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Form 990-PF

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

Đep Inte	artme	ent of the Treasury levenue Service	Note. The fo	indation may	Treated as a Private be able to use a copy of this	te Foundation s return to satisfy state reod	ortina requirements	<i>(2011)</i>
			or tax year beginning		5 - 15 - 15 - 15 - 15 - 15 - 15 - 15 -	, and ending		
N;	me d	of foundation					A Employer identification	nadmun u
_ 1	(LC	IBER FO	UNDATION,	INC			27-1117156	5
- No	mber	and streat (or PO to	ox number if mail is not de	Hivered to stree	t address)	Room/suite	B Telephone number	
			INE STREET		_ .	310	859-334-03	
_1	ĿΕλ	town, state, and a					C if exemption application is p	pending, check here
G	Chec	k all that apply	Initial return			ormer public charity	D 1 Foreign organization	s, check here
			Final return X Address ch		Amended return Name change		Foreign organizations m 2. check here and attach or	eeting the 85% test,
H	Chec	k type of organiz			xempt private foundation		E If private foundation sta	
[<u>s</u>	ection 4947(a)(1	nonexempt charitable		Other taxable private found	ation	under section 507(b)(1	
				J Account	•	Accrual	F. If the foundation is in a	60-month termination
	rom ►\$	Part II, col. (c),			ther (specify) umn (d) must be on cash	hans)	under section 507(b)(1)(B), check here
	art	Analysis of Re	venue and Expenses	d (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursoments for charitable purposes
	T	necessarily equa	the amounts in column (a	0)}	expenses per books 3,715,350.	income	N/A	(cash basis only)
	1 2	()	gifts, grants, etc., recei I ine foundation is not required t		3,713,330.		(A) (A) (A) (A) (A) (A) (A) (A) (A) (A)	· · · · · · · · · · · · · · · · · · ·
	3	Interest on saving	s and temporary	Terminoch D	4,937.	4,937.	<u> </u>	STATEMENT 1
	4	_	nterest from securities	, ;		ν· ,		
	5	a Gross rents				VV_		
	1	Net rental income	or (loss)		·		« <u>"инчиния интиниции</u>	, , , , , , , , , , , , , , , , , , ,
<u>a</u>	6	Net gain or (loss) t	from sale of assets not on I	ine 10			10 3 2	
Revenue		assets on line 6a				0.		
a e	8	Net short-term	come (from Part IV, line 2)		· • • • • • • • • • • • • • • • • • • •	-2 *		
	9	Income modific	. •				DECENE	n
	10:	Gmas sales less r				, , ,	KEUEIVE	-10
	1	D Less. Cost of goo	da sold					3
	1	c Gross profit or	(loss)	•			FFB 15 4	13 10
	11		·	-	2 720 207	4,937		Company of the compan
<u>'</u>	12		s 1 through 11 officers, directors, trustees		3,720,287.	0.	OGDEN,	0.
	14	•	omcers, directors, trustees s salaries and wages	etc				
	15		employee benefits					
M Ses	162	a Legal fees	ST	MT 2	2,181.	1,090.		1,091.
爱	<u> </u> t	b Accounting fee	s ST	MT 3	2,175.	1,088.		1,087.
Experience) (c Other professio	nal fees _					-
SCANISA trative Expe	17	Interest	 Cm	MT 4	74.	0.		0.
₩	18 19	Taxes Depreciation an	•	M1 4	74.		 -	
<u>5</u> ,	20	Occupancy	o depietion					<u> </u>
Ą	21		ices, and meetings		405.	0.		405.
and	22	Printing and pu	blications	-				
SCA Operating and Administrative	23	Other expenses	• •	MT 5	218.	0.		218.
rat	24		and administrative		5,053.	2,178.		2 9/1
ŏ	25	expenses. Add Contributions, g	lines 13 through 23		8,030.		1997 (2)	2,801. 8,030.
	l l		and disbursements		0,030.	<u> </u>		37033.
_	_ _	Add lines 24 an			13,083.	2,178.		10,831.
	27	Subtract line 26			N. 7			-
	a	Excess of revenue	over expenses and disbur	sements	3,707,204.	<u> </u>		
	1		income (if negative, ente	•		2,759.		
_	C	Adjusted net in	COM8 (if negative enter-	D-)		<u> </u>	N/A	1

123501 12-02-11 LHA For Paperwork Reduction Act Notice, see instructions

Form 990-PF (2011) 048,003

Fo	<u>m 99</u>	90-PF(2011) KLOIBER FOUNDATION, INC		27-	1117156 Page 2
F	har	Balance Sheets Attached schedules and amounts in the description column should be for each of year amounts only	Beginning of year	End o	
_	T	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	1,456,370.	3,712,439.	
	2	Savings and temporary cash investments		1,451,135.	
	3	Accounts receivable	(A. 1.67) A.C.	o din a libraria	10/2 10/2 10/2
		Less, allowance for doubtful accounts			
	4	Pledges receivable		1 (1 10 1	
		Less allowance for doubtful accounts		·	
	5	Grants receivable .			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
	İ	Less allowance for doubtful accounts			
şţs	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
⋖	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock			
	C	Investments - corporate bonds			
	11	investments - land, buildings, and equipment basis		``	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		Less: accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	L	Land, buildings, and equipment basis	14 14 14 14 14 14 14 14 14 14 14 14 14 1	, , , , , , , , , , , , , , , , , , ,	- /
		Less accumulated depreciation	1		
	15	Other assets (describe			
	ĺ				_
	16	Total assets (to be completed by all filers)	1,456,370.	5,163,574.	5,163,574.
		Accounts payable and accrued expenses			
	18	Grants payable			
S.	19	Deferred revenue			, · .
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			17 m
abi	21	Mortgages and other notes payable			,
ڗ		Other liabilities (describe			
	23	Total Habilities (add lines 17 through 22)	0.	0.	. "
	1	Foundations that follow SFAS 117, check here			
		and complete lines 24 through 25 and lines 30 and 31	}		
nces	24	Unrestricted)		
au		Temporarily restricted			
Net Assets or Fund Bala	26	Permanently restricted			
ğ		Foundations that do not follow SFAS 117, check here			
교		and complete lines 27 through 31			
ò	27	Capital stock, trust principal, or current funds	0.	0.	7,000
ets	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
Ąŝ	29	Retained earnings, accumulated income, endowment, or other funds	1,456,370.	5,163,574.	Burney To
<u>=</u>	30	Total net assets or fund balances	1,456,370.	5,163,574.	
Z	130	,	27207010	<u> </u>	,
	31	Total liabilities and net assets/fund balances	1,456,370.	5,163,574.	
	T			0/200/01.10	
P	art	Analysis of Changes in Net Assets or Fund E	lalances		
1	Intal	net assets or fund balances at beginning of year - Part II, column (a), line	30		
•		r net assets or rund balances at beginning of year - Part 11, colorin (a), line stagree with end-of-year figure reported on prior year's return)	•		1,456,370.
2		r amount from Part I, line 27a		. 2	3,707,204.
		r increases not included in line 2 (itemize)		3	0.
		•			5,163,574.
		lines 1, 2, and 3	•	5	0.
		eases not included in line 2 (itemize)	olumn (h) luna 20	6	5,163,574.
<u>o</u>	rotal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumin (0), lime 30		Form 990-PF (2011)
					rorm 330-PF (2011)

	TREE LOUNDALION					2	7-111	7156	Page 3
Part IV Capital Gains a	and Losses for Tax on	Investment	t Income	Ta					
	ibe the kind(s) of property sold (e rehouse, or common stock, 200 s			P · P	v acquired urchase			(d) Dat (mo , da	
	teriouse, or common stock, 200 S	IIIS WILL CO J		D - D	onation	(1110,0	ay, yi)	(4110 , 04	ay, yt /
b NON	JE								
C	<u> </u>					• •			
d	· · · · · · · · · · · · · · · · · · ·				-				
0									
(a) Gross sales price	(1) Depreciation allowed (or allowable)		st or other basis expense of sale				ain or (loss) (f) minus (
a									
b									
C		_		-					
<u>d</u>									
Complete only for assets showing	nain in column (h) and owned b	withe foundation	00 12/31/69	~) Gaine (C	ol (h) gain i	minue	-
(I) F M V as of 12/31/69	(i) Adjusted basis as of 12/31/69	(k) Ex	cess of col (i)			(k), but r	of (ii) gain not less than (from col (f	1 -0-) or	
a	43 01 12/3 1/03		001. ()), 11 01.1)						
b				~-	. — · · · · · · · · · ·				
C		1			- 11 - 1				
đ									
0									
2 Capital gain net income or (net cap		ter in Part I, line -0- in Part I, line		} 2	!				
3 Net short-term capital gain or (loss	s) as defined in sections 1222(5)	and (6)							
If gain, also enter in Part I, line 8, o		, ,		,					
Part V Qualification Ur	ador Costion 4040(a) to	- Poducod	Tay on Not	Invos	tment inc	ome			
(For optional use by domestic private									
(1 of optional ose by connestic private	Tournations subject to the section	1 7370(8) (82 011	THE THE STATE OF T	, ,					
If section 4940(d)(2) applies, leave the	is part blank								
Was the foundation liable for the secti	on 4942 tax on the distributable a	amount of any ye	ear in the base pe	lod?				Yes	X No
If "Yes," the foundation does not quali									
1 Enter the appropriate amount in e		tructions before	making any entri					(d)	
(a) Base period years	(b) Adjusted qualifying d	listributions	Net value of no	(c) ncharital	ole-use assets		Distrib (col. (b) divi	ution ratio	(c))
Calendar year (or tax year beginnin	y (ii)	60,791.			329,138		(COI. (D) GIV		45737
201 0 2009		0.			35,122				00000
2008									
2007									
2006									
								0.	45737
2 Total of line 1, column (d)			b 4b.a			2			43/3/
3 Average distribution ratio for the 5		n on line 2 by 5,	or by the number	or years		3		.03	22869
the foundation has been in existen	CB II 1622 (IIAN 2 ABAI2					<u> </u>			
4 Enter the net value of nonchantabl	e-use assets for 2011 from Part)	(, line 5 .				4	·	1,526	,860.
5 Multiply line 4 by line 3				••	•	5		34	,918.
5 Enter 1% of net investment income	e (1% of Part I, line 27b)			-		6			28.
7 Add lines 5 and 6				-		7		34	,946.
B Enter qualifying distributions from	Part XII, line 4					8		10	,831.
If line 8 is equal to or greater than See the Part VI instructions	line 7, check the box in Part VI, lin	ne 1b, and comp	lete that part usin	ga1% t	ax rate				

Form	990-PF(2011) KLOIBER FOUNDATION, INC			1117			Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e),	or 49	948	- see i	nstru	ction	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1				100	4	5 %
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)		در پ		· 👸	, è ,	مأد د.
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ightharpoonup and enter 1%		1			····	<u>55.</u>
	of Part I, line 27b					```	` .
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b) $-\mathcal{F}$	1		` .	` '	``	_ `
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	1	2				<u>0.</u>
3	Add lines 1 and 2	1	3				<u>55.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	ļ	_4_				<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-		5	ļ			55.
6	Credits/Payments		> 3				
8	2011 estimated tax payments and 2010 overpayment credited to 2011 6a			4-5	, •		
þ	Exempt foreign organizations - tax withheld at source		` .				,
C	Tax paid with application for extension of time to file (Form 8868)					,	
đ	Backup withholding erroneously withheld 6d			1	•		,
7	Total credits and payments. Add lines 6a through 6d		7				<u>0.</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	}	8	!			
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		9_		-		55.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10				
11	Enter the amount of line 10 to be Credited to 2012 estimated tax ▶ Refunde	d ▶]	11	L			
	rt VII-A Statements Regarding Activities				· · · · ·	V	NI-
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or into	arvene	ın			Yes	No X
	any political campaign?				1a		X
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definiti				16		
	If the answer is "Yes" to 1aor 1b, attach a detailed description of the activities and copies of any materials pu	blishe	d or				
	distributed by the foundation in connection with the activities.						v
	Did the foundation flie Form 1120-PQL for this year?				10		X
đ	Enter the amount (If any) of tax on political expenditures (section 4955) imposed during the year	^			1		
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$	0.				,	`
8	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	l			1.	-	,
	managers ▶ \$O.				١.	1	x
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		
	If "Yes," attach a detailed description of the activities		_		ļ		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorpora	nion, o	ı		3		Х
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	-			4a		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		N	I/A	46		
_	If "Yes," has it filed a tax return on Form 990-T for this year?		-		5		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?						
_	If "Yes," attach the statement required by General Instruction T				1		ľ ;
5	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					Į	1 1
	By language in the governing instrument, or	a state	law		4 -		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state of the state	5 3(010	14.00		8	х	
-	remain in the governing instrument?				7	Х	
′	Did the foundation have at least \$5,000 in assets at any time during the year?					,	· · · ·
0-	If "Yes," complete Part II, col (c), and Part XV.					,	
88	Enter the states to which the foundation reports or with which it is registered (see instructions)				1		
					1		1
D	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				8b	X	
_	of each state as required by General Instruction G? If "No," attach explanation Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) f	or cale	ndar) Ju		7
g		56161			g		x
10	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	S	TMI	7	10	Х	
10	And and hereagus defalling annotating continuous annual due (9x Aegt v. t. Aeg., surson a acuédité saind meir dames que annuas est						(2011)

Form	1990-PF(2011) KLOIBER FOUNDATION, INC 27-111	7156		Page 5
Pá	art VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		х
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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► KLOIBERFOUNDATION.ORG			
14	The books are in care of ▶ DEAN DORTON ALLEN FORD, PLLC Telephone no ▶859-2		<u>341</u>	
	Located at ► 106 WEST VINE ST., STE 600, LEXINGTON, KY ZIP+4 ►4	0507		
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		/ <u>A</u>	
15	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,	ı t	Yes	No X
	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.		· ·	,
P	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required		نــــــــــــــــــــــــــــــــــــــ	
تسبت	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies	1,5	Yes	No
12	During the year did the foundation (either directly or indirectly)		٠,	,,,,, ,
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	-		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	,		,
	a disqualified person? Yes X 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			٠.,
	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 of termination within 90 days.)	_		
	termination of Barrens and Continuenting Minimum or any of	`` "	,	
	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	16		Х
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here		, ,	
	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?	10		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5))			-
a	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 No		, ,	
	If "Yes," list the years >,			
t	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	0.	, 11	٠,
	statement - see instructions) N/A	2b	,	
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		, .	,
2-	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			,
36	during the year? Yes X No			
h	If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after			·
Ī	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		1	
	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) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its chantable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2011?	40		<u>X</u>
	r e	arm QQD	DE /	20111

Form 990-PF (2011) KLOIBER FOUNDATION, INC			21-1111	100 Page 8
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (contin	ved)	
5a During the year did the foundation pay or incur any amount to			FE. 1	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			s X Na	
(2) Influence the outcome of any specific public election (see section 4955), o	r to carry on, directly or indire		(457)	사고 취임한
any voter registration drive?			as X No	* 1 1
(3) Provide a grant to an individual for travel, study, or other similar purposes		YE	s X No	3 15 15 1
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section	,		
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary.	or educational purposes, or f		_ [•]	* 1 4
the prevention of cruelty to children or animals?			s X No	·
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		n Regulations	NI/N	
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 for			ıs 🗔 No	
expenditure responsibility for the grant?	,	/À	15 L. 100	1 1
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		s X No	· 1 .1 ?
a personal benefit contract?	amonal hanafit contract?		ا ۱۹۷ (ملک) ه	бь х
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ALZOUST DAUGHT COULISC!	-	ļ-	72 / 12
If "Yes" to 6b, file Form 8870	holter transaction?	[S X No	
7a. At any time during the tax year, was the foundation a party to a prohibited tax s		11	N/A	7b
b If 'Yes,' did the foundation receive any proceeds or have any net income attribution. Information About Officers, Directors, Trust	eas Foundation Ma	nagers Highly		
Part VIII Paid Employees, and Contractors	ees, roundation Ma	uragors, mgm	7	
List all officers, directors, trustees, foundation managers and their	compensation.			
and the state of t	(b) Title and average	(c) Compensation	(d) Contributors to	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee beneat plans and deterred compensation	account, other allowances
	to position	1		
		1		
SEE STATEMENT 8		0.	0	. 0.
			Ì	
			1	1
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Candandan	(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
19) Maine ditu autiess of each employee paid more trait \$30,000	devoted to position	(S) Componiation	compensation	allowances
NONE				
		<u> </u>		
]			
			ļ	
		<u> </u>		
			ļ	
		<u> </u>	<u> </u>	
Total number of other employees paid over \$50,000			<u> </u>	0
			Form	990-PF (2011)

Form 990-PF (2011) KLOIBER FO	UNDATION, INC	27-	-111715	6 Page 7
Part VIII Information About Office Paid Employees, and Company	cers, Directors, Trustees, Found contractors (continued)	ation Managers, Highly		
3 Five highest-paid independent contracto	rs for professional services. If none, ent-	er "NONE."		
(a) Name and address of each p		(b) Type of service	(c) Compensation
NONE		1.7,7,2		
		- 		
				· · · · · · · · · · · · · · · · · · ·
			İ	
otal number of others receiving over \$50,000 for p	rofessional services		D	C
Part IX-A Summary of Direct Cha	aritable Activities			
List the foundation's four largest direct charitable ac number of organizations and other beneficiaries ser	trivities during the tax year. Include relevant stati	stical information such as the oduced, etc	Ext	penses
N/A				
			1	
			1	
]	
			1	
			<u> </u>	
Part IX-B Summary of Program-R	elated Investments			
Describe the two largest program-related investmen	its made by the foundation during the tax year o	n lines 1 and 2	An	nount
N/A			-	
			-	
			 	
			-	
			-	
All other program-related investments. See instruction	ons		 	
			1	
			1	
			 	
otal. Add lines 1 through 3		<u>></u>		0.
otal. Add lines 1 through 3			Form 9 ^t	9 0-PF (20

Form 990-PF (2011)

Part XIII	Undistributed Incom	18 (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI,	* 0 1 1 1		1.75,772 (
line 7				76,288.
2 Undistributed income, if any, as of the end of 2011	m min min mandan	in and a second	***************************************	
a Enter amount for 2010 only		-^{``	8,030.	, , , , , , , , , , , , , , , , , , ,
b Total for prior years				
		0.	2 × 3. × 1. 5 × 3.	8 4 3 6 7 3
3 Excess distributions carryover, if any, to 2011		, , , , , , , , , , , , , , , , , , , ,		
a From 2006	, "	* *	, , ,	
b From 2007	` * `		V 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
c From 2008		5 5 5 6 6 3 °	, , ,	
d From 2009	, , , , , , , , , , , , , , , , , , ,			
e From 2010				, , ,
f Total of lines 3a through e	0.	<u> </u>		
4 Qualifying distributions for 2011 from		7 1	;	
Part XII, line 4: ►\$ 10,831.	' .,			
a Applied to 2010, but not more than line 2a	· ,		8,030.	
b Applied to undistributed income of prior				`
years (Election required - see instructions)	· · · · · · ·	0.		-
c Treated as distributions out of corpus	ĺ	1 10		
(Election required - see instructions)	0.	In the same of the same		2 001
d Applied to 2011 distributable amount	. ^		,	2,801.
e Remaining amount distributed out of corpus	0.	,	<u> </u>	
5 Excess distributions carryover applied to 2011 (if an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
Enter the net total of each column as Indicated below.				
2 Corpus Add lines 3f 4c, and 4e Subtract line 5	0.	· , , , , , ,		× × × 5
b Prior years' undistributed income. Subtract	1.5.3		. , , ,	5
line 4b from line 2b	1 1	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	1		· ` ,	,
assessed	, , , , , , , , , , , , , , , , , , , ,	0.		
d Subtract line 6c from line 6b. Taxable			2	
amount - see instructions ,	, <u>, , , , , , , , , , , , , , , , , , </u>	0.	31,	
e Undistributed income for 2010 Subtract line				· ' ' '
4a from line 2a Taxable amount - see instr.			0.	4
f Undistributed income for 2011 Subtract	1.			
lines 4d and 5 from line 1. This amount must				73,487.
be distributed in 2012	\$ \$	<u> </u>		/3,40/.
7 Amounts treated as distributions out of		1 1 1 1 1 1 1	· me con	45 7 7 7
corpus to satisfy requirements imposed by				1 , , , , , , , , , , , , , , , , , , ,
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	0.	10 10 10 m	1 1 1 1 1 1 1 1	
Subtract lines 7 and 8 from line 6a		100	· · · · · · · · · · · · · · · · · · ·	
10 Analysis of line 9				
a Excess from 2007				
b Excess from 2008	1 1 3 4 5	1. 1		1 2 2
c Excess from 2009		100000		Part of the
d Excess from 2010	1 "			
a Excess from 2011	<u> </u>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1	Form 990-PF (2011)

	FOUNDATION				.17156 Page 1
Part XIV Private Operating F	oundations (see ins	structions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ruling of	or determination letter that	it is a private operating			
foundation, and the ruling is effective fo	or 2011, enter the date of t	he ruling .	>		
b Check box to indicate whether the found	dation is a private operatir	ig foundation desc <u>ribed</u>	in section	4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
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					1
b 85% of line 2a					
Qualifying distributions from Part XII.					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					Ì
exempt activities	1				
Qualifying distributions made directly					
for active conduct of exempt activities		1			}
·					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the				- 	
alternative test relied upon	ļ]
a "Assets" alternative test - enter	}				
(1) Value of all assets				 	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
C 'Support' alternative test - enter					
(1) Total support other than gross					1
investment income (interest,					1
dividends, rents, payments on					
securities loans (section				İ	
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					
Part XV Supplementary Info	1 (0	A. Al-i A I-	if the formulation	- had \$5 000 or m	oro in accets
Part XV Supplementary Info	ormation (Comple	te this part only	i ine loungation	i nad \$5,000 or in	ore in assets
		uciions.,			
1 Information Regarding Foundation			1 .1 . A	. face data a bafara the ale	as of any tax
2 List any managers of the foundation where year (but only if they have contributed remains a second of the foundation).			itributions received by the	e toutidation detote the cit	ise of any tax
, , , ,	1000,000 (1000 3	66(1011 307 (4)(2) 1			
NONE			/		a danabia As
b List any managers of the foundation who other entity) of which the foundation ha	io own 10% or more of th	e stock of a corporation	(or an equally large port	ion of the ownership of a p	attnership or
**	s a 10 % of greater unteres	n.			
NONE					
2 Information Regarding Contribut					
Check here 🕨 🗶 if the foundation of					
the foundation makes gifts, grants, etc				complete items 2a, b, c, and	
a The name, address, and telephone num	ber of the person to whor	n applications should b	e addressed		
h The farm in which controlled a health		ua d mata raia thau	hould include		
h The form in which applications should t	e submitted and informat	ion and materials they :	Should illiciade		
C Any submission deadlines					
4 Any restrictions or limitations on awards	s, such as by geographica	I areas, charitable fields	, kinds of institutions, or	other factors	
-	. • • •				

D >0.41				
Part XVI-A	Analysis	of Income	 Producing 	Activities

Enter gross amounts unless otherwise indicated	Unrelated	business income	Exclu	ded by section 512, 513, or 514	(8)
	(a)	(b)	(c)	(d)	Related or exempt
1 Program service revenue	Business code	Amount	sion	Amount	function income
8			1		
b	-				
C	_				
d	-				
6			ļ		
g Fees and contracts from government agencies	_				
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	4,937.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate			, , , , , , , , , , , , , , , , , , ,		1
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
11 Other revenue					
a			_		 -
b				ļ	
C	_				
d	_				
e	_		ļ	4 007	
12 Subtotal Add columns (b), (d), and (e)		0	•	4,937.	(
13 Total Add line 12, columns (b), (d), and (e)				13	4,93

Relationship of Activities to the Accomplishment of Exempt Purposes Part XVI-B

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes)
	The control of San Arphiperoof (and that of providing the control of pr
	
12362 t 12-02-11	Form 990-PF (201

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable	
Exempt Organizations	
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of	s No
the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?	. 100
8 Transfers from the reporting foundation to a noncharitable exempt organization of	
(1) Cash	X
(2) Other assets	X
D Other transactions	
(1) Sales of assets to a nonchantable exempt organization	<u> </u>
(2) Purchases of assets from a noncharitable exempt organization [1b(2)]	X
(3) Rental of facilities, equipment, or other assets	X
(4) Reimbursement arrangements	X
(5) Loans or loan guarantees	X
(6) Performance of services or membership or fundraising solicitations	X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	X
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets.	
or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in	
column (d) the value of the goods, other assets, or services received	
(a) Une no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements	ments
N/A	
	<u>-</u>
in section 50 ((c) of the code (other than section 50 ((c))) of the section 52 ?	X No
b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship	
N/A	
Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge. May the IRS discr	ss this
Sign and belief lifts true correct and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge return with the preparer has any knowledge. 2/6/13 PRESIDENT X Yes	ралег
Signature of officer or trustee Date Title	
Print/Type preparer's name Preparer's signature Date Check if PTIN	
Sant D Shal 1/31/13 self-employed	
Paid JENNIFER SHAH June 1737/15 P0044879	5
Preparer Firm's name DEAN DORTON ALLEN FORD, PLLC Firm's EIN ≥ 27-3858252	
Use Only	
Firm's address ▶ 106 W. VINE STREET, SUITE 600	
LEXINGTON, KY 40507 Phone no (859)255-2	341

CIS IMAGE DO NOT CORRESPOND FOR SIGNATURE

Form **990-PF** (2011)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2011

Name of the organizati	on	Employer identification number
	KLOIBER FOUNDATION, INC	27-1117156
Organization type (chec	k one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	n
	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	
	on is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Spe	ecial Rule. See instructions.
General Rule		
	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or momplete Parts I and II	re (in money or property) from any one
Special Rules		
509(a)(1) and 1	01(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of 70(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II	the regulations under sections of the greater of (1) \$5,000 or (2) 2%
total contribution	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any onons of more than \$1,000 for use exclusively for religious, charitable, scientific, literary of cruelty to children or animals. Complete Parts I, II, and III	e contributor, during the year, y, or educational purposes, or
contributions fo If this box is ch purpose. Do no	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any on or use exclusively for religious, charitable, etc., purposes, but these contributions did ecked, enter here the total contributions that were received during the year for an ext complete any of the parts unless the General Rule applies to this organization be able, etc., contributions of \$5,000 or more during the year.	d not total to more than \$1,000. xclusively religious, chantable, etc ,
but it must answer "No"	n that is not covered by the General Rule and/or the Special Rules does not file Schon Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or ceet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	nedule B (Form 990, 990-EZ, or 990-PF), on Part I, line 2 of its Form 990-PF, to
LHA For Paperwork Re	eduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. St	nedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization

Employer identification number

KLOIBER	FOUNDATION,	INC

27-1117156

(Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	onal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	EXSTREAM INC 106 WEST VINE STREET, STE 600 LEXINGTON, KY 40507	\$\$ <u>9,819</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	KLOIBER ENTERPRISES, INC 106 WEST VINE STREET, STE 600 LEXINGTON, KY 40507	\$ 85,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	⟨b⟩ Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	KLOIBER GIFTING TRUST 106 WEST VINE STREET, STE 600 LEXINGTON, KY 40507	\$ 3,620,531.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		-	Person Payroll Complete Part II if there is a noncash contribution)

ame of orga	nization		Employer identification number
(LOIBE	R FOUNDATION, INC		27-1117156
Part III	Exclusively religious, charitable, etc., indiv year Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if addition.	ne following line entry. For organizations c., contributions of \$1,000 or less for th), (8), or (10) organizations that total more than \$1,000 for the completing Part III, enter
(a) No.			
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, ar	nd ZIP + 4	Relationship of transferor to transferee
(a) No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I	(o) . or pose or gint	(0, 036 01 8111	(e) season or now girl is not
-		(e) Transfer of gift	
	Transferee's name, address, ar	nd 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, ar		Relationship of transferor to transferee
- -			
(a) No. from Pert I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
- -			
-		(e) Transfer of gift	<u> </u>
-	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
-			

Employer identification number

KLOIBER FOUNDATION, INC

27-1117156

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No from Part !	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

FORM 990-PF	OTHER EXPENSES		S	TATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
WEBSITE EXPENSE FILING FEE	203. 15.	0.		203. 15.
TO FORM 990-PF, PG 1, LN 23	218.	0.		218.

FORM 990-PF, PART VII-B, LINE 1A(4): THE FOUNDATION REIMBURSES REASONABLE EXPENSES NECESSARY TO CARRY OUT THE EXEMPT PURPOSES OF THE FOUNDATION UNDER AN ACCOUNTABLE PLAN.

FORM 990-PF
LIST OF SUBSTANTIAL CONTRIBUTORS
PART VII-A, LINE 10

NAME OF CONTRIBUTOR
ADDRESS

KLOIBER GIFTING TRUST
106 WEST VINE ST., STE 600
LEXINGTON, KY 40507

	- LIST OF OFFICERS, D S AND FOUNDATION MANA		STATI	EMENT 8
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
DANIEL J KLOIBER 9817 WHITE BARN WAY RIVERVIEW, FL 33569	DIRECTOR 0.25	0.	0.	0.
DAVID C KLOIBER 9817 WHITE BARN WAY RIVERVIEW, FL 33569	DIRECTOR 6.00	0.	0.	0.
CASEY J KLOIBER 9817 WHITE BARN WAY RIVERVIEW, FL 33569	DIRECTOR 0.25	0.	0.	0.
BETH KLOIBER 9817 WHITE BARN WAY RIVERVIEW, FL 33569	DIRECTOR 0.25	0.	0.	0.
WILLIAM N. KLOIBER 9817 WHITE BARN WAY RIVERVIEW, FL 33569	DIRECTOR 0.25	0.	0.	0.
MICHAEL C. KLOIBER 9817 WHITE BARN WAY RIVERVIEW, FL 33569	DIRECTOR 0.25	0.	0.	0.
TOTALS INCLUDED ON 990-PF, P	AGE 6, PART VIII	0.	0.	0.

KLOIBER FOUNDATION, INC	<u> 27-1117156</u>
Part XV Supplementary Information	
3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution	
NAME OF RECIPIENT - OUNCE OF PREVENTION FUND	
TO PROMOTE THE HEALTHY DEVELOPMENT OF VULNERABLE YOUNG CHI	LDREN AND
NARROW THE ACADEMIC ACHIEVEMENT GAP	
NAME OF RECIPIENT - HEAR INDIANA	
TO ENSURE THAT INDIVIDUALS WHO EXPERIENCE HEARING LOSS HAV	E THE
OPPORTUNITY TO COMMUNICATE, LEARN, AND THRIVE INDEPENDENTL	Y THROUGH THE
USE OF SPOKEN LANGUAGE.	

FORM 990-PF INTEREST ON SAV	INGS AND TEM	PORARY CASH II	NVESTMENTS	STATEMENT	
SOURCE				AMOUNT	
PNC BANK				4,9	37.
TOTAL TO FORM 990-PF, PART I	, LINE 3, CO	LUMN A	=	4,93	37.
FORM 990-PF	LEGAL	FEES		STATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
LEGAL FEES	2,181.	1,090.		1,09	€1.
TO FM 990-PF, PG 1, LN 16A	2,181.	1,090.		1,09	91.
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAE PURPOSE	
ACCOUNTING FEES	2,175.	1,088.		1,08	37.
TO FORM 990-PF, PG 1, LN 16B	2,175.	1,088.		1,08	37.
FORM 990-PF	TAX	ES		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
EXCISE TAX	74.	0.			0.
TO FORM 990-PF PC 1 IN 18	74.	0.			0.
TO FORM 990-PF, PG 1, LN 18					