

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



Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

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

2011

OMB No 1545-0052

18 Taxes (attach schedule) (see instructions) 0 0 0 0 0 0 0 0 0	Foi	calen	dar year 2011 or tax year beginning Januar	y 1, 201	1, and	ending	December 31	, 20	11
Number and street per PO box number if mat is not delivered to street address	Na	me of fo	undation			A Employer	identification number		
PO Box 3250	Sif	ver Dol	lar Foundation				20 5041272		
Comparison Com	Nu	mber an	d street (or P O box number if mail is not delivered to street address)	Room	/surte	B Telephone	number (see instruction	ıs)	
Basalt, CO 31821 G Check all that apply: Initial return Initial return Amended re	PO	Box 3	250				248-302-3436		
G Check all that apply: ☐ Initial return ☐ Initial return ☐ Amended return ☐ Amended return ☐ Actives change ☐ Name change ☐ Name change ☐ Name change ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation ☐ Fair market value of all assets at ☐ J Accounting method: ☐ Cash ☐ Accrual ☐ Fair market value of all assets at ☐ J Accounting method: ☐ Cash ☐ Accrual ☐ Fair market value of all assets at ☐ J Accounting method: ☐ Cash ☐ Accrual ☐ Fair market value of all assets at ☐ J Accounting method: ☐ Cash ☐ Accrual ☐ Fair market value of all assets at ☐ J Accounting method: ☐ Cash ☐ Accrual ☐ Fair market value of all assets at ☐ J Accounting method: ☐ Cash ☐ Accrual ☐ Fair market value of all assets at ☐ J Accounting method: ☐ Cash ☐ Accrual ☐ Fair market value of all assets at ☐ J Accounting method: ☐ Cash ☐ Accrual ☐ Fair market value of all assets of Fair market value of all assets on savings and temporary cash investments ☐ D O O O O O O O O O O O O O O O O O O	Cit	y or tow	n, state, and ZIP code			C If exempt	ion application is pendi	ng, check he	re ▶ 🗍
Grader schange Namended return	Ba	salt, CO	D 81621						
Address change	G	Check	all that apply: Initial return Initial return	of a former public	charity	D 1. Foreigi	n organizations, check l	nere	▶ □
H Check type of organization:			☐ Final return ☐ Amended r	eturn		2 Foreigi	n organizations meeting	the 85% tes	t
Section 4947(a)(1) nonexempt charartable trust Other taxable private foundation Fair market value of all assets at end of year (from Part II, col. (c), line 16) ≥ \$ 19817 (f) Christopen(f) Christop	_		<u> </u>						ິ ▶ 🔲
Section 4947(a)(1) nonexempt charatable trust Other taxable private foundation Farr market value of all assets at end of year (from Part II, col. (c), Other (specify) Other (specify	Н		· · · · · · · · · · · · · · · · · · ·			E If private	foundation status was	terminated un	der
end of year (from Part II, col. (c). □ Other (specify) under section 507(b)(1)(B), check here □ □			· · · · · · · · · · · · · · · · · · ·			section 5	07(b)(1)(A), check here		▶ 🗌
	ı			: 🗹 Cash 🗌 A	ccrual				_
Part Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (g) (see instructions) 0						under se	ction 507(b)(1)(B), check	here	▶□
### amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) 1 Contributions, gifts, grants, etc., received (attach schedule) 2 Check ▶ ☐ If the foundation is not required to attach Sch. B 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5 Gross rents 5 O O O 5 O 6 Net gain or (loss) from sale of assets not on line 10 6 Fee Net gain or (loss) from sale of assets not on line 10 7 Capital gain net income (from Part IV, line 2) 9 Net short-term capital gain 9 Income modifications 10 Gross sales less returns and allowances 10 O O 10				on cash basis.)		<u> </u>			
the amounts in column (a) (see instructions) books cash basis only)	Р	art I	•		(b) Net	investment	(c) Adjusted net		
1					l	ncome	income		
2 Check	_	4		^				(======================================	
3		1		U					
A Dividends and interest from securities 1550		1	·						
Sa Gross rents		1	• • • •		 				
b Net rental income or (loss) 0 0 0 0 0 0 0 0 0		1 -			 				
6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 0			· ·						
b Gross sales price for all assets on line 6a 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	a		` ' 	0					
9 Income modifications 0 0 0 0 0 0 0 0 0	Ş	1	*						
9 Income modifications 0 0 0 0 0 0 0 0 0	Š	_				0		_	
9 Income modifications 10a Gross sales less returns and allowances b Less: Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) 17b Pension plans, employee benefits 18 Taxes (attach schedule) 19 Total of the employee salaries and wages 10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	æ	8	•				0		
b Less: Cost of goods sold 0 0 0 0 0 0 11 Other income (attach schedule) 0 0 0 0 0 0 12 Total. Add lines 1 through 11 1 1550 1550 1550 1550 1550 1550 155		9	· -				0	·	
C Gross profit or (loss) (attach schedule) 0 0 0 0 0 0 0 0 0		10a	Gross sales less returns and allowances 0						
11 Other income (attach schedule)		b	Less: Cost of goods sold						
12 Total. Add lines 1 through 11 1550 1550 1550 1550 1550 1350		С	Gross profit or (loss) (attach schedule)						
13 Compensation of officers, directors, trustees, etc 0 0 0 0 0 0 0 0 0		11							
14 Other employee salaries and wages 0 0 0 0 0 0 0 0 0	_								
Company Comp	Ś	1	•		 				
Company Comp	Se	1						<u> </u>	
Company Comp	<u>pe</u>	1			<u> </u>				
1	Ä		,				ļ		
18 Taxes (attach schedule) (see instructions)	5		The Wofessional fees (attach schedule)	-	 				
18 Taxes (attach schedule) (see instructions)	ŢĘ.	対応C	Interest						
Other expenses (attach schedule) 75 75 75 75 75 75 75 75 75 75 75 75 75	-st	18	Taxes (attach schedule) (see instructions)			0			0
Other expenses (attach schedule)	Ē	190	Depreciation (attach schedule) and depletion	0		0	0		
Other expenses (attach schedule)	턍	M201	Occupancy of	0		0	0		0
Other expenses (attach schedule)	1	21	Travel, conferences, and meetings	0		0	0		0
Other expenses (attach schedule)	Ĕ	(223)	Printing and publications	0		0	0		
26 Total expenses and disbursements. Add lines 24 and 25 11075 75 75 11075 27 Subtract line 26 from line 12. a Excess of revenue over expenses and disbursements (9525) b Net investment income (if negative, enter -0-)	<u>-6</u>	-23		75	_	75	75		75
26 Total expenses and disbursements. Add lines 24 and 25 11075 75 75 11075 27 Subtract line 26 from line 12. a Excess of revenue over expenses and disbursements (9525) b Net investment income (if negative, enter -0-)	į	24			ļ		i		
26 Total expenses and disbursements. Add lines 24 and 25 11075 75 75 11075 27 Subtract line 26 from line 12. a Excess of revenue over expenses and disbursements (9525) b Net investment income (if negative, enter -0-)	era				+	75	75		
26 Total expenses and disbursements. Add lines 24 and 25 11075 75 75 11075 27 Subtract line 26 from line 12. a Excess of revenue over expenses and disbursements (9525) b Net investment income (if negative, enter -0-)	Č	i					ļ		
a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) . c Adjusted net income (if negative, enter -0-)	_	+		11075	 	75	75		11075
b Net investment income (if negative, enter -0-) . c Adjusted net income (if negative, enter -0-)				,					
c Adjusted net income (if negative, enter -0-) .		1	•	(9525)	-			<u> </u>	
C Adjusted fiet informs (if regative, cities 10-7).			, -		 -			 	
	<u></u>			Cat 11	0.11000			rm 990-PI	(2011)

. .

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End 0	(c) Fair Market Value
			(a) Book Value	(b) Book Value	
	1	Cash—non-interest-bearing	212797	199817	199817
	2	Savings and temporary cash investments	0	0	0
	3	Accounts receivable ▶0			
		Less: allowance for doubtful accounts ▶0	0	0	0
	4	Pledges receivable ▶ 0			i
		Less. allowance for doubtful accounts ▶0	0	0	0
	5	Grants receivable	0	0	
	6	Receivables due from officers, directors, trustees, and other	ĺ		
		disqualified persons (attach schedule) (see instructions)	0	0	0
	7	Other notes and loans receivable (attach schedule) ▶			1
		Less allowance for doubtful accounts ▶ 0	0	0	0
ţ	8	Inventories for sale or use	0	0	0
Assets	9	Prepaid expenses and deferred charges	0	0	0
As	10a	Investments – U.S. and state government obligations (attach schedule)	0	0	0
	ь	Investments—corporate stock (attach schedule)	0	0	0
	С	Investments – corporate bonds (attach schedule)	0	0	0
	11	Investments—land, buildings, and equipment: basis ▶ 0		· 	
		Less accumulated depreciation (attach schedule) ▶ 0	0	0	0
	12	Investments—mortgage loans	0	0	0
	13	Investments—other (attach schedule)	0	0	0
	14	Land, buildings, and equipment: basis ▶0			
	'	Less accumulated depreciation (attach schedule) ▶ 0		0	0
	15	Other assets (describe > 0	0	0	0
	16	Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item !)	212797	199817	
	17	Accounts payable and accrued expenses	0	100017	
	18	• •	0	- 0	
es.	l	Grants payable	0	0	
Liabilities	19		0		1
ğ	20	Loans from officers, directors, trustees, and other disqualified persons	0		,
Ë	21	Mortgages and other notes payable (attach schedule) .	0		
	22	Other liabilities (describe > 0)	0		
	23	Total liabilities (add lines 17 through 22)	U	<u>v</u>	
and Balances		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
Ĕ	24	Unrestricted			
a	25	Temporarily restricted		_ 	'
8	26	Permanently restricted			
2		Foundations that do not follow SFAS 117, check here ▶ ☑			1
		and complete lines 27 through 31.			
ŏ	27	Capital stock, trust principal, or current funds	o	0	,
ts	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	·
Net Assets or Fu	29	Retained earnings, accumulated income, endowment, or other funds	212797	199817	r
As	30	Total net assets or fund balances (see instructions)	212797	199817	
et	31	Total liabilities and net assets/fund balances (see			
Ž		instructions)	212797	199817	
Pء	rt III	Analysis of Changes in Net Assets or Fund Balances	2.2.07		
1	Tota	al net assets or fund balances at beginning of year—Part II, colu	mn (a), line 30 (mus	t agree with	
•		of-year figure reported on prior year's return)			212797
_		• •			(9525)
2		er amount from Part I, line 27a			(9523)
3			203272		
4		l lines 1, 2, and 3		4	
5	Dec	reases not included in line 2 (itemize) "market loss" in book vali	Dort II. column (b) !!	5	(3455)
6	lota	al net assets or fund balances at end of year (line 4 minus line 5)—	rart II, column (b), III	ne 30 . 6	199817

Part	V Capital Gains and	Losses for Tax on Investment	Income	 		
		kind(s) of property sold (e.g., real estate, e, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
<u>1a</u>						
<u>b</u>						
<u>C</u>						
<u>d</u>						
<u>e</u>		16 December - House	4-1-01	- 11	·-···	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		n or (loss) (f) minus (g) ————————————————————————————————————
<u>a</u>						
<u>b</u>						
d						
<u>_</u>					···	-
	Complete only for assets show	ring gain in column (h) and owned by the	e foundation	on 12/31/69	(I) Gains (Co	I (h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any	col (k), but no	t less than -0-) or rom col (h))
а						
b						
c						
<u>d</u>						
е				4100-7	<u> </u>	
2	Capital gain net income or ((net capital loss) { If gain, also If (loss), enter			2	
3	If gain, also enter in Part I,	or (loss) as defined in sections 122 line 8, column (c) (see instructions	s) If (loss)	, enter -0- ın		
					3	·
Part		r Section 4940(e) for Reduced ate foundations subject to the section				
Was t	s," the foundation does not q	ection 4942 tax on the distributable ualify under section 4940(e). Do no	t complete	this part.	•	☐ Yes ☑ No
		nt in each column for each year; se	e the instru	ictions before mal	king any entries.	
Cale	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value of	(c) noncharitable-use ass		(d) tribution ratio divided by col (c))
	2010	10095		211	257	.05
	2009	1676		66	980	.025
	2008	1699	+		112	.05
	2007 2006	0		32	505	0
	2000					
2	Total of line 1, column (d)				. 2	.125
3	,	or the 5-year base period—divide th		 ine 2 bv 5. or bv tl		.120
		tion has been in existence if less th			. 3	.03
4	Enter the net value of nonch	naritable-use assets for 2011 from I	Part X, line	5	. 4	189004
5	Multiply line 4 by line 3 .				. 5	5670
6	Enter 1% of net investment	income (1% of Part I, line 27b) .			. 6	0
7	Add lines 5 and 6				. 7	5670
8		s from Part XII, line 4			. 8	11075
	Part VI instructions.	er than line 7, check the box in Par	ı vi, iine ib	, and complete th	at part using a 1	70 tax rate. See the

Part \		ISTru	ICTIO	<u>15)</u>			
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)	-	-	0			
b							
С	here ► ✓ and enter 1% of Part I, line 27b						
·	Part I, line 12, col. (b).		-	1			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0	0			
3	Add lines 1 and 2		0	0			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		0	0			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		0	0			
6	Credits/Payments:						
a	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 0 0 Exempt foreign organizations—tax withheld at source 6b 0 0			,			
b c	Exempt foreign organizations—tax withheld at source 6b 0 0 Tax paid with application for extension of time to file (Form 8868) . 6c 0 0			,			
d	Backup withholding erroneously withheld			·			
7	Total credits and payments. Add lines 6a through 6d	-	0	0			
8	Enter any penalty for underpayment of estimated tax. Check here		0	0			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9		0	0			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . • 10		0	0			
11	Enter the amount of line 10 to be: Credited to 2012 estimated tax ▶ 0 0 Refunded ▶ 11		0	0			
Part	VII-A Statements Regarding Activities		Yes	No			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	res	₩			
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	<u>ra</u>	 	-			
J	of the instructions for definition)?	1b		1			
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials						
	published or distributed by the foundation in connection with the activities						
C	Did the foundation file Form 1120-POL for this year?	1c		1			
d	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:						
е	(1) On the foundation. ▶ \$ 0 (2) On foundation managers. ▶ \$ 0 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		1			
	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			١.			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .	3		1			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a 4b		√			
b	If "Yes," has it filed a tax return on Form 990-T for this year?	5		1			
5	If "Yes," attach the statement required by General Instruction T.	<u> </u>		,			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	İ					
•	By language in the governing instrument, or	ĺ	1	ļ			
	• 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	<u>/</u>	ļ			
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	✓	ļ			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶						
	Michigan If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			1			
р	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	1				
^	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	100	+	 			
9	4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes,"		ŀ				
	complete Part XIV	9		1			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		1				
	names and addresses	10	<u> </u>	✓			
		OC	IO_OC	(2011			

 $\alpha \alpha \alpha$	nr.	(2011	١.

Page 5

Part	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		1
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	1	
	Website address ▶ www.silverdollarfoundation.com			
14		B-302	3436	
	Located at ► 2020 Juniper Hill Rd., Aspen, CO ZIP+4 ►	8161		
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 \Delta 15	•	•	▶ 🛘
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		✓
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country ▶			ļ
				L
Pan	VII-B Statements Regarding Activities for Which Form 4720 May Be Required		V	T Na
4	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?			•
	 (1) Engage in the sale or exchange, or leasing of property with a disqualified person?			,
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes			ļ
	(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)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	_	
	Organizations relying on a current notice regarding disaster assistance check here ▶□			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2011?	- 1c		/
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 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
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 statement—see instructions.)	2b	-	 -
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?	1		1
b	If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2011.)	24	-	
40	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	3b		1
4a b	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4a 4b		-/

"NONE." (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances	Form 99	0-PF (2011)					_			Page 0	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	Part	VII-B Statements Regarding Activities	s for W	hich Form	4720 I	May Be R	equire	d (continued)			
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? Yes No (4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions) Yes No (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes No (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes No (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes No (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes No (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty or indirections exception from the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance check here Poly No (1) Provide a grant to an individual for the grant? Yes No (1) Provide a grant to an individual for the grant? Yes No (1) Provide a grant to an individual for the grant? Yes No (1) Provide a grant to an individual for the grant? Yes No (1) Provide a grant to an individual for the grant? Yes No (1) Provide a grant to an individual for the grant and purposes and benefit contract? Yes No (1) Provide a grant to an individual for the grant and grant an	5a	During the year did the foundation pay or incur a	iny amo	ount to							
directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes?											
(3) Provide a grant to an individual for travel, study, or other similar purposes?											
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)											
section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)		(3) Provide a grant to an individual for travel, study, or other similar purposes?									
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d). Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? The literature of the foundation for the foundation managers and their compensation (see instructions). Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title, and average foundation more attributable to the transaction of the allowances and deferred compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE." Director, 1 O D		(4) Provide a grant to an organization other than a charitable, etc., organization described in									
purposes, or for the prevention of cruelty to children or animals?											
Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d). Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? The still officers, directors, trustees, foundation managers and their compensation (see instructions). Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (their allowances) (e) Expense account, other allowances (b) Title, and average hours per week devoted to position of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE." (e) Expense account, other allowances of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position of employee benefit plans and deferred compensation of the highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."											
Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d). Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? The still officers, directors, trustees, foundation managers and their compensation (see instructions). Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (their allowances) (e) Expense account, other allowances (b) Title, and average hours per week devoted to position of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE." (e) Expense account, other allowances of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position of employee benefit plans and deferred compensation of the highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."	b	If any answer is "Yes" to 5a(1)-(5), did any of the	e transa	ctions fail to	qualify	under the	excepti	ons described in			
If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? Yes No If "Yes," attach the statement required by Regulations section 53.4945–5(d). Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? To Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title, and average hours per week devoted to position (If not paid, enter double paid) (If the paid) (5b		
because it maintained expenditure responsibility for the grant?		Organizations relying on a current notice regardi	ng disa	ster assistan	ce ched	ck here .		▶□			
If "Yes," attach the statement required by Regulations section 53.4945–5(d). Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title, and average devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (find paid, enter employee benefit plans and deferred compensation) (a) Compensation (b) Title, and average hours per week devoted to position (b) Title, and average hours per week devoted to position (c) Contributions to employee benefit plans and deferred compensation of the railowances (d) Contributions to employee benefit plans and deferred compensation of the railowances (e) Expense account, other allowances (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation of the railowances (e) Compensation (d) Contributions to employee benefit plans and deferred compensation of the railowances (e) Compensation (d) Contributions to employee benefit plans and deferred compensation of the railowances (e) Compensation (d) Contributions to employee benefit plans and deferred compensation of the railowances (e) Compensation (e) Compensation (e) Expense account, other allowances	С	If the answer is "Yes" to question 5a(4), does t	he four	ndation claim	exemp	otion from	the tax		i		
Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (fir not paid, enter ployee benefit plans and deferred compensation of their allowances) (a) Expense account, other allowances) (b) Title, and average hours per week devoted to position of their allowances) (c) Compensation (see instructions). (d) Contributions to employee benefit plans and deferred compensation of their allowances) (e) Expense account, other allowances) (b) Title, and average hours per week devoted on position of their plans and deferred compensation other allowances) (c) Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."		because it maintained expenditure responsibility	for the	grant?				☐ Yes 🗸 No			
Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (find paid, enter devoted to position of the instructions). (a) Name and address (b) Title, and average hours per week devoted to position of the instructions). (c) Expense account, other allowances (d) Contributions to employee benefit plans and deferred compensation of the instructions. (e) Expense account, other allowances (b) Title, and average hours per week devoted to position of the highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."		If "Yes," attach the statement required by Regula	ations s	ection 53.494	45–5(d).						
Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? If "Yes," did the foundation receive any net income attributable to the transaction? If "Yes," did the foundation for the foundation for the removes and contractions of the foundation for the removed and deferred compensation of the removed compensation of the removed and deferred compensation of the removed compensation of the removed and deferred compensation of the removed	6a	· · · · · · · · · · · · · · · · · · ·					miums	;			
At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (finot paid, enter employee benefit plans and deferred compensation of their allowances) Rottenberg Lipsitz Director, 1 Direc		on a personal benefit contract?						☐ Yes ✓ No			
At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (finot paid, enter employee benefit plans and deferred compensation of their allowances) Rottenberg Lipsitz Director, 1 Direc	b	Did the foundation, during the year, pay premiun	ns, dire	ctly or indired	ctly, on	a personal	benefi	t contract?	6b	1	
If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? . 7b Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title, and average hours per week devoted to position (l) Tot paid, enter employee benefit plans and deferred compensation of the rallowances Rottenberg Lipsitz Director, 1	- · · · · · · · · · · · · · · · · · · ·		•	•	•						
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee pend from the paid, enter of the properties of t	7a	At any time during the tax year, was the foundation	a party t	to a prohibited	tax she	elter transac	tion?	☐ Yes 🗹 No			
And Contractors List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (If not paid, enter and deferred compensation) (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances (frot paid, enter and position) (frot paid, enter and position) (g) Expense account, other allowances (frot paid, enter and position) (g) Expense account, other allowances (frot paid, enter and position) (g) Expense account, other allowances (g) Compensation (g) Contributions to employee benefit plans and deferred compensation (g) Contributions to employee benefit plans and deferred compensation (g) Contributions to employee benefit plans and deferred compensation (g) Contributions to employee benefit plans and deferred compensation (g) Contributions to employee benefit plans and deferred compensation (g) Contributions to employee benefit plans and deferred compensation (g) Contributions to employee benefit plans and deferred compensation (g) Contributions to employee benefit plans and deferred compensation (g) Co	b	If "Yes," did the foundation receive any proceed	s or hav	e any net inc	come at	ttributable 1	o the t	ransaction? .	7b		
List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title, and average hours per week devoted to position (f) Tot paid, enter employee benefit plans and deferred compensation (g) Compensation (h) Contributions to employee benefit plans and deferred compensation (h) Expense account, other allowances (h) Expense account other allowances (h) Expense account other	Part	VIII Information About Officers, Direct	tors, T	rustees, F	ounda	tion Mana	agers,	Highly Paid E	mploye	es,	
(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 (e) Expense account, other allowances (e) Expense account, other allowances (find paid, enter -0-) (e) Expense account, other allowances -0 (find paid, enter -0-) (find paid, enter -0-) (e) Expense account, other allowances -0 (find paid, enter -0-) (find paid, enter		and Contractors									
(a) Name and address hours per week devoted to position deferred compensation (a) Name and address hours per week devoted to position devoted to position (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances (e) Expense account, other allowances (e) Expense account, other allowances (finot paid, enter employee benefit plans and deferred compensation (e) Expense account, other allowances (for to paid, enter employee benefit plans and deferred compensation (e) Expense account, other allowances (finot paid, enter employee benefit plans and deferred compensation (for to paid, enter employee benefit plans and deferred compensation (for to paid, enter employee benefit plans and deferred compensation (for allowances (for to paid, enter employee benefit plans and deferred compensation (for allowances (for al	1	List all officers, directors, trustees, foundation	n mana	agers and th			(see i	nstructions).			
t W. Lipsitz Director, 1 Dire		(a) Name and address	hou	rs per week	(c) Cor (If not	paid, enter	emple	oyee benefit plans			
t W. Lipsitz Director, 1 Dire	Joan F	Rottenberg Lipsitz	Directo	or, 1		0		أم		n	
M. Lipsitz M. Lipsitz Director, 1 Directo	PO Bo	x 3250, Basait, CO 81621				U					
M. Lipsitz M. Lipsitz Director, 1 Directo	Rober	t W. Lipsitz	Directo	or, 1		0		ام		0	
Puniper Hill Rd., Aspen, CO 81611 el H. Lipsitz Mark's Place Apt. 3A, New York, NY 10003 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation other allowances	PO Bo	x 3250, Basalt, CO 81621									
luniper Hill Rd., Aspen, CO 81611 el H. Lipsitz Mark's Place Apt. 3A, New York, NY 10003 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances	Brian	M. Lipsitz	Directo	or, 1		0		ام		n	
Mark's Place Apt. 3A, New York, NY 10003 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances	2020 J	uniper Hill Rd., Aspen, CO 81611									
Mark's Place Apt. 3A, New York, NY 10003 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation other allowances	Micha	el H. Lipsitz	Directo	or, 1		٥		٥		n	
"NONE." (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances	10 St.	• • •									
(a) Name and address of each employee paid more than \$50,000 (b) Inte, and average hours per week devoted to position (c) Compensation employee benefit plans and deferred compensation other allowances	2		es (oth	er than thos	se inclu	uded on li	ne 1—	see instructions	s). If no	ne, ente	
	-	a) Name and address of each employee paid more than \$50,00	00	hours per v	veek	(c) Comper	sation	employee benefit plans and deferred			
	NONE	· · · · · · · · · · · · · · · · · · ·									
									-		
				_							

Total number of other employees paid over \$50,000 .

Par	t VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Em	ployees,
	and Contractors (continued)	
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON	
NON	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON		
		· · · · · · · · · · · · · · · · · · ·

		_
Tota	I number of others receiving over \$50,000 for professional services	0
Pai	t IX-A Summary of Direct Charitable Activities	
Lis	st the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ganizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	N/A	
2		
_		
3		
		1
4		
7		
Pa	t IX-B Summary of Program-Related Investments (see instructions)	
D	escribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	N/A	
2		
		-
	other program-related investments. See instructions	
3	N/A	
-		
Tota	al. Add lines 1 through 3	0
		Form 990-PF (2011)

Part	X Minimum Investment Return (All domestic foundations must complete this part. Forei	gn found	ations,
	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	46912
b	Average of monthly cash balances	1b_	144970
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	191882
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	191882
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	_ 2878
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	189004
6	Minimum investment return. Enter 5% of line 5	6	9450
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ► ☐ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	9450
2a	Tax on investment income for 2011 from Part VI, line 5 2a 0		
b	Income tax for 2011. (This does not include the tax from Part VI) 2b 0		
С	Add lines 2a and 2b	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	9450
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	9450
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	9450
Part	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	1 1a	11075
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.,		1
	purposes	2	0
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	11075
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	11075
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whether	the foundation
		Г	QQQ_DE (0014)

art	XIII Undistributed Income (see instruction	ons)			
	,	(a)	(b)	(c)	(d)
1	Distributable amount for 2011 from Part XI,	Corpus	Years prior to 2010	2010	2011
	line 7				9450
2	Undistributed income, if any, as of the end of 2011:				
а	Enter amount for 2010 only	•		10563	
b	Total for prior years: 20 ,20 ,20		3278		
3	Excess distributions carryover, if any, to 2011:				1
а	From 2006				1
b	From 2007				
C	From 2008		ł		
d	From 2009				
e	From 2010				
f	Total of lines 3a through e	· o			ſ
4	Qualifying distributions for 2011 from Part XII,				
	line 4. ► \$ 0				
а	Applied to 2010, but not more than line 2a .			. 0	
b	Applied to undistributed income of prior years				
	(Election required – see instructions)		0		
С	Treated as distributions out of corpus (Election				
	required—see instructions)	0			
d	Applied to 2011 distributable amount				1625
е	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2011	0			0
	(If an amount appears in column (d), the same				,
	amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				,
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
b	Prior years' undistributed income Subtract		-1-1-		
-	line 4b from line 2b		o		,
_	Enter the amount of prior years' undistributed				
С	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed		o		
d	Subtract line 6c from line 6b. Taxable				,
-	amount – see instructions		o		
A	Undistributed income for 2010. Subtract line		-		
•	4a from line 2a. Taxable amount—see				
	instructions			o	
f	Undistributed income for 2011. Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2012				9338
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions) .	o			
8	Excess distributions carryover from 2006 not				
	applied on line 5 or line 7 (see instructions).	0			
9	Excess distributions carryover to 2012.				
	Subtract lines 7 and 8 from line 6a	o			
10	Analysis of line 9:				
а	Excess from 2007				
b	Excess from 2008				
C	Excess from 2009				
d	Excess from 2010				
e	Excess from 2011				

Part :	XIV Private Operating Founda	tions (see instru	ctions and Part \	VII-A, question 9)		
1a	If the foundation has received a ruling	•		orivate operating			
	foundation, and the ruling is effective fo	•	•				
b	Check box to indicate whether the four	ndation is a private	operating foundati		ction	3) or 4942(j)(5)	
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total	
	investment return from Part X for	(a) 2011	(b) 2010	(c) 2009	(d) 2008		
	each year listed	1550	21	18	131	1720	
	85% of line 2a .	1318	18	15	117	1468	
С	Qualifying distributions from Part XII, line 4 for each year listed .	11000	10000	1600	1700	24300	
d	Amounts included in line 2c not used directly for active conduct of exempt activities	0	0	0	0	0	
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	11000	10000	1600	1700	24300	
3	Complete 3a, b, or c for the alternative test relied upon:						
а	"Assets" alternative test—enter:						
	(1) Value of all assets	199817	212797	222851	31431	666896	
_	(2) Value of assets qualifying under section 4942(j)(3)(B)(i) "Endowment" alternative test—enter ² / ₃	6237	6972	2210	1059	16478	
b	of minimum investment return shown in Part X, line 6 for each year listed	0	0	0	0	0	
С	"Support" alternative test—enter (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)	o	0	0	0	0	
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)	0	0	0	0	0	
	(3) Largest amount of support from an exempt organization	o	0	o	0	0	
		0	0	0	0		
Part	(4) Gross investment income XV Supplementary Information	_			_	•	
· uit	any time during the year-			ic roundation n	αα φο,σοσ σι πι ι), C III 033013 U	
1	Information Regarding Foundation		,				
a	List any managers of the foundation of before the close of any tax year (but of	who have contribu				by the foundation	
NONE	, ,			, ,			
b	List any managers of the foundation			· ·		rge portion of the	
	ownership of a partnership or other el	ntity) of which the	toundation has a 1	0% or greater into	erest.		
NONE							
2	Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here ► ☑ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.						
а	The name, address, and telephone nu	ımber of the perso	n to whom applica	ations should be a	ddressed [.]		
b	The form in which applications should	be submitted and	d information and r	materials they sho	uld include.		
С	Any submission deadlines:						
d	Any restrictions or limitations on av factors	vards, such as by	y geographical ar	eas, charitable fie	elds, kinds of ins	titutions, or other	

Part XV Supplementary Information (cont 3 Grants and Contributions Paid During t	inued)	ed for Eur	ture Payment	
			luie Fayinent	
Recipient	If recipient is an individual, show any relationship to any foundation manager	1 0101000.	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	00//01/04/01/	
a Paid during the year				
Camp Casey	NONE	Public	Sent sick children with	11000
333 West Seventh St., Suite 230			cancer to camp.	
Royal Oak, MI 48067				
Tax Exemption # 43-2058251				
Total			▶ 3;	11000
b Approved for future payment Camp Casey				10000
				10000
Takal				40000
Total			🕨 3	10000

Pa	rt XVI	-A Analysis of Income-Producing Ac	tivities				
		s amounts unless otherwise indicated		isiness income	Excluded by sect	ion 512, 513, or 514	(e)
	D		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1	. •	ram service revenue:		 -			
	a h						
	~ -				_		
	ď –						
	- e						
	f -				·		
	q F	ees and contracts from government agencies					-
2	_	bership dues and assessments					
3		est on savings and temporary cash investments					
4		lends and interest from securities			14	1550	
5		rental income or (loss) from real estate:					
		Debt-financed property					
		lot debt-financed property			_		
6	Net r	rental income or (loss) from personal property					
7	Othe	r investment income					
8	Gain	or (loss) from sales of assets other than inventory					
9	Net i	ncome or (loss) from special events					
10	Gros	s profit or (loss) from sales of inventory					<u> </u>
11	Othe	r revenue: a					
	b _						
	c _						<u> </u>
	d _						
	e _				ļ	4550	
12		otal. Add columns (b), (d), and (e)			l	1550	l
		II. Add line 12, columns (b), (d), and (e)				. 13	1550
See	work	sheet in line 13 instructions to verify calculation	ıs.)		t Pumoses	. 13	1550
Sec Pa		sheet in line 13 instructions to verify calculation	ns.) Iccomplish m	ent of Exemp			
Sec Pa	work rt XV e No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) Iccomplish m	ent of Exemp			
Sec Pa	work rt XV e No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the A	ns.) Iccomplish m	ent of Exemp			
Sec Pa	work rt XV e No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) Iccomplish m	ent of Exemp			
Sec Pa	work rt XV e No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) Iccomplish m	ent of Exemp			
Sec Pa	work rt XV e No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) Iccomplish m	ent of Exemp			
Sec Pa	work rt XV e No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) Iccomplish m	ent of Exemp			
Sec Pa	work rt XV e No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) Iccomplish m	ent of Exemp			
Sec Pa	work rt XV e No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) Iccomplish m	ent of Exemp			
Sec Pa	work rt XV e No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) Iccomplish m	ent of Exemp			
Sec Pa	work rt XV e No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) Iccomplish m	ent of Exemp			
Sec Pa	work rt XV e No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) Iccomplish m	ent of Exemp			
Sec Pa	work rt XV e No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) Iccomplish m	ent of Exemp			
Sec Pa	work rt XV e No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) Iccomplish m	ent of Exemp			
Sec Pa	work rt XV e No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) Iccomplish m	ent of Exemp			
Sec Pa	work rt XV e No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) Iccomplish m	ent of Exemp			
Sec Pa	work rt XV e No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) Iccomplish m	ent of Exemp			
Sec Pa	work rt XV e No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) Iccomplish m	ent of Exemp			
Sec Pa	work rt XV e No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) Iccomplish m	ent of Exemp			
Sec Pa	work rt XV e No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) Iccomplish m	ent of Exemp			
Sec Pa	work rt XV e No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) Iccomplish m	ent of Exemp			
Sec Pa	work rt XV e No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) Iccomplish m	ent of Exemp			
Sec Pa	work rt XV e No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) Iccomplish m	ent of Exemp			

Part	XVII			sfers To and Trai	nsactions and	d Relationshi	ps With N	oncharita	ble			
	D: 14		ganizations		. n	- 11		 	Yes	No		
1		Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political							Yes	NO		
	organizations?									,		
а	-											
•	Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash								[1)	1		
	• •	ner assets .						. 1a		1		
ь	• •	transactions:							-,	 •		
~		··	a noncharitable exe	empt organization				1b	41)	1		
				. •				1b		 		
	(2) Purchases of assets from a noncharitable exempt organization						1b		 `			
								. 1b		1		
			=					. 1b(
		_		nip or fundraising sol				1b(1		
c				sts, other assets, or				<u>10</u>		1		
				s," complete the foll					` 	narket		
-				ces given by the rep								
				ement, show in colu								
(a) Line	no (b)) Amount involved	(c) Name of nonci	nantable exempt organizat	ion (d) De	escription of transfe	rs, transactions	s, and sharing	arrangem	ents		
N/A			· · · · · · · · · · · · · · · · · · ·									
				·								
		-			-							

	1			<u> </u>					<u>-</u>			
												
									_			
								•••	_			
									_			
2a	Is the	foundation dire	ectly or indirectly af	filiated with, or relat	ed to, one or r	nore tax-exem	pt organizat	ions				
	descri	bed in section 5	501(c) of the Code (d	other than section 50	11(c)(3)) or in se	ction 527?		. 🗆 Y	es 🗹	No		
b	If "Yes	s," complete the	e following schedule									
		(a) Name of organization		(b) Type of organization			(c) Description of relationship					
				_								
	•											
				· · ·								
			1									
<u> </u>				ed this return, including acco				ny knowledge a	nd belief,	ıt ıs true,		
Sign	l k	I, and complete Deci	d complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any kr			preparer has any kno	May the IRS discuss this return					
Here	!	foull -		5/1/12 President			with the preparer shown to see instructions)? TYes					
	Signat	ture of officer or true	€(ee \	Date	Title		L					
Paid		Print/Type preparer	r's name	Preparer's signature		Date	Check	☐ if PTIN	· <u></u>			
Prepa	arer							nployed				
Use (Firm's EIN ▶				
	Firm's address ▶ Phone no											