

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



Form **990-PF** Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0052

For calendar year 2011 or tax year beginning and ending Name of foundation A Employer identification number 26-3903831 JOANNIDES FAMILY FOUNDATION Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 10013 WAYNE ROAD 307-634-1511 City or town, state, and ZIP code C If exemption application is pending, check here CHEYENNE, WY 82009 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change Check type of organization: Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method: X Cash Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col (c), line 16) under section 507(b)(1)(B), check here 11,920. (Part I, column (d) must be on cash basis) ▶\$ Part | Analysis of Revenue and Expenses (d) Disbursements (c) Adjusted net (a) Revenue and (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) expenses per books ıncome ıncome 122,000. N/A Contributions, gifts, grants, etc., received if the foundation is not required to attach Sch. B. Check Interest on savings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 0 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income Total. Add lines 1 through 11 122.000 0 0. 0. 0. Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits Administrative Expenses 108 16a Legal fees STMT 1 0. 0. **b** Accounting fees ळ c Other professional fees ZUIZ FFR 0 6 17 Interest က 18 Taxes 19 Depreciation and depletion OGDEN UT 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications STMT 2 4,562 0 0. 23 Other expenses 24 Total operating and administrative 4.670 0 expenses. Add lines 13 through 23 0. 113.149 113 149. Contributions, gifts, grants paid 26 Total expenses and disbursements 117,819 0 113,149. Add lines 24 and 25 27 Subtract line 26 from line 12: 4,181 3 Excess of revenue over expenses and disbursements 0 b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-) Form 990-PF (2011) LHA For Paperwork Reduction Act Notice, see instructions.

2

' <u>For</u>	m 99	0-PF(2011) . JOANNIDES FAMILY FOUNDAT			
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
_			(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing	3,311.	7,492.	7,492.
		Savings and temporary cash investments			
	3	Accounts receivable 4,428.	4 400	4 400	4 400
	١.	Less: allowance for doubtful accounts	4,428.	4,428.	4,428.
	4	Pledges receivable			
	_	Less: allowance for doubtful accounts			
	5	Grants receivable			
	Ь	Receivables due from officers, directors, trustees, and other			
	١,	disqualified persons Other notes and loans receivable			
	7	Less: allowance for doubtful accounts			
m	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	_	Investments - U.S and state government obligations			
	1	Investments - corporate stock			
	1 -	Investments - corporate bonds			
	1 1	Investments - land, buildings, and equipment basis		-	
	``	Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation			
	15	Other assets (describe ►)			
_	16	Total assets (to be completed by all filers)	<u>7,739.</u>	11,920.	11,920.
	17	· · · · · · · · · · · · · · · · · · ·			
	18	Grants payable			
ies	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Lia	21	Mortgages and other notes payable Other liabilities (describe ▶			
	22	Other Habilities (describe			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31			
Fund Balances	24	Unrestricted	7,739.	11,920.	
lan	25	Temporarily restricted			
- Ba	26	Permanently restricted			
ū		Foundations that do not follow SFAS 117, check here			
		and complete lines 27 through 31.			
ts c	27	Capital stock, trust principal, or current funds			
SSE	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
Net Assets or	29	Retained earnings, accumulated income, endowment, or other funds	7 720	11 020	
ž	30	Total net assets or fund balances	7,739.	11,920.	
	31	Total liabilities and net assets/fund balances	7,739.	11,920.	
Ξ				11,5200	
L	art	Allalysis of Changes in Net Assets of Fund Ba	ilalices		
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
	(must agree with end-of-year figure reported on prior year's return)				7,739.
2		er amount from Part I, line 27a		2	4,181.
3		er increases not included in line 2 (itemize)		3	11 020
4		Innes 1, 2, and 3 reases not included in line 2 (itemize)		4	11,920.
5 6		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (h) line 30	5	0. 11,920.
<u>u</u>	1016	a not account or raine commission at one or your time 4 minus and of 1 f art 11, 00	ann (b), mic oo		Form 990-PF (2011)

See the Part VI instructions.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

	1990-PF (2011) , JOANNIDES FAMILY FOUNDATION		3903			Page 4
	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	1940	- see i	nstrt	CUO	15)
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)	1.				^
D	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	1				0.
	of Part I, line 27b					
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					^
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				<u> </u>
-	Add lines 1 and 2	3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				<u>0.</u>
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	5				0.
	Credits/Payments: 2011 estimated tax payments and 2010 overpayment credited to 2011 6a					
		-				
	Exempt foreign organizations - tax withheld at source Tax paid with application for extension of time to file (Form 8868) 6c					
	Backup withholding erroneously withheld 6d					
	Total credits and payments. Add lines 6a through 6d	٠,	•			0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				<u> </u>
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				0.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				<u> </u>
	Enter the amount of line 10 to be: Credited to 2012 estimated tax	11				
	art VII-A Statements Regarding Activities	<u>, , , , , , , , , , , , , , , , , , , </u>	l			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interver	e in		I	Yes	No
	any political campaign?	·		1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			1b		X
_	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	ned or				
	distributed by the foundation in connection with the activities					
c	c Did the foundation file Form 1120-POL for this year?					x
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				1c		
(1) On the foundation ► \$ \$ 0 . (2) On foundation managers. ► \$ 0 .						
6	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	_				
	managers. ▶ \$ 0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		x
	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
48	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
t	olf "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state of the state	te law				
_	remain in the governing instrument?			6	X	
1	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) NONE						
h If the answer is "Ves" to line 7, has the foundation furnished a conv of Form 000-DE to the Attorney Congret (or decignate)						
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					x	
of each state as required by General Instruction G? If "No," attach explanation 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar					^	
year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV						x
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses				10	<u> </u>	X
	2.5 cm, persons basedunian contribution during the aix year. It res, attach a scredule listing their names and addresses			10	I	_ <u></u>

Form **990-PF** (2011)

	990-PF (2011) , JOANNIDES FAMILY FOUNDATION 26-	3903831		Page 5
Pa	rt 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 make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privilege	es?		
	If "Yes," attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	х	
	Website address ► N/A			
14	The books are in care of ► TIMOTHY J. JOANNIDES Telephone no. ► 30	7-634-1	511	
•	· · · · · · · · · · · · · · · · · · ·	82009	<u> </u>	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	02003	_	$\overline{\Box}$
	and enter the amount of tax-exempt interest received or accrued during the year	l N	/A	
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,	T.	Yes	No
10	securities, or other financial account in a foreign country?	46	163	
		16		_X_
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If "Yes," enter the name of the foreign			
Pa	country Int 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?	7 No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	_ "0"		
	a disqualified person?	7 No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	7 NO		
	· · · · · · · · · · · · · · · · · · ·	J N.		
		טוס		
	(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	a		
	termination of government service, if terminating within 90 days.)	_ 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			
		i/ <u>A</u> <u>1b</u>		
	Organizations relying on a current notice regarding disaster assistance check here	· [
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 2011?	1c		<u>X</u>
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? Yes X	J 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			
	statement - see instructions.)	/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.			
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	.		
	during the year?	□No		
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,			
		I/A 3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	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 jeonardy before the first day of the tax year beginning in 2011?	₄h		x

123541 12-02-11 Form **990-PF** (2011)

Form 990-PF (2011) JOANNIDES FAMILY FOUNDAT			26-39038	31 Page 6
Part VII-B Statements Regarding Activities for Which F	form 4/20 May Be I	Requirea (contin	ued)	
5a During the year did the foundation pay or incur any amount to:	10151 110	<u></u>	[
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	* **		s X No	
(2) Influence the outcome of any specific public election (see section 4955); o any voter registration drive?	r to carry on, directly or indire		s X No	
,	2		s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes'		16	S LAL NO	
(4) Provide a grant to an organization other than a charitable, etc., organization	i described in Section		s X No	
509(a)(1), (2), or (3), or section 4940(d)(2)?			s La No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or i		[1 2],,	
the prevention of cruelty to children or animals?			es 🗶 No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	•	in Regulations	37 / 3	-
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr				
expenditure responsibility for the grant?		I/A L Ye	es L No	
If "Yes," attach the statement required by Regulations section 53 4945	• •			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		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		Ye	es 🗶 No 📙	
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b
Part VIII Information About Officers, Directors, Trustopher Paid Employees, and Contractors		nagers, Highly	y	
1 List all officers, directors, trustees, foundation managers and their		T	(4)	
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	(If not paid, enter -0-)	compensation	allowances
SEE STATEMENT 3		0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc	<u> </u>	enter "NONE."	(d) Contributions to	1
(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	(e) Expense account, other
	devoted to position	(0, 00	compensation	allowances
NONE				
		ļ		
Total number of other employees paid over \$50,000			>	0
			Form	990-PF (2011)

Form 990-PF (2011) , JOANNIDES FAMILY FOUNDATION		3903831 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, High Paid Employees, and Contractors (continued)	ıly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		-
(a) Name and address of each person paid more than \$50,000 (b) Type of se	rvice	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		<u>▶</u> 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
ı N/A		
2		
3		
		
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		
2		
		· · · · · · · · · · · · · · · · · · ·
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	•	0.
Total / No miles 1 tillough o		Form 990-PF (2011)

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:		
a	Average monthly fair market value of securities	1a	0.
	Average of monthly cash balances	1b	0. 3,517.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	3,517.
	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	3,517.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	53.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,464.
6	Minimum investment return Enter 5% of line 5	6	173.
P	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	173.
2a	Tax on investment income for 2011 from Part VI, line 5		
b	Income tax for 2011. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	173.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	173.
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	173.
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	113,149.
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:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	-
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	113,149.
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	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	113,149.
	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	e section

Form **990-PF** (2011)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI,	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1 0 a. 10 p. 10 a. 10 a. 10		
line 7				173.
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only			0.	
b Total for prior years:		_		
		0.		
3 Excess distributions carryover, if any, to 2011:				
a From 2006				
b From 2007				
c From 2008				
dFrom 2009 84,651.				
e From 2010 80,497.	165 140			
f Total of lines 3a through e	165,148.			
4 Qualifying distributions for 2011 from				
Part XII, line 4: > \$ 113,149.			0.	
a Applied to 2010, but not more than line 2a			0.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions) c Treated as distributions out of corpus		U•		
(Election required - see instructions)	0.			
d Applied to 2011 distributable amount	0.			173.
e Remaining amount distributed out of corpus	112,976.			1/3•
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))				V.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	278,124.			
b Prior years' undistributed income. Subtract			:	
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2010. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2011. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2012				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 2006		•		
not applied on line 5 or line 7	0.			<u> </u>
9 Excess distributions carryover to 2012.	270 124		•	
Subtract lines 7 and 8 from line 6a	278,124.			
10 Analysis of line 9: a Excess from 2007				
b Excess from 2008				
c Excess from 200984,651.				
d Excess from 2010 80, 497.				
e Excess from 2011 112, 976.				
CENOCOSTIONIZOTT ELECTOR			l.,	5 000 DE (0044)

	ES FAMILY F				03831 Page 10
Part XIV Private Operating F			I-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective fo	•	=	▶ <u></u>		
b Check box to indicate whether the found		ng foundation described		4942(j)(3) or49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(1) 0040	Prior 3 years	1 10000	ļ ,, _ , ,
income from Part I or the minimum	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not				1	
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.	}				
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year					
listed					
c "Support" alternative test - enter:					
(1) Total support other than gross 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	L	<u> </u>		<u> </u>	
Part XV Supplementary Info	rmation (Comple	ete this part only	if the foundation	n had \$5,000 or m	ore in assets
at any time during t		ructions.)			
1 Information Regarding Foundation					
a List any managers of the foundation wh year (but only if they have contributed in			tributions received by th	e foundation before the clo	se of any tax
TIMOTHY J. JOANNIDES)				
b List any managers of the foundation who other entity) of which the foundation ha			(or an equally large port	tion of the ownership of a p	artnership or
NONE	g. oator mioro				
2 Information Regarding Contribut	ion Grant Cift Loon	Sabalarahin ata D		-	
Check here ► X if the foundation of	only makes contributions	to preselected charitable	organizations and does		
the foundation makes gifts, grants, etc.	·			complete items 2a, b, c, and	d d.
a The name, address, and telephone num	ber of the person to who	m applications should be	e addressed:		
b The form in which applications should l	ne submitted and informa	tion and materials they s	porly include.		
			modia molado.		
c Any submission deadlines:					
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields	, kınds of ınstitutions, or	other factors:	

3 Grants and Contributions Paid During the		Payment		
Recipient	If recipient is an individual,		Burnoco of grant or	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year		·		
SEE LIST ATTACHED				
				113,149.
			:	
Total			▶ 3a	113,149.
b Approved for future payment				
NONE				
NONE				
Tabel	<u> </u>	<u> </u>	<u> </u>	
Total		·	<u>▶ 3b</u>	0.

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.		a business income		ided by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income
a					
b	_		ļ		
C	_				
d					
e					
f	_				
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities					-
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property		<u></u>			
6 Net rental income or (loss) from personal			<u> </u>		
property 7 Other investment income					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory				<u> </u>	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a	_		ļ		
b	_		1		
c	_		ļ		
d	_				
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		0.	
13 Total. Add line 12, columns (b), (d), and (e)				13	0.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Acc	omplishment of Ex	emp	t Purposes	
Line No. Explain below how each activity for which in			contri	buted importantly to the accor	nplishment of
the foundation's exempt purposes (other that	in by providing tu	inds for such purposes).			
				_	
				·	
					
					
					
		·			
				-	
123621					Form 990-PF (2011)

Part :	XVII Information Re Exempt Organ		nsfers To a	and Transactions	and Relations	hips With Noncha	aritable	•	
1 Did			v of the followin	o with any other organizati	on described in sect	ion 501(c) of	$\overline{}$	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 organizations?									
a Transfers from the reporting foundation to a noncharitable exempt organization of:									
	Cash			,			1a(1)		X
	Other assets						1a(2)		X
	er transactions:						1=1=7		
(1)	Sales of assets to a noncharita	ble exempt organiz	ation				1b(1)		X
	Purchases of assets from a no						1b(2)		X
	Rental of facilities, equipment,	· ·	3				1b(3)		X
	Reimbursement arrangements						1b(4)		X
	Loans or loan guarantees						1b(5)		X
	Performance of services or me	embership or fundra	aising solicitatio	ns			1b(6)		X
	aring of facilities, equipment, ma						1c		X
	ne answer to any of the above is				wavs show the fair r	narket value of the goods.	1	ets.	
or :	services given by the reporting f	oundation. If the fo	undation receive					,	
(a) Line n	umn (d) the value of the goods, (b) Amount involved			exempt organization	(d) Description	of transfers, transactions, and	1 sharing ar	rangeme	nts
,		(-7	N/A		(2) 2000 (2.00	or transcript, and according, and	- ona mg a	- ungomo	-
						•••			
		-							
			·						
				· · · · · · · · · · · · · · · · · · ·					
		-				-			
2a is i	he foundation directly or indirec	tly affiliated with o	r related to one	or more tay-evennt organ	izations described				
	section 501(c) of the Code (othe				izations described	Г	Yes	Γv	No
	yes," complete the following sch	•	0)(0)) 01 111 3001	1011 327		L	169	لـــــــــــــــــــــــــــــــــــــ	טווו נ
יו ע	(a) Name of org			(b) Type of organization		(c) Description of relation	shin		
	N/A	<u>,</u>	•	(2) 1) po o o o gamzanon		(e) Dooding and Ot Toldaton			
	11/21								
	****			-					
	-	-	<u></u>						
	Under penalties of perjury, I declare	that I have examined t	his return, includin	l g accompanying schedules and	statements, and to the	best of my knowledge			
Sign	and belief, it is true, correct, and cor					has any knowledge re	ay the IRS of turn with th	e prepare	er
Here		>		4 7-1-12	heorba	1_ st	X Yes		ח
	Signature of officer or trustee			Date 2-1-12	Title		A Tes] No
	Print/Type preparer's na		Preparer's si		Date	Check If PTIN			
	, po p. op o m	*				self- employed			
Paid	KENNETH G.	חוופשפ	120	TATLA	41/12	on on proyou			
Prepa			NE C DY	IZ, LLP	141/10	Eirm's EIN			
Use		EE, REAR	nn a PA	TO, DUE A		Firm's EIN ►			
	Firm's address ▶ P.	O BOY	1088						
	I		WY 8200	3		Dhone no 207	624	21 5	1
	Сп	.ii i dinne,	MI 0700	<u></u>		Phone no. 307 –	<u>634-</u>	<u>415</u>	Τ

Form **990-PF** (2011)

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

JO	ANNIDES FAMILY FOUNDATION	26-3903831					
Organization type (check or	ne)						
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						
	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rul	a Saa instructions					
General Rule	7), (d), or (10) organization can check boxes for both the deneral nule and a Special nul	e Gee instructions					
X For an organization contributor Comple	i filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in mo	oney or property) from any one					
Special Rules							
509(a)(1) and 170(b	c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the region (1)(A)(vi) and received from any one contributor, during the year, a contribution of the go Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II						
total contributions	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III						
contributions for us If this box is check purpose Do not co	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000 lf this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year						
Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Employer identification number

JOANNIDES FAMILY FOUNDATION

26-3903831

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
1	HALLADAY MOTORS 2100 WESTLAND RD CHEYENNE, WY 82001	\$\$55,000.	Person X Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
2	JOANNIDES FAMILY PROPERTIES 10013 WAYNE ROAD CHEYENNE, WY 82009	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
3	TIM JOANNIDES 10013 WAYNE ROAD CHEYENNE, WY 82009	\$\$	Person X Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
			Person Payroll Noncash (Complete Part II if there is a noncash contribution)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
			Person Payroll Oncash Complete Part II if there is a noncash contribution)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
23452 07-(D8-11	\$Schedule B (Form	Person Payroll Noncash (Complete Part II if there is a noncash contribution.) 990, 990-EZ, or 990-PF) (2011)			
·		16	F			

Employer identification number

JOANNIDES FAMILY FOUNDATION

26-3903831

Part II	Noncash Property (see instructions) Use duplicate copies of P	Part II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-		\$	
(2)			
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Part I			
-			
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-			
-			
-		\$,
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(0)			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
— :			
		\$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Part I		face ilian nemolia)	
		\$	

lame of organi	zation	Employer identification number			
JOANNID	ES FAMILY FOUNDATION		26-3903831		
Part III	exclusively religious, charitable, etc., individu year Complete columns (a) through (e) and the f the total of exclusively religious, charitable, etc., o Use duplicate copies of Part III if additional s	contributions of \$1,000 or less for	(7), (8), or (10) organizations that total more than \$1,000 for the		
(a) No. from Part 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 ZIP + 4		Relationship of transferor to transferee		
-					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(e) Transfer of gif	T		
	Transferee's name, address, and		Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	(e) Transfer of gift				
_	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee		
(a) No.					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee				
_			The second of the second of		

FORM 990-PF	LEGAL FEES		STATEMENT 1		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES	
ACCOUNTING & LEGAL FEES	108.	0.		0.	
TO FM 990-PF, PG 1, LN 16A	108. 0.			0.	
FORM 990-PF	OTHER EXPENSES		STATEMENT 2		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
DELEI ODMENE COCEC	4,562.	0.			
DEVELOPMENT COSTS	4,302.	•		0.	

	LIST OF OFFICERS, D AND FOUNDATION MANA		STATI	EMENT 3
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE
TIMOTHY J. JOANNIDES 10013 WAYNE ROAD CHEYENNE, WY 82009	DIRECTOR 0.00	0.	0.	0.
KATHY A. JOANNIDES 10013 WAYNE ROAD CHEYENNE, WY 82009	DIRECTOR 0.00	0.	0.	0.
CHRISTOPHER J. JOANNIDES 3704 CAREY AVENUE CHEYENNE, WY 82001	DIRECTOR 0.00	0.	0.	0.
ANGELA S. JOANNIDES 5017 CREWS COURT CHEYENNE, WY 82001	DIRECTOR 0.00	0.	0.	0.
NICKOLAS S. JOANNIDES 29576 CROWN CREEK LAGUNA NIGUEL, CA 92677	DIRECTOR 0.00	0.	0.	0.
ANDREW L. JOANNIDES 10013 WAYNE ROAD CHEYENNE, WY 82009	DIRECTOR 0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PA	AGE 6, PART VIII	0.	0.	0.