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Form 990-PF

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

Treated as a Private Foundation

DMB No 1545-0052

Department of the Treasury Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements. For calendar year 2012 or tax year beginning NOV 30, 2013 DEC 1, 2012 , and ending Name of foundation A Employer identification number THE COVENANT FOUNDATION 36-3566128 Number and street (or P O box number if mail is not delivered to street address) B Telephone number 651-351-1472 13777 40TH STREET NORTH City or town, state, and ZIP code C If exemption application is pending, check here STILLWATER, 55082 G Check all that apply: Initial return Initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation Check type of organization: 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 of year J Accounting method: X Accrual F If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here (Part I, column (d) must be on cash basis.) ▶\$ 25,140. Part I | Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes expenses per books income ıncome (cash basis only) 103,230 N/A Contributions, gifts, grants, etc., received Check In the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 136 136 STATEMENT Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 0. Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) RECEIVED Other income 136 103,366 Total, Add lines 1 through 11 <u>08</u> 12 0. ᄄ Compensation of officers, directors, trustees, etc APR 24 2014 <u>8</u> Other employee salaries and wages Pension plans, employee benefits 15 OGDEN. UT 325 0 0. Expenses STMT 2 16a Legal fees STMT 3 1,250 0 0. **b** Accounting fees c Other professional fees Administrative 17 Interest STMT 4 32. 0 0. 18 Taxes Depreciation and depletion 19 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 1,607 0 211,550 25 Contributions, gifts, grants paid 211,550. 26 Total expenses and disbursements. 213,157 0 211,550. Add lines 24 and 25 Subtract line 26 from line 12: -109,791 a Excess of revenue over expenses and disbursements 136 b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-) 223501 12-05-12 LHA For Paperwork Reduction Act Notice, see instructions. Form 990-PF (2012)

Part III Analysis of Changes in Net Assets or Fund Balances

| 1 | Total net assets or fund balances at beginning of year - Part II, column (a), line 30 | | | |
|---|---|---|---|----------|
| | (must agree with end-of-year figure reported on prior year's return) | 1 | | 134,931. |
| 2 | Enter amount from Part I, line 27a | 2 | L | -109,791 |
| 3 | Other increases not included in line 2 (itemize) | 3 | L | 0. |
| 4 | Add lines 1, 2, and 3 | 4 | L | 25,140. |
| 5 | Decreases not included in line 2 (itemize) ▶ | 5 | L | 0. |
| 6 | Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 | 6 | | 25,140. |

| | n 990-PF (2012) THE COVENANT FOUNDATION Int VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4 | 36- 948 - | 3566 - see i | 128 nstru | ıctio | Page 4 ns) |
|---|---|--------------|-----------------|--------------|----------|---------------|
| · 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) | | ł | | | |
| h | Domestic foundations that meet the section 4940(e) requirements in Part V, check here \(\bigs\) and enter 1% | 1 | 1 | | | 1. |
| | of Part I, line 27b | | | - | | <u> </u> |
| c | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). | | | | | |
| | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 2 | ĺ | | | 0. |
| 3 | Add lines 1 and 2 | 3 | | | | 1. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 4 | l | | | 0. |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | 5 | | | | 1. |
| 6 | Credits/Payments: | | | | | |
| _ | 2012 estimated tax payments and 2011 overpayment credited to 2012 6a | | | | | |
| | Exempt foreign organizations - tax withheld at source 6b | | | | | |
| | Tax paid with application for extension of time to file (Form 8868) 6c | | | | | |
| | Backup withholding erroneously withheld 6d | | | | | |
| | Total credits and payments. Add lines 6a through 6d | 7 | | | | 0. |
| 8 | | 8 | | | | |
| | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | 9 | | | | 1. |
| | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | 10 | i | | - | <u> </u> |
| | Enter the amount of line 10 to be; Credited to 2013 estimated tax | 11 | | | | |
| | rt VII-A Statements Regarding Activities | | | - | | |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene | ın | | | Yes | No |
| | any political campaign? | | | 1a | | X |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see 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 | d or | İ | | | |
| | 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: | | ļ | | | |
| | (1) On the foundation. \triangleright \$ 0 . (2) On foundation managers. \triangleright \$ | | l | | | |
| 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 | | 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, o | r | | | | |
| | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | i | 3 | | X |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | Ī | 4a | | X |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | N | /A | 4b | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | | 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 | | i | | | |
| | • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state | law | | | | |
| | remain in the governing instrument? | | [| 6 | X | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? | | [| 7 | X | |
| | If "Yes," complete Part II, col (c), and Part XV. | | | · | | |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions) | | | | | |
| 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 | | | | | 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 | | | | | X |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses | | ļ | 9 10 | | X |
| | 7 | | | 200 | | |

| Form 990-PF (2012) THE COVENANT FOUNDATION | | | 36-35661 | 28 Page 6 |
|---|---|-----------------------------------|--|-------------------------------|
| Part VII-B Statements Regarding Activities for Which | Form 4720 May Be f | Required (contin | | |
| 5a During the year did the foundation pay or incur any amount to: | | | | |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section) | n 4945(e))? | Ye | es 🗶 No | 1 1 |
| (2) Influence the outcome of any specific public election (see section 4955); of | or to carry on, directly or indir | | | 1 1 |
| any voter registration drive? | | | es X No | <u> </u> |
| (3) Provide a grant to an individual for travel, study, or other similar purposes | | Ye | es 🗶 No | 1 1 |
| (4) Provide a grant to an organization other than a charitable, etc., organization | n described in section | , | | |
| 509(a)(1), (2), or (3), or section 4940(d)(2)? | | | es X No | |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, | , or educational purposes, or t | | | 1 1 |
| the prevention of cruelty to children or animals? | | | es X No | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un | • | in Regulations | 37 / 3 | |
| section 53.4945 or in a current notice regarding disaster assistance (see instru | * | | N/A | 5b |
| Organizations relying on a current notice regarding disaster assistance check h | | | | |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f | | | | |
| expenditure responsibility for the grant? | | I/A L Y | s L No | |
| If "Yes," attach the statement required by Regulations section 53.494. | | | | |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract? | pay premiums on | | es X No | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p | perconal henefit contract? | | | 6b X |
| If "Yes" to 6b, file Form 8870. | orsonal benefit contract. | | <u> </u> | 22 |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s | chelter transaction? | | s X No | |
| b If "Yes," did the foundation receive any proceeds or have any net income attribu | | | | 7ь |
| Information About Officers Discotors Touch | | nagers, Highly | | |
| Part VIII Paid Employees, and Contractors | , | | • | |
| 1 List all officers, directors, trustees, foundation managers and their | compensation. | | | |
| () Nome and address | (b) Title, and average hours per week devoted | (c) Compensation (If not paid, | (d) Contributions to employee benefit plans and deferred | (e) Expense account, other |
| (a) Name and address | to position | enter -0-) | and deferred compensation | allowances |
| LUCRETIA HAIRE | DIRECTOR | | | |
| 13777 40TH STREET NORTH | | | | |
| STILLWATER, MN 55082 | 1.00 | 0. | 0. | 0. |
| STEVEN HAIRE | DIRECTOR | | | |
| 1408 LOOKOUT ST | | | | |
| STILLWATER, ME 55082 | 1.00 | 0. | 0. | 0. |
| | } | | | |
| | | | | |
| | | | | |
| | | | | |
| | - | | | |
| 2 Compensation of five highest-paid employees (other than those inc | l cluded on line 1). If none. | enter "NONE." | | |
| | (b) Title, and average | | (d) Contributions to employee benefit plans | (e) Expense |
| (a) Name and address of each employee paid more than \$50,000 | hours per week devoted to position | (c) Compensation | and deferred compensation | account, other allowances |
| NONE | | | - Companiation | |
| | 1 | | | |
| | | 1 | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Total number of other employees paid over \$50,000 | | | • | 0 |

223551 12-05-12

Total. Add lines 1 through 3

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| P | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four | ndations | , see instructions) |
|----|---|--------------|---|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | |
| а | Average monthly fair market value of securities | 1a | 0. |
| | Average of monthly cash balances | 1b | <u>0.</u> 80,037. |
| C | Fair market value of all other assets | 1c | |
| d | Total (add lines 1a, b, and c) | 1d | 80,037. |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | , , , , , , , , , , , , , , , , , , , |
| | 1c (attach detailed explanation) 1e 0. | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 80,037. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 1,201. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 78,836. |
| 6_ | Minimum investment return. Enter 5% of line 5 | 6 | 3,942. |
| P | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here in and do not complete this part.) | d certain | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 3,942. |
| 2a | Tax on investment income for 2012 from Part VI, line 5 | | |
| b | Income tax for 2012. (This does not include the tax from Part VI.) | | |
| C | Add lines 2a and 2b | 2c | 1. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 3,941. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 3,941. |
| 6 | Deduction from distributable amount (see instructions) | 6 | 0. |
| 7_ | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 3,941. |
| P | art XII Qualifying Distributions (see instructions) | · · · · · · | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| a | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 211,550. |
| b | Program-related investments - total from Part IX-B | 1b | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | |
| | Suitability test (prior IRS approval required) | 3a | |
| þ | 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 | 211,550. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | - | _ |
| | income. Enter 1% of Part I, line 27b | 5 | 1. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 211,549. |
| | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years | jualifies fo | or the section |

Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2011 | (c) 2011 | (d) 2012 |
|--|---------------|----------------------------|-------------|---------------------------|
| 1 Distributable amount for 2012 from Part XI, | | | | |
| line 7 | | | | 3,941. |
| 2 Undistributed income, if any, as of the end of 2012 | | | | |
| a Enter amount for 2011 only | | | 0. | |
| b Total for prior years: | | | | |
| ,, | | 0. | | |
| 3 Excess distributions carryover, if any, to 2012: | | | | |
| a From 2007 130, 260. | | | | |
| b From 2008 441,228. | | | | |
| c From 2009 136,648. | | | | |
| d From 2010 95,603. | | | | |
| e From 2011 347,911. | | | | |
| f Total of lines 3a through e | 1,151,650. | | | |
| 4 Qualifying distributions for 2012 from | | | | |
| Part XII, line 4: ► \$ 211,550. | | | | |
| a Applied to 2011, but not more than line 2a | | | 0. | |
| b Applied to undistributed income of prior | | | | |
| years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | | | | |
| (Election required - see instructions) | 0. | | | |
| d Applied to 2012 distributable amount | | | | 3,941. |
| e Remaining amount distributed out of corpus | 207,609. | | | |
| Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a)) | 0. | | | 0. |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 1,359,259. | | | |
| b Prior years' undistributed income. Subtract | • | | | |
| line 4b from line 2b | | 0. | | |
| c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed | | 0. | | |
| d Subtract line 6c from line 6b. Taxable | | | | |
| amount - see instructions | | 0. | | |
| e Undistributed income for 2011. Subtract line | | | | |
| 4a from line 2a. Taxable amount - see instr. | | | 0. | |
| f Undistributed income for 2012. Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | 1 | | | |
| be distributed in 2013 | | | | 0. |
| 7 Amounts treated as distributions out of | | | | |
| corpus to satisfy requirements imposed by | | | | |
| section 170(b)(1)(F) or 4942(g)(3) | 0. | | | |
| 8 Excess distributions carryover from 2007 | | | | |
| not applied on line 5 or line 7 | 130,260. | | | |
| 9 Excess distributions carryover to 2013. | |] | | |
| Subtract lines 7 and 8 from line 6a | 1,228,999. | | | |
| O Analysis of line 9: | | | | |
| a Excess from 2008. 441, 228. | | | | |
| b Excess from 2009 136,648. | | | | |
| c Excess from 2010 95,603. | | | 1 | |
| d Excess from 2011 347,911. | | į | | |
| e Excess from 2012 207, 609. | | | | Form 990-PF (2012) |

| Part XIV Private Operating F | CUNDATIONS (See 11 | | I-A guestion 9) | | 066128 Page 10 |
|--|---------------------------|-------------------------------|---------------------------|-----------------------------|---------------------|
| | | | 1-A, question 9) | N/A | |
| • 1 a If the foundation has received a ruling o | | • • • | . 1 | | |
| foundation, and the ruling is effective fo | • | • | un contran | 1042(\)(2) or 14 | 042(.)(5) |
| b Check box to indicate whether the found2 a Enter the lesser of the adjusted net | Tax year | Ing loundation described | Prior 3 years | 4942(j)(3) or4 | 942(j)(5) |
| • | (a) 2012 | (b) 2011 | (c) 2010 | (d) 2009 | (e) Total |
| income from Part I or the minimum | (4) 2012 | (0) 2011 | (6) 2010 | (0) 2003 | (c) iotai |
| investment return from Part X for | | | | | |
| each year listed | | | | | |
| b 85% of line 2a | | | | | |
| c Qualifying distributions from Part XII, | | | | | li |
| line 4 for each year listed | | | | | |
| d Amounts included in line 2c not | | | | | |
| used directly for active conduct of | | | | | |
| exempt activities | | | | | |
| e Qualifying distributions made directly | | | | | |
| for active conduct of exempt activities. | | | | | |
| Subtract line 2d from line 2c 3 Complete 3a, b, or c for the | | | | | |
| alternative test relied upon: | | | | |] |
| a "Assets" alternative test - enter: | | | | | |
| (1) Value of all assets | | | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b "Endowment" alternative test - enter 2/3 of minimum investment return | | | | | |
| shown in Part X, line 6 for each year listed | _ | | | | |
| c "Support" alternative test - enter: | | | | | |
| (1) Total support other than gross | | 1 | | | |
| investment income (interest, dividends, rents, payments on | | | | | |
| securities loans (section | | | | | |
| 512(a)(5)), or royalties) | | | | | |
| (2) Support from general public | | | | | |
| and 5 or more exempt organizations as provided in | | | | | |
| section 4942(j)(3)(B)(iii) | | | | | |
| (3) Largest amount of support from | | | | | |
| an exempt organization | | <u> </u> | | | |
| (4) Gross investment income | | <u> </u> | | | |
| Part XV Supplementary Info | | | if the foundation | n had \$5,000 or m | ore in assets |
| at any time during t | he year-see inst | ructions.) | | | |
| 1 Information Regarding Foundation | _ | | | | |
| a List any managers of the foundation where year (but only if they have contributed in | | | ributions received by th | e foundation before the clo | se of any tax |
| LUCRETIA HAIRE | 1010 111411 40,000). (000 | 300tion 507 (4)(E).) | | | |
| b List any managers of the foundation wh | a awn 109/ or more of t | ha stock of a corneration | /or an aqually large port | ion of the ownership of a n | artnership or |
| other entity) of which the foundation has | | | (Of an equally large port | ion of the ownership of a p | armership or |
| NONE | · | | | | |
| 2 Information Regarding Contributi | on Grant Gift Loan | Scholarshin etc. Pr | .ourams. | | |
| Check here ► X if the foundation o | | | | not accent unsolicited regi | iests for funds. If |
| the foundation makes gifts, grants, etc. | | | | | |
| a The name, address, and telephone num | ber or e-mail of the pers | on to whom applications : | should be addressed: | | |
| | · | | | | |
| b The form in which applications should b | e submitted and informa | ation and materials they sl | hould include; | | |
| c Any submission deadlines: | | | | | |
| d Any restrictions or limitations on awards | s, such as by geographic | cal areas, charitable fields, | kınds of institutions, or | other factors: | |
| | | | | | |
| | | | | | |

36-3566128 Form 990-PF (2012) Page 11 Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution show any relationship to Foundation status of **Amount** any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year BETHLEHEM COLLEGE & SEMINARY NONE PC GENERAL 720 13TH AVENUE SOUTH MINNEAPOLIS, MN 55415 25,000, MINNESOTA ADULT & TEEN CHALLENGE NONE PC GENERAL 1619 PORTLAND AVENUE SOUTH MINNEAPOLIS MN 55404 51,000. MINNESOTA FAMILY INSTITUTE NONE ÞС GENERAL 2855 ANTHONY LANE SOUTH, SUITE 150 MINNEAPOLIS MN 55418 60,000. NATIONAL FATHERING MINISTRY NONE РC GENERAL 5353 WAYZATA BOULEVARD, SUITE 403 MINNEAPOLIS, MN 55429 12,000. STILLWATER EVANGELICAL FREE CHURCH NONE PC GENERAL 7671 MANNING AVENUE NORTH STILLWATER MN 55082 1,800. SEE CONTINUATION SHEET(S) Total **▶** 3a 211,550. b Approved for future payment NONE

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Total

| Part XVI-A Analysis of Income-Producing Activity | ties |
|--|------|

| Inter gross amounts unless otherwise indicated. | Unrelated b | usiness income | | y section 512, 513, or 514 | (e) |
|--|-----------------|-----------------|-----------------------|----------------------------|-------------------|
| • | (a) Business | (b) Amount | (c) Exclu- sion | (d) | Related or exempt |
| 1 Program service revenue: | code | Aniount | code | Amount | function income |
| a | _ | | | | |
| b | - | | | | |
| c | - | | | | |
| d | - | | | | |
| e | - | | \perp | | |
| f | - | | | | |
| g Fees and contracts from government agencies | | <u> </u> | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash | - | | | | |
| investments | ļ | | 14 | 136. | |
| 4 Dividends and interest from securities | | | | | |
| 5 Net rental income or (loss) from real estate: | | | | | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal property | | | | | |
| 7 Other investment income | | | | | |
| 3 Gain or (loss) from sales of assets other than inventory | | | | | |
| 9 Net income or (loss) from special events | | | | | |
| Gross profit or (loss) from sales of inventory | | | | | |
| 1 Other revenue: | | | | | |
| a | | | | | |
| b | | | | | |
| C | | | | | |
| d | | | | | |
| e | _ | | | | |
| 2 Subtotal. Add columns (b), (d), and (e) | | 0 | | 136. | |
| 3 Total. Add line 12, columns (b), (d), and (e) | | | | . 13 | 136 |
| See worksheet in line 13 instructions to verify calculations.) | | | | | |
| Part XVI-B Relationship of Activities | to the Assem | aliahanaad af l | | | |

| e No. | Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). | | | | | | |
|-----------------|---|--|--|--|--|--|--|
| <u> </u> | | | | | | | |
| | | | | | | | |
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507-446-7100 Form **990-PF** (2012)

P00449887

Paid

Preparer

Use Only

Signature of officer or trustee

Print/Type preparer's name

BRAD SVENBY

Firm's name ► CLIFTONLARSONALLEN LLP

OWATONNA, MN 55060

Firm's address ▶ P.O. BOX 586

Title

04/09/14

Check [

self- employed

Phone no.

PTIN

Firm's EIN $\triangleright 41-0746749$

Date

Preparer's signature

VENBY

| 3 Grants and Contributions Paid During the | | | | |
|--|--|--------------------------------------|----------------------------------|--------|
| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
| | or substantial contributor | recipient | | |
| | | f | | |
| YOUTH INVESTMENT PO BOX 316 | NONE | PC | GENERAL | |
| MEDINA, MN 55340 | | | | 30,00 |
| | | | | |
| TEENS FOR CHRIST | NONE | PC | GENERAL | |
| PO BOX 920 | NONE | | DENDICAL | |
| HUDSON, WI 54016 | | | | 8,000 |
| | | | | |
| PRAYERFIELDS | NONE | PC | GENERAL | |
| 3502 HATCH ROAD | | | | |
| CEDAR PARK TX 78613 | | | | 1,500 |
| | | | | |
| YOUNG ADULT KOINONIA | NONE | PC | GENERAL | |
| 537 CHARLES AVE W ST. PAUL, MN 55103 | | | | 250 |
| 51, 170B, IN 55105 | | | | 230 |
| | | | | |
| LIBERTY BIBLE CHURCH 4020 WASHINGTON STREET | NONE | PC | GENERAL | |
| WISCONSIN RAPIDS, WI 54494 | | | | 5,000 |
| | | | | |
| TRAINING LEADERS INTERNATIONAL | NONE | PC | GENERAL | |
| PO BOX 15292 | | | | |
| MINNEAPOLIS, MN 55415 | | | | 17,000 |
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| | | | | |
| Total from continuation sheets | | | <u> </u> | 61,750 |

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2012

Name of the organization **Employer identification number** 36-3566128 THE COVENANT FOUNDATION 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 foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions. **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II **Special Rules** ☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA 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

Employer identification number

| THE C | OV: | ENAN | ${f T}$ | FOU | JNDA | \mathbf{TI} | ON |
|-------|-----|------|---------|-----|------|---------------|----|
|-------|-----|------|---------|-----|------|---------------|----|

36-3566128

| Part I | Contributors (see instructions). Use duplicate copies of Part I | if additional space is needed. | |
|------------|--|--------------------------------|---|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | WOOD GOOD INDUSTRIES 4100 WASHINGTON AVE N MINNEAPOLIS, MN 55412 | \$103,230. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | | Person Payroll Oncash 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 Oncash 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 Omnicash 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 Oncash Complete Part II if there is a noncash contribution.) |

Employer identification number

THE COVENANT FOUNDATION

36-3566128

| Part II | Noncash Property (see instructions). Use duplicate copies of Pa | art II if additional space is needed | |
|------------------------------|---|--|----------------------|
| (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 |
| | | | |
| 13 | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | | |
| (a) No. from | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | \$ | |
| (a) No. rom Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | \$ | |
| (a) No. rom | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | \ \ \$ | |

Employer identification number

| THE CO | VENANT FOUNDATION | | 36-3566128 | | |
|---------------------------|---|---------------------|---|--|--|
| Part III | Exclusively religious, charitable, etc., individuals. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if addition | | c)(7), (8), or (10) organizations that total more than \$1,000 for the ons completing Part III, enter r the year. (Enter this information once) | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | |
| | Transferee's name, address, ar | (e) Transfer of gir | Relationship of transferor to transferee | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | |
| | (e) Trans Transferee's name, address, and ZIP + 4 | | sfer of gift Relationship of transferor to transferee | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | |
| | | | | | |
| | Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | |
| - | (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee | | | | |
| | | | | | |

| FORM 990-PF INTEREST ON SAVI | NGS AND TEM | PORARY CASH II | NVESTMENTS | STATEMENT 1 |
|-----------------------------------|------------------------------|-----------------------------------|------------|-------------------------------|
| SOURCE | | | | AMOUNT |
| SAVINGS ACCOUNT | | | _ | 136. |
| TOTAL TO FORM 990-PF, PART I, | 136. | | | |
| FORM 990-PF | LEGAL | FEES | | STATEMENT 2 |
| DESCRIPTION | | (B) NET INVEST- MENT INCOME | | (D) CHARITABLE PURPOSES |
| LEGAL FEES | 325. | 0. | | 0. |
| TO FM 990-PF, PG 1, LN 16A = | 325. | 0. | | 0. |
| FORM 990-PF | ACCOUNTING FEES | | | STATEMENT 3 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | | |
| ACCOUNTING FEES | 1,250. | 0. | | 0. |
| TO FORM 990-PF, PG 1, LN 16B | 1,250. | 0. | | 0. |
| FORM 990-PF | TAX | ES | | STATEMENT 4 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | | |
| US TREASURY STATE OF MINNESOTA | 7. 25. | 0. | | 0. |
| TO FORM 990-PF, PG 1, LN 18 | 32. | 0. | | 0. |

| FORM 990-PF INTEREST ON SAVI | INGS AND TEM | PORARY CASH I | NVESTMENTS | STATEMENT 1 | | |
|-----------------------------------|------------------------------|-----------------------------------|------------|-------------------------------|--|--|
| SOURCE | | | | AMOUNT | | |
| SAVINGS ACCOUNT | | | _ | 136. | | |
| TOTAL TO FORM 990-PF, PART I, | LINE 3, CO | LUMN A | = | 136. | | |
| FORM 990-PF | LEGAL | FEES | | STATEMENT 2 | | |
| DESCRIPTION | | (B) NET INVEST- MENT INCOME | ADJUSTED | CHARITABLE | | |
| LEGAL FEES | 325. | 0. | | 0. | | |
| TO FM 990-PF, PG 1, LN 16A = | 325. | 0. | | 0. | | |
| FORM 990-PF | ACCOUNTING FEES | | | STATEMENT 3 | | |
| DESCRIPTION | | (B) NET INVEST- MENT INCOME | | (D) CHARITABLE PURPOSES | | |
| ACCOUNTING FEES | 1,250. | 0. | | 0. | | |
| TO FORM 990-PF, PG 1, LN 16B | 1,250. | 0. | | 0. | | |
| FORM 990-PF | TAXES | | | STATEMENT 4 | | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | | | | |
| US TREASURY STATE OF MINNESOTA | 7. 25. | 0. | | 0. | | |
| TO FORM 990-PF, PG 1, LN 18 | 32. | 0. | | 0. | | |