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Form **990-PF**

EXTENSION GRANTED TO 11/15/11

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

Department of the Treasury Internal Revenue Service

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

2010

OMB No 1545-0052

For	aler	idar year 2010, or tax yea	ır beginning			, and endi	ng		
G	heck	all that apply:	Initial return		Initial return of a fo		·	Final return	1
[<u></u>			Amended return		Name change				
Nai	ne o	foundation						A Employer identification	number
		THE HEIDT	FAMILY 1	OUN	DATION			20-5881913	
Nur	nber a	ind street (or P O box number i				Ro	oom/suite	B Telephone number	
		9075 CUNN	INGHAM RO	OAD				513-842-85	60
City	or t	own, state, and ZIP code					·	C If exemption application is p	
		CINCINNATI			_1503			D 1. Foreign organizations	
H_C	_				kempt private foundation			Foreign organizations me check here and attach co	peting the 85% test.
		ction 4947(a)(1) nonexem			Other taxable private founda	tion		E If private foundation sta	tus was terminated
		arket value of all assets at 6	end of year J A	_	ng method: X Cash	Accrual		under section 507(b)(1	
		Part II, col (c), line 16)	1 704 (Dom		ther (specify)			F If the foundation is in a	
	\$	Analysis of Revenue an		i, coiu	mn (d) must be on cash b			under section 507(b)(1	4.00
F		(The total of amounts in colu necessarily equal the amoun	mns (b), (c), and (d) m	ay not	(a) Revenue and expenses per books	(b) Net inves income		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grant	ts, etc., received		439,241.			N/A	
	2		n is not required to attach	Sch B					
	3	Interest on savings and tempo cash investments	orary		26.		26.	• •	Statement 1
	4	Dividends and interest fro	om securities		3.		3.		Statement 2
	5a	Gross rents				 			
_	_	Net rental income or (loss)			B 454				
inue	6a	Net gain or (loss) from sale of Gross sales price for all			7,151.				
r LUI Revenue	D	assets on line 6a Capital gain net income (from	441,39	14.		7	,151.		
, è	7 8	Net short-term capital gai					,151.		710
,	9	Income modifications							
	_	Gross sales less returns and allowances					18	(0)	S
	b	Less Cost of goods sold						MOV 1 8 20	1 0.2 0
j J	C	Gross profit or (loss)					. Į	9,7	8
	11 Other income								
? ?	12	Total, Add lines 1 throug	jh 11		446,421.	7	,180.		
5	13	Compensation of officers, dire	•		0.		0.		0.
2	14	Other employee salaries a	•					· · · · · · · · · · · · · · · · · · ·	
S	15	Pension plans, employee	benefits						
enses		Legal fees Accounting fees	Stmt	2	2,125.	2	,125.		0.
ă	i e	Other professional fees	Deme	,	2,123.		, 123.		
and Administrative Expe	17	Interest							
rati	18	Taxes	Stmt	4	100.		100.		0.
nist	19	Depreciation and depletio							
Ē	20	Occupancy							
Ă	21	Travel, conferences, and	=						
auc	22	Printing and publications							
Operating	23	Other expenses				-			
erat	24	Total operating and adm			2 225	^	225		
ŏ	0.5	expenses. Add lines 13 t			2,225. 606,147.		,225.	.	606,147.
		Contributions, gifts, grant Total expenses and disb	·		000,147.				606,147.
	20	Add lines 24 and 25			608,372.	2	,225.		606,147.
-	27	Subtract line 26 from line	: 12:	_	000,372.	<u> </u>	, , , , , ,		000,147.
		Excess of revenue over expen		its	-161,951.				
		Net investment income (4	,955.		
		Adjusted net income (if no	egative, enter -0-)					N/A	
0235 12-07)1 '-10	LHA For Paperwork R	eduction Act Noti	ce, see	the instructions.				Form 990-PF (2010)

Beginning of year

20-5881913

Form **990-PF** (2010)

Form 990-PF (2010)

Part	TIV Capital Gains	and Losses for Tax on In	vestmen	t income						
	(a) List and desc 2-story brick wa		(b) i	low acquired - Purchase - Donation	(c)	Date acquired mo., day, yr.)	(d) Date sold (mo., day, yr.)			
1a C	AMPBELL SOUP	CO, 3431 SHARES				D	0	5/20/10	05/27/10	
b D	AHAHER CORP,	2200 SHARES				D		5/20/10	05/27/10	
_c I	NTUIT, 750 SH	ARES				D	0.8	3/10/10	12/08/10	
_d I	NTUIT, 1000 S	HARES				D	08	3/10/10	09/01/10	
<u>e I</u>	<u>NTUIT, 1750 S</u>	HARES				D	08	3/10/10	08/17/10	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(((h) Gain or (loss) e) plus (f) minus (
a	120,580.			119,94	8.				632.	
<u>b</u> 174,510. 172,78					8.				1,722.	
C	35,089.			30,32	3.				4,766.	
<u>d</u>	42,796.			40,43					2,366.	
_e	68,417.			70,75	2.				<u>-2,335.</u>	
Co	mplete only for assets showing	ng gain in column (h) and owned by	the foundation	on 12/31/69				iins (Col. (h) gain		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any				, but not less that osses (from col. (
a									632.	
b									1,722.	
C									4,766.	
d									2,366.	
e									-2,335.	
2 Cap	ital gain net income or (net ca	apital loss) $\begin{cases} If gain, also enter \\ If (loss), enter -0. \end{cases}$	ın Part I, line - ın Part I, line	7 7	}	2			7,151.	
3 Net	short-term capital gain or (los	ss) as defined in sections 1222(5) an	ıd (6):							
If ga	ain, also enter in Part I, line 8,	column (c).	, ,		1					
-	oss), enter -0- in Part I, line 8				Ц	3		N/A		
Part	V Qualification U	Inder Section 4940(e) for	Reduced	Tax on Net	Inv	estment	ncor	ne		
(For op	tional use by domestic privati	e foundations subject to the section 4	1940(a) tax on	net investment in	come).)				
If section	on 4940(d)(2) applies, leave t	his nart blank								
		·								
		tion 4942 tax on the distributable am		•	lods				Yes X No	
		lify under section 4940(e). Do not co								
1 Ent		each column for each year; see instri	uctions before	making any entrie			 +		(4)	
Cale	(a) Base period years ndar year (or tax year beginni	ng in) Adjusted qualifying dis	tributions	Net value of no	(c) nchar		ets	(d) Distribution ratio (col. (b) divided by col. (c))		
	2009		1,020.			122,9			4.157304	
	2008		2,609.			242,1	44.		1.332302	
	2007	32	8,025.			161,8	85.		2.026284	
	2006	1	8,650.			89,4	89.		.208406	
	2005									
2 Tota	al of line 1, column (d)						Ĺ	2	7.724296	
3 Ave	rage distribution ratio for the	5-year base period - divide the total o	on line 2 by 5,	or by the number	of ye	ars				
the	foundation has been in existe	nce if less than 5 years						3	1.931074	
							Ī			
4 Ente	er the net value of noncharitat	ple-use assets for 2010 from Part X, I	line 5				ŀ	4	149,653.	
		ŕ					Ī			
5 Mul	tiply line 4 by line 3							5	288,991.	
_	.,						ļ			
6 Enter 1% of net investment income (1% of Part I, line 27b)							6	50.		
,							t	-		
7 Add	l lines 5 and 6							7	289,041.	
							r	' 		
	er qualifying distributions fror	,						8	606,147.	
	ne 8 is equal to or greater than	line 7, check the box in Part VI, line	1b, and comp	lete that part using	g a 19	% tax rate.				

	n 990-PF (2010) THE HEIDT FAMILY FOUNDATION			<u> 1913</u>		Page 4
	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e),	or 4948	- see	instru	ıctio	ns)
18	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and enter "N/A" on line 1.	İ	ļ			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		1			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%	1_				<u>50.</u>
	of Part I, line 27b		ŀ			
C	: 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				0.
3	Add lines 1 and 2	3				50.
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				50.
6	Credits/Payments:					
а	2010 estimated tax payments and 2009 overpayment credited to 2010 6a					
b	Exempt foreign organizations - tax withheld at source		-			
C	: Tax paid with application for extension of time to file (Form 8868)		1			
d	Backup withholding erroneously withheld 6d					
7	Total credits and payments. Add lines 6a through 6d	7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ 9				50.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	▶ 10				
	Enter the amount of line 10 to be: Credited to 2011 estimated tax	i ▶ 11				
Pε	art VII-A Statements Regarding Activities					
18	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or inte	rvene in			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	on)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials public	lished or				
	distributed by the foundation in connection with the activities					•
C	: Did the foundation file Form 1120-POL for this year?			1c		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ▶ \$ 0. (2) On foundation managers. ▶ \$	0.			}	
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 incorporal	tion, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		_X_
b	o If "Yes," has it filed a tax return on Form 990-T for this year?	1	N/A	4b		L
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					ì
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the	e state law			1	
	remain in the governing instrument?			6	Х	<u> </u>
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)			.		
	OH					
b	olf 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	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for	or calendar				
	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		X
10	Did any persons become substantial contributors during the tax year? # "year attach a sebestule testing their persons and addresses	Stm	- 5	10	x	1

_	990-PF (2010) THE HEIDT FAMILY FOUNDATION	20-5881	913	I	Page 5
	art 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 meaning of				
	section 512(b)(13)? If "Yes," attach schedule (see instructions)		11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before				
	August 17, 2008?		12		_X_
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	_X	
	Website address NONE				
14	The books are in care of THE HEIDT FAMILY FOUNDATION Telephone no.				
	Located at ▶ 9075 CUNNINGHAM ROAD, CINCINNATI, OH	ZIP+4 ▶ <u>45</u>	<u> 243</u>	<u>-15</u>	03
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	N	/A	
16	At any time during calendar year 2010, 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 page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of		1		
	the foreign country		İ		
Pa	art 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?	es 🗶 No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
		es 🗓 No			
	<u> </u>	es 🔀 No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	es 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)?	es 🗶 No		1	
	(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.)	es 🗓 No			
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 page 22 of the instructions)?	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here	ightharpoons			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected				
	before the first day of the tax year beginning in 2010?		1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation				
	defined in section 4942(j)(3) or 4942(j)(5));				
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	g			
	before 2010?	es 🗶 No			
	If "Yes," list the years \blacktriangleright ,,,			.	
b	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	1			
	statement - see instructions.)	N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
					
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				
		es 🗶 No			
b	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons af				
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to d	ispose			
	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 2010)	N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpos	e that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2010?		4b		<u> </u>
		For	m 990	- PF (2010)

Form 990-PF (2010) THE HEIDT FAMILY FOUNDAT Part VII-B Statements Regarding Activities for Which I		Peguired (contro	20-58819	13	Page €
	OTHER TIZE WAY DO I	radailea (contin	ueoj T		
 5a During the year did the foundation pay or incur any amount to: (1) Carry on propaganda, or otherwise attempt to influence legislation (section) (2) Influence the outcome of any specific public election (see section 4955); or 			es X No		
any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organizatio		es X No			
509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or	for			
the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unit	der the exceptions described		es 🗶 No		
section 53.4945 or in a current notice regarding disaster assistance (see instru	iii negulalions	N/A	5b		
Organizations relying on a current notice regarding disaster assistance check h		unod			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for expenditure responsibility for the grant?			es 🔲 No		
If "Yes," attach the statement required by Regulations section 53.494s 6a Did the foundation, during the year, receive any funds, directly or indirectly, to					
a personal benefit contract?	pay premiums on	Ye	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		-	6b	X
If "Yes" to 6b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	☐ Ye	es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu		N/A	7b		
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors		anagers, Highly	y 		
1 List all officers, directors, trustees, foundation managers and their	1	1	I (N -	,	
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	l acc	e) Expense count, other allowances
ROBERT S. HEIDT, JR.	TRUSTEE				
9075 CUNNINGHAM ROAD	1 00				•
CINCINNATI, OH 452431503	1.00	0.	0.	+	0.
JULIA S. HEIDT 9075 CUNNINGHAM ROAD	TRUSTEE				
CINCINNATI, OH 452431503	1.00	0.	0.		0.
CINCINNATI, OH 452451505	1.00	0.	0.		<u> </u>
2 Compensation of five highest-paid employees (other than those inc	Studed on line 1) If none	enter "NONE "			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	aci	e) Expense count, other
NONE	devoted to position	(C) componication	compensation	a	llowances
NONE					
		-			
				 	
<u> </u>					
Total number of other employees paid over \$50,000	<u></u> .		<u> </u>	1	(

orm 990-PF (2010) THE HEIDT FAMILY FOUNDATION		<u>5881913 </u>	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	n Managers, Highly		
3 Five highest-paid independent contractors for professional services. If none, enter "No	ONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Comp	pensation
NONE			
	 		
		:	
			
Total number of others receiving over \$50,000 for professional services		•	0
Part IX-A Summary of Direct Charitable Activities			<u>_</u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical i	nformation such as the	Expenses	
number of organizations and other beneficiaries served, conferences convened, research papers produced	, etc.	Expenses	
1 N/A			
			•
			0.
· · · · · · · · · · · · · · · · · · ·			
<u> </u>			
Port IV P			
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines	1 and 2	Amount	
N/A	Turio E.	Amount	
			0.
2			
All other program-related investments. See instructions.			
3			
Fetal Add lines 1 through 2			

Form **990-PF** (2010)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, se	e 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	_39,567.
ь	Average of monthly cash balances	1b	39,567. 112,365.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	151,932.
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	151,932.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	2,279.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	149,653.
6	Minimum investment return Enter 5% of line 5	6	7,483.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	7,483.
2a	Tax on investment income for 2010 from Part VI, line 5]]	
b	Income tax for 2010. (This does not include the tax from Part VI.)]	
C	Add lines 2a and 2b	2c	50.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	7,433.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	7,433.
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	7,433.
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	606,147.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
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	606,147.
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	50.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	606,097.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for th	ne section

Form **990-PF** (2010)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

				
	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
Distributable amount for 2010 from Part XI,	00,720	70010 prior to 2000		2010
line 7				7,433.
2 Undistributed income, if any, as of the end of 2010	· ··· - · · · · · · · · · · · · · · · ·			.,,
a Enter amount for 2009 only			0.	
b Total for prior years:				
, ,		0.		
3 Excess distributions carryover, if any, to 2010:				
a From 2005				
b From 2006 18,004.				
c From 2007 319,971.				
d From 2008 310,516.				
e From 2009 504,874.				
f Total of lines 3a through e	1,153,365.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ►\$ 606,147.				
a Applied to 2009, 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 2010 distributable amount				7,433.
e Remaining amount distributed out of corpus	598,714.			
Excess distributions carryover applied to 2010 (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	1,752,079.			
b Prior years' undistributed income. Subtract	1,732,073.			
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 2009. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract	·			
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				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 2005				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2011.				
Subtract lines 7 and 8 from line 6a	1,752,079.			
10 Analysis of line 9;				
a Excess from 2006 18,004.				
b Excess from 2007 319,971.				
c Excess from 2008 310,516.				
d Excess from 2009 504,874.				
e Excess from 2010 598,714.				

Form 990-PF (2010) THE HEI Part XIV Private Operating F	DT FAMILY F		A guestion (I)		381913 Page 10
			-A, question 9)	N/A	
1 a If the foundation has received a ruling o					
foundation, and the ruling is effective fo		=		1040(1)(2) 22 1 1	040(1)(5)
b Check box to indicate whether the found		ig toundation described (Prior 3 years	4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
income from Part I or the minimum	(8) 2010	(0) 2003	(6) 2000	(4) 2007	(6) 10(4)
investment return from Part X for					
each year listed	<u>. </u>				
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					ļ
exempt activities					
 Qualifying distributions made directly 					
for active conduct of exempt activities.					
Subtract line 2d from line 2c 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 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					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	n had \$5,000 or m	ore in assets
at any time during t	the year-see the i	instructions.)			
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation whyear (but only if they have contributed r	o have contributed more		tributions received by th	ne foundation before the cl	ose of any tax
See Statement 6				_	
b List any managers of the foundation wh other entity) of which the foundation ha			(or an equally large por	tion of the ownership of a	partnership or
None				. <u></u>	.
2 Information Regarding Contribut Check here ► X if the foundation of the foundation makes gifts, grants, etc.	only makes contributions	to preselected charitable	organizations and does	· · · · · · · · · · · · · · · · · · ·	
	'				
a The name, address, and telephone num	ider of the person to who	m applications should be	adulesseu.		
b The form in which applications should l	oe submitted and informa	tion and materials they s	hould include:		
c Any submission deadlines:	-				
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields	, kinds of institutions, o	r other factors:	

990-PF (2010) THE HEIDT FA	AMILY FOUNDATION on (continued)		20-588	1913 Pa
Grants and Contributions Paid During the		ayment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		 -
Paid during the year				
			,	
See Statement 7				
Total			► 3a	606,1
Approved for future payment				
None				
		;		

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income			ded by section 512, 513, or 514	(e)		
	BUSINESS Amount sion		(C) Exclu- sion code	(d) Amount	Related or exempt function income		
1 Program service revenue:							
8		<u> </u>					
b		<u> </u>					
<u> </u>							
d			-				
e	<u> </u>		1				
g Fees and contracts from government agencies							
g Fees and contracts from government agencies 2 Membership dues and assessments			-				
3 Interest on savings and temporary cash			-		-		
investments			14	26.			
4 Dividends and interest from securities			14				
5 Net rental income or (loss) from real estate:				<u> </u>			
a Debt-financed property			 				
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		1			7,151.		
9 Net income or (loss) from special events			<u> </u>				
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.		29.	7,151. 7,180.		
13 Total. Add line 12, columns (b), (d), and (e)				13	7,180.		
(See worksheet in line 13 instructions to verify calculations.)							
Part XVI-B Relationship of Activities to	o the Acc	omplishment of Ex	cemp	t Purposes			
Line No. Explain below how each activity for which incor	me is reported	ın column (e) of Part XVI-A	contri	buted importantly to the accor	nplishment of		
the foundation's exempt purposes (other than	by providing fo	unds for such purposes).					
N/A							
	_						
				<u> </u>	 		
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023821 12-07-10	· · · · · · · · · · · · · · · · · · ·				Form 990-PF (2010)		

Form 990-PF (2010) THE HEIDT FAMILY FOUNDATION 20-5881913

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? 1 Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash (2) Other assets 5 Dither transactions: (1) Sales of assets from a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, quipment, or other assets (4) Reminiburations are supported to the sales of the sales of facilities, quipment, or other assets (5) Loans or loan givenities (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (7) In the answer to any of the above is "Ves," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services grower by the reporting foundation. If the oldes than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Lineno (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of relationship 2a. Is the foundation directly or indirectly attituded with, or related to, one or more tax-exampt organization (d) Description of relationship (a) Lineno (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of relationship (b) Amount involved (c) of the Code (other than section 501(c) 0) or in section 527? (c) The Performance of transfers, transactions, and sharing arrangements. (a) Lineno (b) Amount involved (c) State of noncharitable exempt organization (d) Description of relationship (b) Amount involved (c) of the Code (other than section 501(c) 0) or in section 527? (c) Description of relationship (d) Description of relationship (e) Description of relationship (f) Description of relationship (e) Description of relationship (f) Description of relationship (g) Description of relationship (e) Description of relations	1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of										Yes	No
(2) Other isasets b Other transactions: (1) Sales of assets from a noncharitable exempt organization (2) Purchase of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Rental organization (5) Loans or loan guaranties (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (7) Farformance of services or membership or fundrasing solicitations (8) Performance of services organized in the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services speemed. (8) Performance (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and salaring arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Linena (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and salaring arrangements. 2a. Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization session 501(c) of the Code (other than section 501(c)(3)) or in section 52?? Yes X No If Yes, complete the following speedule. (a) Name of organization (b) Type of organization (c) Description of relationships Yes X No If Yes, complete the following speedule. (a) Name of organization (b) Type of organization (c) Description of relationships Yes X No If Yes, complete the following speedule. (a) Name of organization (b) Type of organization of households and diatements, and to the bast of my knowledge and bastel, it is true, correct, and complete Destroin of financial organization of whose properties or speedule. Print/type preparer's signal Print	the Code	e (other than section 501(c))(3) organizations) or	ın section 52	7, relating to political org	ganıza	itions?					
(2) Purchases of assets to a noncharitable exempt organization (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Rembursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations (8) Performance of services or membership or fundraising solicitations (9) Performance of services or membership or fundraising solicitations (10) It was now to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Cascinghon of transfers, and shiwing arrangements. N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c))(3) or in section 52?? Yes X No	а	Transfer	s from the reporting founda	ation to a noncharitat	ole exempt or	ganization of:						
b Other transactions: (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets to a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations (7) End answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services precieived less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Leve no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements (a) Leve no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements (a) Name of organization (b) Type of organization (c) Description of relationship (b) Amount involved (c) Name of noncharitable exempt organization (e) Description of relationship (a) Name of organization (b) Type of organization (e) Description of relationship (b) If Yes," complete the following schedule. (a) Name of organization (b) Type of organization (e) Description of relationship (b) Type of organization (c) Description of relationship (c) Description of relationship (d) Description of relationship (e) Description of relationship (f) Trulis TEE Signature of Mindel Structure of Supravior Su		(1) Cas	h							1a(1)		
(1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reminurement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services gener by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of institute, transactions, and sharing arrangements. N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than sections 501(c)(3)) or in section 527? yes \times \text{No} If Yes \times \times \text{No} If Yes \times \times \text{No} If Yes \times \times \times \text{No} If Yes \times										1a(2)		<u> </u>
(2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan quarantees (6) Performance of services or membership or fundrasing solicitations (8) Performance of services or membership or fundrasing solicitations (8) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (16) X (16) X (16) X (17) If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any fransaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of handlers, transactions, and sharing arrangements 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? (b) If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (e) Description of relationship N/A Linder penalties (Seryin, Toglace that I have examined the intuition, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Delatements (seryin, Toglace that these control the intuition of which prepare has any including the property has any including the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property	b	Other tra	insactions:									
(a) Rental of facilities, equipment, or other assets (b) Loans or loan guarantees (c) Loans or loan guarantees (d) Performance of services or membership or fundrasing solicitations (e) Performance of services or membership or fundrasing solicitations (e) Sharing of facilities, equipment, making lists, other assets, or paid employes (d) If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting floundation. If the foundation received less than fair market value in any fransaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly attiliated with, or related to, one or more tax-exempt organizations described in section 50 f(c) of the Code (other than section 50 f(c)(3)) or in section 527? Yes X No b) If Yes," complete the following schedule. (a) Name of noncharitable exempt organization (c) Description of relationship N/A										1b(1)		<u>X</u>
(4) Rembursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (7) Exercise to any of the above as "Sex", complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services received. (a) Lime no (b) Amount involved (c) Name of noncharitable exempt organization (d) be exception of transfers, transactions, and sharing arrangements. (a) Lime no (b) Amount involved (c) Name of noncharitable exempt organization (d) be exception of transfers, transactions, and sharing arrangements. (b) Amount involved (c) Name of noncharitable exempt organization (d) be exception of transfers, transactions, and sharing arrangements. (a) Lime no (b) Amount involved (c) Name of noncharitable exempt organization (d) be exception of transfers, transactions, and sharing arrangements. (b) Type of organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? (a) Name of organization (b) Type of organization (e) Description of relationship N/A Lines centrics (south), Tobaccar that have exempted the return, including accompanying pobletical and attendents, and to be best of my knowledge and belief, it is true, correct, and complete Delatemon of Lines (south), the constitution of the constitutio					rganization							<u>X</u>
(6) Performance of services or membership or fundrating solicitations Sharing of facilities, equipment, mailing lists, other assets, or paid employees d if the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services goven by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? b If Yes, complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under pealities (prays, 17-b)clare that I have examined the return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Debaration plangager (other than testing in the statement), and all information of which prepare has any knowledge and belief, it is true, correct, and complete Debaration plangager (other than the statement), and all information of which prepare has any knowledge and belief, it is true, correct, and complete Debaration plangager (other than the statement), and all information of which prepare has any knowledge and belief, it is true, correct, and complete Debaration plangager (other than the statement), and all information of which prepare has any knowledge and belief, it is true, correct, and complete Debaration plangager (other than the statement), and all information of which prepare has any knowledge and belief, it is true, correct, and complete Debaration plangager (other than the statement), and all informa												<u>X</u>
(6) Performance of services or membership or fundrating solicitations Sharing of facilities, equipment, mailing lists, other assets, or paid employees d if the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services goven by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? b If Yes, complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under pealities (prays, 17-b)clare that I have examined the return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Debaration plangager (other than testing in the statement), and all information of which prepare has any knowledge and belief, it is true, correct, and complete Debaration plangager (other than the statement), and all information of which prepare has any knowledge and belief, it is true, correct, and complete Debaration plangager (other than the statement), and all information of which prepare has any knowledge and belief, it is true, correct, and complete Debaration plangager (other than the statement), and all information of which prepare has any knowledge and belief, it is true, correct, and complete Debaration plangager (other than the statement), and all information of which prepare has any knowledge and belief, it is true, correct, and complete Debaration plangager (other than the statement), and all informa		٠,	•									<u>X</u>
d if the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfere, transactions, and sharing arrangements. N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization in section 501(c) of the Code (other than section 501(c)) or in section 52?? Ves		· · · · · · · · · · · · · · · · · · ·										<u>X</u>
d if the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfere, transactions, and sharing arrangements. N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization in section 501(c) of the Code (other than section 501(c)) or in section 52?? Ves				•	•							<u> X</u>
or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? b. If ness, complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties (person, Register of the titus) or following schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Debtaration of resparse (other than sexpanded the relation of which prepare has any knowledge Print/Type preparer's name Preparer's signature Date Check if PTIN Self- employed												<u> X</u>
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(a) Description of transfers, transactions, and sharing arrangements N/A						ed less than fair market v	alue i	n any transaction	or snaring arranger	ment, snow in		
N/A 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? b if Yes, "complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of Perpy, Tobalize that I have sugmented this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration appropries from the following schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration appropries from the first sugment of information of which propage has any knowledge and belief, it is true, correct, and complete Declaration appropries from the first sugment of sugments of the best of my knowledge and belief, it is true, correct. Sign Here Print/Type preparer's name Preparer's signature Preparer's signature Date TRUSTEE Title Print/Type preparer's name Preparer's signature Preparer's signature Preparer's signature Signature for trustee Print/Type preparer's name	/a\ı			,		a evernat organization	T	(d) December				
2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? Yes X No b If Yes, complete the following schedules (a) Name of organization (b) Type of organization (c) Description of relationship N/A Sign Here Under penalties (perury, Tolgitare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration operator (other than tappayer or followary) in based on all information of which preparer has any knowledge TRUSTEE Tritle Print/Type preparer's name Preparer's signature Oate Check if PTIN Self- employed	(4)	ine no	(b) Amount involved	(c) Name of		exempt organization		(u) Description	or transfers, transaction	ns, and snaring arr	angerne	กเร
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule. (a) Name of organization N/A Under penalties (perjury, Foliciare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of breparer (other than talpayer or fiduciary) is based on all information of which preparer has any knowledge Print/Type preparer's name Preparer's signature Date Check If PTIN Self- employed PTIN			:-		N/A		-					
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule. (a) Name of organization N/A Under penalties (perjury, Foliciare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of breparer (other than talpayer or fiduciary) is based on all information of which preparer has any knowledge Print/Type preparer's name Preparer's signature Date Check If PTIN Self- employed PTIN		+								•		
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule. (a) Name of organization N/A Under penalties (perjury, Foliciare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of breparer (other than talpayer or fiduciary) is based on all information of which preparer has any knowledge Print/Type preparer's name Preparer's signature Date Check If PTIN Self- employed PTIN												
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Sign Here Value Print/Type preparer's name Preparer's signature Date Check If PTIN Self-employed 2a	Is the fo	undation directly or indirect	tly affiliated with, or r	elated to, one	or more tax-exempt orga	anızat	ions described					
(a) Name of organization N/A Under penalties of perjury, Ediclare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than talpayer or fiduciary) is based on all information of which preparer has any knowledge Vision TRUSTEE Title Print/Type preparer's name Preparer's signature Date Check If PTIN self- employed	ın sectio	n 501(c) of the Code (other	r than section 501(c)	(3)) or in sect	ion 527?				Yes	X	No	
N/A Under penalties (perjury, Fd) clare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than tabayer or fiduciary) is based on all information of which preparer has any knowledge Value TRUSTEE Title Print/Type preparer's name Preparer's signature Date Check If PTIN self- employed SCIA	b	If "Yes,"	complete the following sch	edule.								
Sign Here Under penalties of perjury, Foliciare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than tabpayer or fiduciary) is based on all information of which preparer has any knowledge V				anization		(b) Type of organizatio	n		(c) Description of re	lationship		
Sign Here A complete Declaration of preparer (other than tab payer or fiduciary) is based on all information of which preparer has any knowledge X X X X X X X X X X			N/A		_		\perp					
Sign Here A complete Declaration of preparer (other than tab payer or fiduciary) is based on all information of which preparer has any knowledge X X X X X X X X X X												
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Signature of officer or trustee Date TRUSTEE	٥.	امدا								and belief, it is tru	ie, corre	Ci,
Signature of officer or trustee Print/Type preparer's name Preparer's signature Date Title Check if PTIN self- employed			v 1/.	11/2	14/2		1		· · · · · · · · · · · · · · · · · · ·			
Print/Type preparer's name Preparer's signature Date Check if PTIN self- employed	1 10		Supporture of Carpor Service	iotoo			"I"					
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1 1 (-1 1\\cappa CO\) 1			Filliv Type preparer S na	iiiie	rieparer S S	iynature	٦٦	,वाद		T HIN		
	P۰	id	WITTON 3 343	מס עשם	10-1	May, CEA	1	1 /07 /11	Soil- employed			
RURT A. MARTI, CPA					C DAT	<u> </u>	jΤ	T/0//TT	Franco FIN N			
Preparer Firm's name ► MOWRY, MARTY & BAIN, INC Firm's EIN ► Use Only		•		KI, MAKTY	« BAI	N, INC			FIRM'S EIN			
Firm's address > 10260 ALLIANCE ROAD, SUITE 160	US			260 ATTTA	NCE PO	או פוודשם 1	60			•		
540 040 0550							. 0 0		Phone so E	13_8/2	2 5 <i>6</i>	n
CINCINNATI, OH 45242-4743 Phone no. 513-842-8560 Form 990-PF (2010)			1 (1	TACTIMINATT,	OH 43	4447			Tritone ilo. 3.			

Schedule B (Form 990, 990-EZ,

or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

Name of the organizati	on	Employer identification number
	THE HEIDT FAMILY FOUNDATION	20-5881913
Organization type (chec		1 20 3001313
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	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
General Rule X For an organiza	I (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special R ition filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in n	
Special Rules		
509(a)(1) and 1	01(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the re 70(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II	
aggregate cont	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one conti ributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary of cruelty to children or animals Complete Parts I, II, and III	
contributions fo If this box is ch purpose Do no	O1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one continues exclusively for religious, charitable, etc., purposes, but these contributions did not a ecked, enter here the total contributions that were received during the year for an exclusive to the complete any of the parts unless the General Rule applies to this organization because able, etc., contributions of \$5,000 or more during the year.	ggregate to more than \$1,000 ely religious, charitable, etc ,
but it must answer "No"	n that is not covered by the General Rule and/or the Special Rules does not file Schedule on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	

Employer identification number

THE HEIDT FAMILY FOUNDATION

20-5881913

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	JULIA S. HEIDT 9075 CUNNINGHAM ROAD CINCINNATI, OH 452431503	\$59,974.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	ROBERT S. HEIDT, JR. 9075 CUNNINGHAM ROAD CINCINNATI, OH 452431503	\$\$9,974.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	JULIA S. HEIDT 9075 CUNNINGHAM ROAD CINCINNATI, OH 452431503	\$ 86,394.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZiP + 4	(c) Aggregate contributions	(d) Type of contribution
4	ROBERT S. HEIDT, JR. 9075 CUNNINGHAM ROAD CINCINNATI, OH 452431503	\$ 86,394.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) No	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5	JULIA S. HEIDT 9075 CUNNINGHAM ROAD CINCINNATI, OH 452431503	\$70,753.	Person Payroli Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
6	ROBERT S. HEIDT, JR. 9075 CUNNINGHAM ROAD CINCINNATI, OH 452431503	\$	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)

Page	2 of	2 of Part I	ı
- 800	Z ()	Z UITarri	ı

Name of organization

Employer identification number

THE HEIDT FAMILY FOUNDATION

20-5881913

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	JULIA S. HEIDT 9075 CUNNINGHAM ROAD CINCINNATI, OH 452431503	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
8	ROBERT S. HEIDT, JR. 9075 CUNNINGHAM ROAD CINCINNATI, OH 452431503	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate 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) Aggregate 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) Aggregate 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) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

THE HEIDT FAMILY FOUNDATION

20-5881913

Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	1715.5 SHARES OF STOCK, COMMON, CAMPBELL SOUP COMPANY		
		\$ 59,974.	05/20/10
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	1715.5 SHARES OF STOCK, COMMON, CAMPBELL SOUP COMPANY		
		\$ 59,974.	05/20/10
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	1100 SHARES OF STOCK, COMMON, DANAHER CORP		
		\$ 86,394.	05/20/10
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
4	1100 SHARES OF STOCK, COMMON, DANAHER CORP		
		\$86,394.	05/20/10
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>5</u>	1750 SHARES OF STOCK, COMMON, INTUIT		
		\$ <u>70,753.</u>	_08/10/10
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>6</u>	1750 SHARES OF STOCK, COMMON, INTUIT		
023453 12-23	2.40	\$ 70,752.	

ne of organiz	ation		Employe	er identification number
art III	OT FAMILY FOUNDATION Exclusively religious, charitable, etc., indiv	idual contributions to sectio	n 501(c)(7), (8), or (10) organizat	-5881913 ions aggregating
	more than \$1,000 for the year. Complete co Part III, enter the total of exclusively religious, \$1,000 or less for the year (Enter this inform	lumns (a) through (e) and the charitable, etc., contributions	following line entry. For organizat of	ions completing
No. om art I	(b) Purpose of gift	(c) Use of gift		of how gift is held
_ [=				
		(e) Transfer of gift		
	Transferee's name, address, and a	ZIP + 4	Relationship of transferor	to transferee
No. om art 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 a	ZIP + 4	Relationship of transferor	to transferee
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description	of how gift is held
		(e) Transfer of gif	t	
-	Transferee's name, address, and a	ZIP + 4	Relationship of transferor	to transferee
) No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description	of how gift is held
		(e) Transfer of gif		
-	Transferee's name, address, and	ZIP + 4	Relationship of transferor	to transferee
-				

of Part III

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Form 990-PF Interest on Savi	ings and Ten	nporary Ca	sh Ir	nvestments	Statement	1
			-			
Source					Amount	
UBS BANK USA DEP ACCT.						26.
Total to Form 990-PF, Part I,	line 3, Co	olumn A				26.
Form 990-PF Dividend	ls and Inter	est from	Secui	rities	Statement	2
Source	Gross	s Amount		ital Gains ividends	Column (A Amount	.)
RMA MONEY MKT. PORTFOLIO		3.		0.		3.
Total to Fm 990-PF, Part I, 1	In 4	3.		0.		3.
Form 990-PF	Accounti	ng Fees	 		Statement	3
Description	(a) Expenses Per Books	(b) Net Inve ment Inc		(c) Adjusted Net Incom		
MOWRY, MARTY & BAIN, INC.	2,125.	2,	125.		····	0.
To Form 990-PF, Pg 1, ln 16b	2,125.	2,	125.			0.
Form 990-PF	Tax	ces			Statement	4
Description	(a) Expenses Per Books			(c) Adjusted Net Incom		
TREASURER, STATE OF OHIO FEE	100.		100.			0.
To Form 990-PF, Pg 1, ln 18	100.		100.			0.

Form 990-PF	List of Substantial Contributors Part VII-A, Line 10	Statement	5
Name of Contributor	Address		
ROBERT S. HEIDT, JR.	9075 CUNNINGHAM ROAD CINCINNATI, OH 452431503		
JULIA S. HEIDT	9075 CUNNINGHAM ROAD CINCINNATI, OH 452431503		
Form 990-PF	Part XV - Line 1a List of Foundation Managers	Statement	6

Name of Manager

ROBERT S. HEIDT, JR. JULIA S. HEIDT

Form 990-PF

Statement 7

	During the Year		emenc /
Recipient Name and Address	Recipient Relationship and Purpose of Grant	Recipient Status	Amount
4C FOR CHILDREN 1924 DANA AVENUE CINCINNATI, OH 45207	NONE SUPPORT FOR EARLY YOUTH EDUCATION AND CARE	501(C)(3)	500.
ALDEN VOLUNTEERS P.O. BOX 55 ALDEN, MI 49612	NONE TO PROMOTE & ENHANCE THE COMMUNITY OF ALDEN	501(C)(3)	100.
ANTHONY MUNOZ FOUNDATION 8919 ROSSASH ROAD CINCINNATI, OH 452363830	NONE YOUTH ACTIVITIES SUPPORT	501(C)(3)	3,800.
ARCHDIOCESE OF CINCINNATI 100 EAST EIGHTH STREET CINCINNATI, OH 45202	NONE TO SUPPORT CATHOLIC EDUCATIONAL ENDEAVORS	501(C)(3)	2,000.
BETHANY HOUSE 1841 FAIRMOUNT AVENUE CINCINNATI, OH 45214	NONE CHARITABLE ENDEAVORS	501(C)(3)	25,623.
BIXBY & ASSOCIATES AKA BIXBY SCHOOL 4760 TABLE MESA DRIVE BOULDER, CO 80305	NONE EDUCATIONAL ENDEAVORS	501(C)(3)	100.
BOOMER ESIASON FOUNDATION 200B ARMSTRONG ROAD GARDEN CITY PARK, NY 11040	NONE CYSTIC FIBROSIS CARE AND RESEARCH	501(C)(3)	3,000.
BOYS & GIRLS CLUB OF GREATER CINCINNATI 3504 WASHINGTON AVENUE CINCINNATI, OH 45229	NONE TO SUPPORT YOUTH ACTIVITIES	501(C)(3)	250.

Grants and Contributions

THE HEIDT FAMILY FOUNDATION.	•		20-5881913
BOYS & GIRLS CLUBS OF CARLSBAD P.O. BOX 913 CARLSBAD, CA 92018	NONE COMMUNITY SUPPORT OF YOUTH ACTIVITIES	501(C)(3)	300.
BRIAN EINHAUS EDUCATION FUND C/O SHERRY EINHAUS CINCINNATI, OH 45242		501(C)(3)	200.
BRIDGES FOR A JUST COMMUNITY, INC. 430 READING ROAD CINCINNATI, OH 45202	NONE TO PROMOTE JUSTICE IN THE COMMUNITY	501(C)(3)	4,000.
CHICAGO PROVINCE OF THE SOCIETY OF JESUS 2059 NORTH SEDGWICK STREET CHICAGO, IL 60614-4746	NONE FOR JESUIT DIRECTED HAITIAN RELIEF EFFORTS	501(C)(3)	1,000.
CINCINNATI CHILDREN'S HOSPITAL MEDICAL CENTER 3333 BURNET AVENUE CINCINNATI, OH 45229	NONE MEDICAL RESEARCH	501(C)(3)	2,500.
CINCINNATI FRIENDS OF CHARITY 2499 SADDLEBACK DRIVE CINCINNATI, OH 45244	NONE CHARITABLE ENDEAVORS	501(C)(3)	3,000.
CRIS COLLINSWORTH PROSCAN FUND 5400 KENNEDY AVENUE CINCINNATI, OH 45213	NONE MEDICAL RESEARCH FOR WOMEN	501(C)(3)	1,075.
CROSSROADS COMMUNITY CHURCH 3500 MADISON ROAD CINCINNATI, OH 45209	NONE PROMOTE RELIGIOUS ENDEAVORS	501(C)(3)	3,450.
DIOCESAN CATHOLIC CHILDREN'S HOME 75 ORPHANAGE ROAD FT. MITCHELL, KY 41017	NONE TO PROVIDE FOOD & SHELTER FOR THE YOUNG	501(C)(3)	100.
DISABLED AMERICAN VETERANS P.O. BOX 14301 CINCINNATI, OH 45250-0301	NONE SUPPORT FOR OUR SERVICEMEN	501(C)(3)	350.

THE HEIDT FAMILY FOUNDATION.			20-5881913
1 BRIAR ROAD GOLF, IL 60029		501(C)(3)	200.
GEORGORIAN UNIVERSITY FOUNDATION 106 WEST 56TH STREET NEW YORK, NY 10019		501(C)(3)	500.
GREATER CINCINNATI FOUNDATION 200 WEST FOURTH STREET CINCINNATI, OH 45202-2602	NONE TO SUPPORT CHARITABLE ENDEAVORS	501(C)(3)	75.
GREEN BERET FOUNDATION P.O. BOX 8250 HUNTINGTON BEACH, CA 92646		501(C)(3)	250.
8255 SPOOKY HOLLOW ROAD	NONE ASSISTANCE FOR LOW INCOME SCHOOLS	501(C)(3)	350.
HALEY MEMORIAL LIBRARY & HISTORY CENTER 1805 W. INDIANA AVENUE MIDLAND, TX 79701	NONE EDUCATIONAL ENDEAVORS	501(C)(3)	100.
HILLCREST CHRISTIAN SCHOOL 2500 BETHEL ROAD BETHEL PARK, PA 15102	NONE EDUCATIONAL ENDEAVORS	501(C)(3)	50.
HOLY FAMILY HOSPITAL OF BETHLEHEM FOUNDATION 1730 M STREET NW, SUITE 403 WASHINGTON, DC 20036	NONE TO PROVIDE MEDICAL CARE	501(C)(3)	500.
JUVENILE DIABETES RESEARCH FOUNDATION 8041 HOSBROOK RD., SUITE 422 CINCINNATI, OH 452363830	NONE MEDICAL RESEARCH	501(C)(3)	100.
KENZIE'S CLOSET P.O. BOX 43285 CINCINNATI, OH 45243	NONE COMMUNITY SUPPORT FOR YOUTH	501(C)(3)	350.

THE HEIDT FAMILY FOUNDATION.	·		20-5881913
LIGHTHOUSE YOUTH SERVICES 401 E. MCMILLAN STREET CINCINNATI, OH 45206	NONE YOUTH ACTIVITIES SUPPORT	501(C)(3)	900.
LINDNER CENTER OF HOPE P.O. BOX 19970 CINCINNATI, OH 45219-0970	NONE MEDICAL RESEARCH	501(C)(3)	42,000.
MELANOMA KNOW MORE P.O. BOX 9155 CINCINNATI, OH 45209	NONE MEDICAL RESEARCH	501(C)(3)	100.
MERCY NEIGHBORHOOD MINISTRIES 1602 MADISON ROAD CINCINNATI, OH 45206	NONE CHARITABLE ENDEAVORS	501(C)(3)	2,000.
	NONE TO PROMOTE MEN'S HEALTH	501(C)(3)	300.
MULTIPLE SCLEROSIS SOCIETY OF SOUTHWEST OHIO 4440 LAKE FOREST DRIVE BLUE ASH, OH 45242	NONE MEDICAL RESEARCH	501(C)(3)	600.
NAPLES ZOO AND BOTANICAL GARDENS 1590 GOODLETTE ROAD NAPLES, FL 34102		501(C)(3)	670.
NATIONAL KIDNEY FOUNDATION OF KENTUCKY 200 EAST LIBERTY STREET, SUITE 710 LOUISVILLE, KY 40202	NONE MEDICAL RESEARCH & SUPPORT	501(C)(3)	200.
OHIO ATHLETIC TRAINERS ASSOCIATION P.O. BOX 1321 WILLOUGHBY, OH 44096	NONE TO PROMOTE ATHLETIC TRAINING PROFESSION & QUALITY HEALTHCARE	501(C)(3)	120.
OHIO CANCER RESEARCH ASSOCIATES 201 E. 5TH STREET, SUITE 900 CINCINNATI, OH 45202	NONE MEDICAL RESEARCH	501(C)(3)	5,000.

THE HEIDT FAMILY FOUNDATION.	•		20-5881913
	NONE TO SUPPORT YOUTH SPORTS	501(C)(3)	100.
ORDER OF MALTA AMERICAN ASSN 1011 FIRST AVENUE, ROOM 1350 NEW YORK, NY 10022	NONE RELIGIOUS CHARITABLE ENDEAVORS	501(C)(3)	11,684.
SCRIPPS HOWARD FOUNDATION P.O. BOX 5380 CINCINNATI, OH 45201	NONE CHARITABLE ENDEAVORS	501(C)(3)	18,000.
SPRINGER SCHOOL AND CENTER 2121 MADISON ROAD CINCINNATI, OH 45208-3288		501(C)(3)	12,500.
ST. MATTHEW'S HOUSE 2001 AIRPORT RD. S. NAPLES, FL 34112	NONE TO PROVIDE FOOD & SHELTER FOR THE HOMELESS	501(C)(3)	100.
	NONE EDUCATIONAL ENDEAVORS	501(C)(3)	265,742.
STEPPING STONES CENTER 5650 GIVEN ROAD CINCINNATI, OH 45243	NONE CHARITABLE ENDEAVORS	501(C)(3)	5,355.
TEAM HEAL FOUNDATION P.O. BOX 451370 LOS ANGELES, CA 90045	NONE MEDICAL CARE FOR YOUNG ATHLETES	501(C)(3)	1,000.
THE BEECHWOOD HOME 2140 POGUE AVENUE CINCINNATI, OH 452082087	NONE LONG TERM MEDICAL CARE	501(C)(3)	500.
THE CARA PROGRAM 237 SOUTH DESPLAINES CHICAGO, IL 60661	NONE ASSISTANCE FOR THE POOR AND HOMELESS	501(C)(3)	250.

THE HEIDT FAMILY FOUNDATION,	•		20-5881913
THE LEUKEMIA & LYMPHOMA SOCIETY 2300 WALL STREET, UNIT H CINCINNATI, OH 45212	NONE TO SUPPORT MEDICAL RESEARCH	501(C)(3)	50.
THE NATIONAL FOUNDATION TO SUPPORT CELL TRANSPLANT RESEARCH 333 E. MAIN STREET, SUITE 304 LOUISVILLE, KY 40202		501(C)(3)	300.
THE UNIVERSITY OF CINCINNATI ALUMNI ASSOCIATION 2906 WOODSIDE DRIVE CINCINNATI, OH 45221-0024	TO SUPPORT EDUCATIONAL	501(C)(3)	100.
THE WELLNESS COMMUNITY 4918 COOPER ROAD CINCINNATI, OH 45242		501(C)(3)	100.
THREE LAKES ASSOCIATION P.O. BOX 689 BELLAIRE, MI 49615		501(C)(3)	100.
UNIVERSITY OF CINCINNATI FOUNDATION P.O. BOX 19970 CINCINNATI, OH 45219-0970	NONE EDUCATIONAL ENDEAVORS	501(C)(3)	144,700.
USO OF METROPOLITAN WASHINGTON 228 MCNAIR ROAD, BUILDING 405 FT. MYER, VA 22211		501(C)(3)	36,800.
WEST POINT ASSOCIATION OF GRADUATES FUND 698 MILLS ROAD WEST POINT, NY 109961607	NONE EDUCATIONAL ENDEAVORS	501(C)(3)	822.
WESTOVER SCHOOL INC 1237 WHITTEMORE ROAD, P.O. BOX 847 MIDDLEBURY, CT 06762-0848	NONE TO SUPPORT EDUCATIONAL ENDEAVORS	501(C)(3)	400.
XAVIER UNIVERSITY 3800 VICTORY PARKWAY CINCINNATI, OH 45207	NONE EDUCATIONAL ENDEAVORS	501(C)(3)	1,831.
Total to Form 990-PF, Part XV, li	ne 3a		606,147.

Form 8868 (Rev. 1-2011)	•				Page 2
If you are filing for an Additional (Not Automatic) 3-Month	Extension.	complete only Part II and check this i	oox		▶ X
Note. Only complete Part II if you have already been granted a		-		8868.	
If you are filing for an Automatic 3-Month Extension, com					
Part II Additional (Not Automatic) 3-Month			copies r	needed).	
Name of exempt organization				Employer identification number	
orint THE HEIDT FAMILY FOUNDATION	nt mue uetom exativ equativantom			20-5881913	
le by the		tions		<u> </u>	
tue date for 9075 CUNNINGHAM ROAD	x, 300 mando	Moris.			
etum See City, town or post office, state, and ZIP code. For	a foreign add	tress see instructions			
natructions CINCINNATI, OH 45243-1503	•	2,000,000			
CINCINNAII, OII 43243 1303	<u></u>				
Enter the Return code for the return that this application is for	(file a separa	ite application for each return)			0 4
	•				
Application	Return	Application			Return
s For	Code	Is For		_	Code
Form 990	01				
Form 990-BL	02	Form 1041-A			08
Form 990-EZ	03	Form 4720			09
Form 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 gran	ted an autor	natic 3-month extension on a previo	usly file	d Form 8868	3.
THE HEIDT FAM					
• The books are in the care of ▶ 9075 CUNNINGH	IAM ROA			<u>3-1503</u>	
Telephone No. ► 513-842-8560	_	FAX No. ► <u>513-842-856</u>	<u>1</u>		
If the organization does not have an office or place of busin	ness in the Ui	nited States, check this box			▶ □
If this is for a Group Return, enter the organization's four di	git Group Ex	emption Number (GEN) If t	his is fo	r the whole g	roup, check this
box 🕨 🔲 . If it is for part of the group, check this box 🕨	and atta	ach a list with the names and EINs of a	II memb	ers the exten	sion is for.
4 I request an additional 3-month extension of time until	Novem	<u>ber 15, 2011</u> .			
5 For calendar year 2010 , or other tax year beginning		, and ending	_		·
6 If the tax year entered in line 5 is for less than 12 months	s, check reas	son: Initial return	j Fınal r	eturn	
Change in accounting period					
7 State in detail why you need the extension					
ALL OF THE INFORMATION PERTA				EXPENS	
ASSET VALUATION WHICH ARE NE	CESSAR	Y TO COMPLETE THE R	ETUR	N ARE I	NOT YET
COMPILED AND AVAILABLE.					
8a If this application is for Form 990-BL, 990-PF, 990-T, 472	20, or 6069, e	enter the tentative tax, less any			•
nonrefundable credits. See instructions.			8a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 600					
tax payments made. Include any prior year overpaymen	t allowed as	a credit and any amount paid	ļ		•
previously with Form 8868.			8b	\$	0.
c Balance due. Subtract line 8b from line 8a. Include your		th this form, if required, by using			•
EFTPS (Electronic Federal Tax Payment System) See in		137	_ 8c	\$	0.
•	•	nd Verification			
Under penaities of perjury, I declare that I have examined this form, ind It is true, correct, and complete, and that Lam authorized to prepare th	cluding accomp us form	panying schedules and statements, and to t	ne best c	,	/
			5	► 8/11	///
Signature > Wm) / Journal Title	► CPA		Date	→ ∨///	/'I

Form 8868 (Rev 1-2011)