	LOSS	Carryover Worksheet, as
Part IV Capital Loss Limitation					
Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part l	l, kn	e 4c, if a trust), the sn	naller of		
a The loss on line 15, column (3) or b \$3,000 Note: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page	٠,		<u>.</u>	16 (	)
<b>Note:</b> If the loss on line 15, column (3), is more than \$3,000, <b>or</b> if Form 1041, page L <b>oss Carryover Worksheet</b> in the instructions to figure your capital loss carryover	e 1	line 22 (or Form 990	)-T, line 34),	is a lo	ss, complete the <b>Capita</b>
Part V Tax Computation Using Maximum Capital Gains Rates					
Form 1041 filers. Complete this part only if both lines 14a and 15 in column	n (2	e) are gains, or an a	mount is en	tered	in Part I or Part II and
here is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more th	nan	zero			
Caution: Skip this part and complete the Schedule D Tax Worksheet in the instr	ruci	ions if			
Either line 14b, col. (2) or line 14c, col. (2) is more than zero, or					
Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero					
Form <b>990-T trusts.</b> Complete this part <b>only</b> if both lines 14a and 15 are of Form 990-T, <b>and</b> Form 990-T, line 34, is more than zero. Skip this part and	gair	is, or qualified divid	lends are ir	clude	d in income in Part I
f either line 14b, col (2) or line 14c, col (2) is more than zero	. CC	implete the Schedu	IED IAX W	) (KSIII	eet in the instructions
Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)		47	——————————————————————————————————————		
1 1	٠.	·   17			
(2)					
but not less than zero		-  -	1.		
from Form 1041, line 2b(2) (or enter the qualified					
dividends included in income in Part I of Form 990-T) 19					
20 Add lines 18 and 19					
21 If the estate or trust is filing Form 4952, enter the		<del>-  </del>			
amount from line 4g, otherwise, enter -0 ▶ 21					
22 Subtract line 21 from line 20 If zero or less, enter -0-					
23 Subtract line 22 from line 17 If zero or less, enter -0-		23			
	٠.				
Enter the smaller of the amount on line 17 or \$2,400		24			
25 Is the amount on line 23 equal to or more than the amount on line 24?	٠.	.			
Yes. Skip lines 25 and 26, go to line 27 and check the "No" box					
No. Enter the amount from line 23		25			
Subtract line 25 from line 24	• •	26			
27 Are the amounts on lines 22 and 26 the same?	• •				
Yes. Skip lines 27 thru 30; go to line 31 No. Enter the smaller of line 17 or line 22		27			
Enter the amount from line 26 (If line 26 is blank, enter -0-)		28			
Subtract line 28 from line 27		. 29			
30 Multiply line 29 by 15% ( 15)				30	
81 Figure the tax on the amount on line 23 Use the 2012 Tax Rate Se	che	dule for Estates an	d Trusts		
(see the Schedule G instructions in the instructions for Form 1041)			L	31	
				T	
32 Add lines 30 and 31			L	32	
33 Figure the tax on the amount on line 17. Use the 2012 Tax Rate Se	che	dule for Estates an	d Trusts		
(see the Schedule G instructions in the instructions for Form 1041)			<u>L</u>	33	····
Tax on all taxable income. Enter the smaller of line 32 or line 33 here	e ar	nd on Form 1041, S	Schedule		
G. line 1a (or Form 990-T. line 36)				34	

JSA 2F1220 2 000 Schedule D (Form 1041) 2012

### SCHEDULE D-1 (Form 1041).

### Continuation Sheet for Schedule D (Form 1041)

▶ Information about Schedule D (Form 1041) and its separate instructions is at www.irs.gov/form1041.

Attach to Schedule D to list additional transactions for lines 1a and 6a.

OMB No 1545-0092

Department of the Treasury Internal Revenue Service Name of estate or trust

SCHMITZ FAMILY FOUNDATION

Employer identification number 84-1548781

Part I Short-Term Capital Gains as		84-1548781   ess				
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)	
1a CHARLES SCHWAB #8734 -	(mo , day, yr )	(, 42), 3. 7				
SHORT-TERM			99,737.	92,271.	7,466.	
UBS #8661 - SHORT-TERM			620.	2,313.	-1,693.	
UBS #4783 - SHORT-TERM			13,370.	12,499.	871.	
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For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

1b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 1b . .

Schedule D-1 (Form 1041) 2012

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6,644.

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side

Employer identification number

	8,720.		(f) Gain or (loss) Subtract (e) from (d)
LONG-TERM			8,720
UBS #4783 - LONG-TERM 1	20,605.	17,340.	3,265
	.39,097.	134,066.	5,031
			<del></del>
	-7.		
	-		
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			<del></del>
			1

### SCHMITZ FAMILY FOUNDATION

FORM 990-PF - PART IV

CAP	HAL GAL	<u>NS AND LO</u>	SSES FOR	<u>R TAX ON I</u>	NVEST	МE	ENT INCOM	<u> </u>
Kind of Prop			Descr			or D	Date acquired	Date sold
Gross sale [ price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
8,720.		CAPITAL GAIN			RLES SCH	Р	8,720.	,
0,720.								****
99,737.		PROPERTY TY 92,271.			1	P	VAR 7,466.	VAR
		CHARLES SCH				P	VAR	VAR
20,605.		17,340.					3,265.	
		UBS #8661 - PROPERTY TY				P	VAR	VAR
620.		2,313.					-1,693.	
13,370.	,	UBS #4783 - PROPERTY TY 12,499.				P	VAR   871.	VAR
,		UBS #4783 -	I ONC-TEDM				VAR	VAR
139,097.		PROPERTY TY 134,066.		'IES			5,031.	VAK
TOTAL GAIN(LOS	S)						23,660.	