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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

For calendar year 2011 or tax year beginning

, and ending

Name of foundation <b>THE FEDELI FAMILY CHARITABLE FOUNDATION</b>		A Employer identification number <b>31-1740537</b>
Number and street (or P.O. box number if mail is not delivered to street address) <b>P.O. BOX 318003</b>	Room/suite	B Telephone number <b>(216) 328-8080</b>
City or town, state, and ZIP code <b>INDEPENDENCE, OH 44131</b>		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1 Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ <b>1,673,615.</b>	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received	158,700.		N/A	
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	53,975.	53,882.		STATEMENT 1
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	36,890.			
	b Gross sales price for all assets on line 6a	342,583.			
	7 Capital gain net income (from Part IV, line 2)		36,890.		
	8 Net short-term capital gain				
Operating and Administrative Expenses	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss)				
	11 Other income	1,170.	1,094.		STATEMENT 2
	12 Total. Add lines 1 through 11	250,735.	91,866.		
	13 Compensation of officers, directors, trustees, etc.	0.	0.		0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees				
	b Accounting fees				
	c Other professional fees				
	17 Interest	2,416.	2,416.		0.
	18 Taxes	816.	39.		0.
	19 Depreciation and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
22 Printing and publications					
23 Other expenses	6,070.	4,989.		200.	
24 Total operating and administrative expenses. Add lines 13 through 23	9,302.	7,444.		200.	
25 Contributions, gifts, grants paid	144,700.			144,700.	
26 Total expenses and disbursements. Add lines 24 and 25	154,002.	7,444.		144,900.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	96,733.				
b Net investment income (if negative, enter -0-)		84,422.			
c Adjusted net income (if negative, enter -0-)			N/A		

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
Assets	1 Cash - non-interest-bearing					
	2 Savings and temporary cash investments					
	3 Accounts receivable ▶					
	Less: allowance for doubtful accounts ▶					
	4 Pledges receivable ▶					
	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 ▶					
	Less: allowance for doubtful accounts ▶					
	8 Inventories for sale or use					
	9 Prepaid expenses and deferred charges					
	10a Investments - U.S. and state government obligations					
	b Investments - corporate stock STMT 5	1,170,051.	1,275,172.	1,213,364.		
	c Investments - corporate bonds					
11 Investments - land, buildings, and equipment basis ▶						
Less: accumulated depreciation ▶						
12 Investments - mortgage loans						
13 Investments - other STMT 6	465,375.	460,251.	460,251.			
14 Land, buildings, and equipment: basis ▶						
Less: accumulated depreciation ▶						
15 Other assets (describe ▶ DEPOSITS )	5,000.	0.	0.			
16 Total assets (to be completed by all filers)	1,640,426.	1,735,423.	1,673,615.			
Liabilities	17 Accounts payable and accrued expenses					
	18 Grants payable					
	19 Deferred revenue					
	20 Loans from officers, directors, trustees, and other disqualified persons					
	21 Mortgages and other notes payable					
	22 Other liabilities (describe ▶ )					
	23 Total liabilities (add lines 17 through 22)	0.	0.			
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31					
	24 Unrestricted	1,640,426.	1,735,423.			
	25 Temporarily restricted					
	26 Permanently restricted					
	Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31.					
	27 Capital stock, trust principal, or current funds					
	28 Paid-in or capital surplus, or land, bldg., and equipment fund					
	29 Retained earnings, accumulated income, endowment, or other funds					
	30 Total net assets or fund balances	1,640,426.	1,735,423.			
	31 Total liabilities and net assets/fund balances	1,640,426.	1,735,423.			

## Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	1,640,426.
2 Enter amount from Part I, line 27a	2	96,733.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	1,737,159.
5 Decreases not included in line 2 (itemize) ▶ BOOK TO TAX DIFFERENCE - ANCORA	5	1,736.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	1,735,423.

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; 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.)
<b>1a</b>			
<b>b</b> SEE ATTACHED STATEMENT			
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b> 342,583.		321,280.	36,890.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			36,890.

**2** Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7  
If (loss), enter -0- in Part I, line 7 **2** 36,890.

**3** Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):  
If gain, also enter in Part I, line 8, column (c).  
If (loss), enter -0- in Part I, line 8 If gain, also enter in Part I, line 7  
If (loss), enter -0- in Part I, line 7 **3** N/A

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2010	211,240.	875,954.	.241154
2009	172,003.	443,236.	.388062
2008	175,798.	851,169.	.206537
2007	168,232.	1,001,776.	.167934
2006	194,797.	796,048.	.244705

  

<b>2</b> Total of line 1, column (d)	<b>2</b> 1.248392
<b>3</b> Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	<b>3</b> .249678
<b>4</b> Enter the net value of noncharitable-use assets for 2011 from Part X, line 5	<b>4</b> 1,199,317.
<b>5</b> Multiply line 4 by line 3	<b>5</b> 299,443.
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b> 844.
<b>7</b> Add lines 5 and 6	<b>7</b> 300,287.
<b>8</b> Enter qualifying distributions from Part XII, line 4	<b>8</b> 144,900.

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.  
See the Part VI instructions.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)		1	1,688.
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b		2	0.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).		3	1,688.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0.
3 Add lines 1 and 2		5	1,688.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			
6 Credits/Payments:			
a 2011 estimated tax payments and 2010 overpayment credited to 2011	6a 1,000.		
b Exempt foreign organizations - tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c 1,200.		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d		7	2,200.
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> 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	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	512.
11 Enter the amount of line 10 to be: Credited to 2012 estimated tax	512. Refunded	11	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?		X
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 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		X
1c 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: (1) On the foundation \$ 0. (2) On foundation managers \$ 0.		
e 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? If "Yes," attach a detailed description of the activities		X
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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	X	
4b If "Yes," has it filed a tax return on Form 990-T for this year?	X	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
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 law remain in the governing instrument?		X
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	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) OH		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 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		X

**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		X
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? Website address ► <u>N/A</u>	13	X	
14	The books are in care of ► <u>LYNETTE TOLER</u> Telephone no. ► <u>(216) 328-8080</u> Located at ► <u>5005 ROCKSIDE ROAD, CLEVELAND, OHIO</u> ZIP+4 ► <u>44131-6808</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year ► 15 <u>N/A</u>			
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country ►	16	Yes	No
				X

**Part 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(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.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here N/A ► <input type="checkbox"/>	1b	
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	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? If "Yes," list the years ► _____, _____, _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement - see instructions.) N/A	2b	
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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, 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 charitable purposes?	4a	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4b	X

Form 990-PF (2011)

**Part VII-B** Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(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)?

☐ 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

b 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)?

N/A

5b

Organizations relying on a current notice regarding disaster assistance check here

☒

c 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?

N/A

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal 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 shelter transaction?

☐ Yes ☒ No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation.

(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
UMBERTO FEDELI, JR. 820 VILLAGE TRAILS GATES MILLS, OH 44040	TRUSTEE 2.00	0.	0.	0.
MARYELLEN FEDELI 820 VILLAGE TRAILS GATES MILLS, OH 44040	TRUSTEE 2.00	0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

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

0

Form 990-PF (2011)

**Part VIII****Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** (continued)**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 service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services

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
1 N/A	
2	
3	
4	

**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
1 N/A	
2	
All other program-related investments. See instructions.	
3	
<b>Total.</b> Add lines 1 through 3	<b>0.</b>

Form 990-PF (2011)



**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities	<b>1a</b>	1,073,019.
<b>b</b>	Average of monthly cash balances	<b>1b</b>	144,562.
<b>c</b>	Fair market value of all other assets	<b>1c</b>	
<b>d</b>	<b>Total</b> (add lines 1a, b, and c)	<b>1d</b>	1,217,581.
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1e</b>	0.
<b>2</b>	Acquisition indebtedness applicable to line 1 assets	<b>2</b>	0.
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	1,217,581.
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	<b>4</b>	18,264.
<b>5</b>	<b>Net value of noncharitable-use assets</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	1,199,317.
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5	<b>6</b>	59,966.

**Part XI 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.)

<b>1</b>	Minimum investment return from Part X, line 6	<b>1</b>	59,966.
<b>2a</b>	Tax on investment income for 2011 from Part VI, line 5	<b>2a</b>	1,688.
<b>b</b>	Income tax for 2011. (This does not include the tax from Part VI.)	<b>2b</b>	103.
<b>c</b>	Add lines 2a and 2b	<b>2c</b>	1,791.
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1	<b>3</b>	58,175.
<b>4</b>	Recoveries of amounts treated as qualifying distributions	<b>4</b>	0.
<b>5</b>	Add lines 3 and 4	<b>5</b>	58,175.
<b>6</b>	Deduction from distributable amount (see instructions)	<b>6</b>	0.
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	<b>7</b>	58,175.

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	<b>1a</b>	144,900.
<b>b</b>	Program-related investments - total from Part IX-B	<b>1b</b>	0.
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required)	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule)	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	144,900.
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	<b>5</b>	0.
<b>6</b>	<b>Adjusted qualifying distributions</b> Subtract line 5 from line 4	<b>6</b>	144,900.

**Note** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Form 990-PF (2011)

**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, line 7				58,175.
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	156,604.			
b From 2007	120,237.			
c From 2008	134,447.			
d From 2009	149,949.			
e From 2010	168,405.			
f Total of lines 3a through e	729,642.			
4 Qualifying distributions for 2011 from Part XII, line 4: ► \$	144,900.			
a Applied to 2010, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2011 distributable amount				58,175.
e Remaining amount distributed out of corpus	86,725.			
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.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	816,367.			
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	156,604.			
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	659,763.			
10 Analysis of line 9:				
a Excess from 2007	120,237.			
b Excess from 2008	134,447.			
c Excess from 2009	149,949.			
d Excess from 2010	168,405.			
e Excess from 2011	86,725.			







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

- |          |  | Yes          |
|----------|--|--------------|
| <b>1</b> | 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?  |              |
| <b>a</b> | Transfers from the reporting foundation to a noncharitable exempt organization of:   |              |
|          | (1) Cash   | <b>1a(1)</b> |
|          | (2) Other assets   | <b>1a(2)</b> |
| <b>b</b> | Other transactions:  |              |
|          | (1) Sales of assets to a noncharitable exempt organization   | <b>1b(1)</b> |
|          | (2) Purchases of assets from a noncharitable exempt organization   | <b>1b(2)</b> |
|          | (3) Rental of facilities, equipment, or other assets   | <b>1b(3)</b> |
|          | (4) Reimbursement arrangements   | <b>1b(4)</b> |
|          | (5) Loans or loan guarantees   | <b>1b(5)</b> |
|          | (6) Performance of services or membership or fundraising solicitations   | <b>1b(6)</b> |
| <b>c</b> | Sharing of facilities, equipment, mailing lists, other assets, or paid employees   | <b>1c</b>    |
| <b>d</b> | 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. |              |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

- b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

**Sign  
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

▶ *7*

Signature of officer or trustee

Date \_\_\_\_\_

Title

May the IRS discuss this return with the preparer shown below (see instr. 1)?

☒ Yes ☐ No

**Paid  
Preparer  
Use Only**

Print/Type preparer's name

Preparer's signature

Date \_\_\_\_\_

Check ☐ self-employed

PTIN
------

JAMES R. KOMOS, CPA

James R. Kroms, CPA

8.17.12

P00174589

Firm's name ► **CIUNI & PANICHI, INC.**

Firm's EIN ▶	34-1322309
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Firm's address ▶ 25201 CHAGRIN BLVD. #200  
CLEVELAND, OH 44122-5683

Phone no. (216) 831-7171

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 organization

Employer identification number

THE FEDELI FAMILY CHARITABLE FOUNDATION

31-1740537

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)( ) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

- ☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Name of organization	Employer identification number
<b>THE FEDELI FAMILY CHARITABLE FOUNDATION</b>	<b>31-1740537</b>

**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	UMBERTO FEDELI JR. 820 VILLAGE TRAILS GATES MILLS, OH 44040	\$ 158,700.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)



Employer identification number

31-1740537

(a) No. from Part I	(b)  Description of noncash property given	(c)  FMV (or estimate) (see instructions)	(d)  Date received
1	1,000 SH ABBOTT LABS, 2,000 SH CINCINNATI FINANCIAL CORP, 1,000 SH FIRST ENERGY	\$ 158,700.	VARIOUS
(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
		\$	
(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
		\$	
(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
		\$	

Name of organization

Employer identification number

## THE FEDELI FAMILY CHARITABLE FOUNDATION

31-1740537

**Part III** Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once) ▶ \$

Use duplicate copies of Part III if additional space is needed

(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
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

THE FEDELI FAMILY CHARITABLE FOUNDATION

**Part IV** Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; 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.)
1a	3,000 SHRS AMERICAN EXPRESS	D	VARIOUS	VARIOUS
b	10,000 SHRS JOHN HANCOCK PREM DIV FD	D	VARIOUS	VARIOUS
c	7,000 SHRS JOHN HANCOCK PREM DIV FD	D	VARIOUS	VARIOUS
d	GAIN FROM MERLIN PARTNERS LP	P	01/01/11	12/31/11
e	GAIN FROM MERLIN PARTNERS LP	P	VARIOUS	VARIOUS
f	SECTION 1256 CONTRACTS - MERLIN PARTNERS LP			
g				
h				
i				
j				
k				
l				
m				
n				
o				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 136,963.		128,055.	8,908.
b 120,607.		115,550.	5,057.
c 85,013.		77,675.	7,338.
d			14,407.
e			1,049.
f			131.
g			
h			
i			
j			
k			
l			
m			
n			
o			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
a			8,908.
b			5,057.
c			7,338.
d			14,407.
e			1,049.
f			131.
g			
h			
i			
j			
k			
l			
m			
n			
o			

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 }	2	36,890.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) If (loss), enter "-0-" in Part I, line 8 }	3	N/A

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FORM 990-PF	DIVIDENDS AND INTEREST FROM SECURITIES	STATEMENT	1
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SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
ANCORA SECURITIES ACCT #6J2-001017	50,493.	0.	50,493.
DIVIDENDS FROM MERLIN PARTNERS LP	2,969.	0.	2,969.
INTEREST FROM MERLIN PARTNERS LP	513.	0.	513.
TOTAL TO FM 990-PF, PART I, LN 4	53,975.	0.	53,975.

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FORM 990-PF	OTHER INCOME	STATEMENT	2
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DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
MERLIN PARTNERS LP	1,094.	1,094.	
SEC V. BAND OF AMERICA CORP. FAIR FUND	76.	0.	
TOTAL TO FORM 990-PF, PART I, LINE 11	1,170.	1,094.	

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FORM 990-PF	TAXES	STATEMENT	3
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAXES	39.	39.		0.
FEDERAL TAXES	777.	0.		0.
TO FORM 990-PF, PG 1, LN 18	816.	39.		0.

FORM 990-PF	OTHER EXPENSES			STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FILING FEE	200.	0.		200.	
MERLIN PARTNERS LP	5,870.	4,989.		0.	
TO FORM 990-PF, PG 1, LN 23	6,070.	4,989.		200.	

FORM 990-PF	CORPORATE STOCK		STATEMENT	5
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE		
ANCORA SECURITIES - CORPORATE STOCKS	1,275,172.	1,213,364.		
TOTAL TO FORM 990-PF, PART II, LINE 10B	1,275,172.	1,213,364.		

FORM 990-PF	OTHER INVESTMENTS		STATEMENT	6
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	
ANCORA SECURITIES - MONEY MARKET FUNDS	FMV	111,073.	111,073.	
INVESTMENT - MERLIN PARTNERS LP	COST	349,178.	349,178.	
TOTAL TO FORM 990-PF, PART II, LINE 13		460,251.	460,251.	

**Exhibit A**  
**The Fedeli Family Charitable Foundation**  
**2011 Contributions**

Date	Check#	Payee	Street	City	State	Zip	Amount
1/21/2011	1195	The Mute Swan	PO Box 23251	Chagrin Falls	OH	44023	500 00
1/21/2011	1196	Holy Family Hospice Program	6707 State Rd	Parma	OH	44134	200 00
1/21/2011	1197	Southwest Community Health Foundation	18697 Bagley Rd	Middleburg Hts	OH	44130	1 500 00
1/21/2011	1198	NAF	1860 19 St NW	Washington	DC	20009-5501	1 000 00
1/21/2011	1199	The Lyceum	PO Box 21466	South Euclid	OH	44121	500 00
1/21/2011	1200	Padre Pio Academy	1375 West Clifton Blvd	Lakewood	OH	44107	500 00
1/21/2011	1201	Jennings Center for Older Adults	10204 Granger Rd	Garfield Hts	OH	44125	1,000 00
1/21/2011	1202	Catholic Men's Fellowship Of Northeast Ohio	5636 S Greenway Court #E	Highland Hts	OH	44143	500 00
1/21/2011	1203	Lawrence School	20682 Beach Cliff Blvd	Rocky River	OH	44116	1,000 00
2/4/2011	1204	Pope John Paul II Cultural Foundation	3900 Harewood Rd NE	Washington	DC	20017	500 00
2/4/2011	1205	Debartolo Family Foundation	15436 N Flonda Ave St#200	Tampa	FL	33613	500 00
2/4/2011	1206	Coach Sam's Inner Circle Foundation	PO Box 206	Chesterland	OH	44026	1 000 00
2/4/2011	1207	St Augustine Health Campus	7801 Detroit Ave	Cleveland	OH	44102	1 000 00
2/24/2011	1209	Boys Hope Girls Hope	9619 Garfield Blvd	Garfield Hts	OH	44125	500 00
2/24/2011	1210	St Malachi Center	2416 Supenor Viaduct	Cleveland	OH	44113	500 00
2/24/2011	1212	St Francis School	7206 Myron Ave	Cleveland	OH	44103	500 00
2/24/2011	1213	ICU Mobile	2569 Roming Rd Ste 203-B	Akron	OH	44320	1,500 00
2/24/2011	1214	Cleveland Right To Life Education Fund	4427 State Rd	Cleveland	OH	44109	1 500 00
3/14/2011	1215	Order Of The Holy Sepulchre	7048 North Keeler Ave	Lincolnwood	IL	60712-2318	1 200 00
3/14/2011	1216	Beaumont School	3301 North Park Blvd	Cleveland Hts	OH	44118	1,000 00
3/21/2011	1217	Benedictine High School	2900 Martin Luther King Dr	Cleveland	OH	44103	2 000 00
3/21/2011	1218	Providence House	2037 West 32nd St	Cleveland	OH	44113-4017	1,000 00
3/21/2011	1219	Regina Health Center	5232 Broadview Rd	Richfield	OH	44286-9608	500 00
3/21/2011	1220	Ursuline Sisters Of Cleveland	2600 Lander Rd	Pepper Pike	OH	44124	500 00
4/6/2011	1221	St Anthony Adult Day Care Center	19350 Euclid Ave	Euclid	OH	44117	200 00
4/6/2011	1222	Susan G Komen For The Cure Northeast Ohio	26210 Emery Rd #307	Cleveland	OH	44128	250 00
4/6/2011	1223	Hospice Of The Western Reserve	300 E 185th St	Cleveland	OH	44119	200 00
4/27/2011	1224	Father's Love Ministry	7935 Oranna St	Brecksville	OH	44141	1 000 00
4/27/2011	1225	Golden Age Centers	12200 Fairhill Rd	Cleveland	OH	44120	500 00
4/27/2011	1226	Womankind	5400 Transportation Blvd Ste#10	Garfield Hts	OH	44125	300 00
5/13/2011	1227	Cleveland Clinic Childrens Hospital	12510 Mayfield Rd	Cleveland	OH	44106	10,000 00
5/17/2011	1228	Hospice Of Medina County	797 N Court St	Medina	OH	44256	500 00
5/17/2011	1229	Lake Erie College	391 West Washington Street	Painesville	OH	44077	10,000 00
6/5/2011	1230	The Pope John Paul II Cultural Foundation	PO Box 96486	Washington	DC	20077	500 00
6/5/2011	1231	Alta House	12510 Mayfield Rd	Cleveland	OH	44106	500 00
6/5/2011	1232	Positive Education Program	12 West Hanna Lane	Bratenahl	OH	44108	1 000 00
6/15/2011	1233	Our Lady Of Mount Carmel Church	6928 Detroit Ave	Cleveland	OH	44102	250 00
6/15/2011	1234	St Francis Of Assisi	6850 Mayfield Rd	Gates Mills	OH	44040	400 00
6/24/2011	1235	Our Lady Of Lourdes Shnne	21281 Chardon Rd	Euclid	OH	44117	250 00
6/24/2011	1236	Valley Hospice	380 Summit Ave	Steubenville	OH	43952	500 00
6/24/2011	1237	St Clare Of Assisi Catholic School	PO Box 667	Edwards	CO	81632	250 00
6/28/2011	1238	Little Sisters Of The Poor	4291 Richmond Rd	Cleveland	OH	44122	1 000 00
7/6/2011	1239	NOIA Foundation	12510 Mayfield Rd	Cleveland	OH	44106	4 000 00
7/10/2011	1240	Benedictine High School	2900 Martin Luther King Dr	Cleveland	OH	44103	5 000 00
7/10/2011	1241	The Montesson School @ Holy Rosary	12009 Mayfield Rd	Cleveland	OH	44106	500 00
7/10/2011	1242	Team NEO	737 Bolivar, Ste 2000	Cleveland	OH	44115	1,000 00
7/15/2011	1243	Rocky River Education Ctr	21600 Center Ridge Rd	Rocky River	OH	44116	500 00
7/15/2011	1244	United States Holocaust Memorial Museum	PO Box 1852	Highland Park	IL	60035-7852	3 000 00
7/15/2011	1245	Ursuline College	2550 Lander Rd	Pepper Pike	OH	44124	1 000 00
7/15/2011	1246	St George Orthodox Church	2587 W 14th St	Cleveland	OH	44113	250 00
7/26/2011	1247	Broadway School Of Music & The Arts	5415 Broadway Ave	Cleveland	OH	44127	200 00
7/26/2011	1248	Hands Together	2587 Conley Rd	Cedarville	OH	45314	10,000 00
8/6/2011	1249	Christ Child Society Of Cleveland	6753 State Rd	Parma	OH	44134	2,500 00
8/6/2011	1250	Diocese Of Cleveland	2345 Bassett Rd	Westlake	OH	44145	500 00
8/6/2011	1251	Little Sisters Of The Poor	4291 Richmond Rd	Cleveland	OH	44122	1,000 00
8/9/2011	1252	The Dr Bernadine P Healy Scholarship Fund	9500 Euclid Ave	Cleveland	OH	44195	500 00
8/23/2011	1253	Flying Horse Farms	3 Eastern Oval Ste 330	Columbus	OH	43219	2 250 00
8/23/2011	1254	United Way Of Greater Cleveland	1331 Euclid Ave	Cleveland	OH	44115	500 00
9/7/2011	1255	The William & Alyce Cafaro Foundation	2445 Belmont Ave	Youngstown	OH	44505	500 00
9/7/2011	1256	Malachi House	2810 Clinton	Cleveland	OH	44113	500 00
9/7/2011	1257	Lifebanc	4775 Richmond Rd	Cleveland	OH	44128	2,500 00
9/7/2011	1258	Flashes Of Hope	6009 Landerhaven Dr Ste I	Mayfield Hts	OH	44124	1,500 00
9/8/2011	1259	Edward J DeBartolo Scholarship Fund	7620 Market Street	Youngstown	OH	44512	500 00
09/08/11	1260	40 Days 4 Life - Cleve	19885 Detroit Rd #204	Rocky River	OH	44116	1 000 00
09/08/11	1261	Catholic Community Foundation-Rooted in Faith-Forward in Hope	1404 E 9th St 8th Floor	Cleveland	OH	44114	10 000 00
09/08/11	1262	The Village at Marymount	5200 Marymount Village Dr	Garfield Hts	OH	44125	1,500 00
09/09/11	1263	Honduran Children's Rescue Fund	1801 Sheridan Rd	South Euclid	OH	44119	5,000 00
09/25/11	1264	The Cleveland Clinic Taissig Cancer Center	9500 Euclid Ave/R36	Cleveland	OH	44195	3,000 00
09/26/11	1265	Our Lady Of The Wayside	38135 Colorado Ave	Avon	OH	44011	1 000 00
09/26/11	1266	St Andrew Svorad Abbey	10510 Buckeye Rd	Cleveland	OH	44104	500 00
09/26/11	1267	Poor Clares Perpetual Adoration Foundation	22701 Lake Rd Ste 312B	Rocky River	OH	44116	250 00

**Exhibit A**  
**The Federal Family Charitable Foundation**  
**2011 Contributions**

09/26/11	1268 The Gospel House	14707 Alexander Rd	Walton Hills	OH	44146	1,000 00
10/18/11	1269 ICM	6155 Park Square Drive #3	Lorain	OH	44053	2,500 00
10/18/11	1270 The Forever Children's Home	6111 Landerhaven Dr	Mayfield Hts	OH	44124	500 00
10/18/11	1271 Angels Of Mercy, Inc	692 Winton Rd North	Rochester	NY	14609	1,000 00
10/18/11	1272 Alta House	12510 Mayfield Rd	Cleveland	OH	44106	500 00
10/18/11	1273 Our Lady Of Mount Carmel	6928 Detroit Ave	Cleveland	OH	44102	500 00
10/18/11	1274 Notre Dame-Cathedral Latin School	1300 Auburn Rd	Chardon	OH	44024	1,000 00
10/27/11	1275 Eparchy Of Parma	1900 Carlton Rd	Parma	OH	44134	1,000 00
10/27/11	1276 St Ignatius High School	1911 West 30th St	Cleveland	OH	44113	2 500 00
10/31/11	1277 The Mute Swan	PO Box 23251	Chagann Falls	OH	44023	500 00
11/4/2011	1278 John Carroll University(125 years)	20700 North Park Blvd	University Hts	OH	44118	10,000 00
11/4/2011	1279 Coach Sam's Inner Circle Foundation	PO Box 206	Chesterland	OH	44026	2,500 00
11/8/2011	1281 Father's Love Ministry	7935 Onanna St	Brecksville	OH	44141	500 00
12/8/2011	1282 American Sickle Cell Anemia Assoc	10900 Carnegie Ave Ste DD1-201	Cleveland	OH	44106	250 00
12/8/2011	1283 Archbishop Lyke School Annual Fund	18230 Harvard Ave	Cleveland	OH	44128	500 00
12/8/2011	1284 Franciscan Sisters TOR	170 Little church Rd	Toronto	OH	43964	1,500 00
12/22/2011	1285 St Augustine Church	2486 West 14th ST	Cleveland	OH	44113	500 00
12/22/2011	1286 Legatus Summit	5072 Annunciation Circle Stw 202	Ave Mana	FL	34142	2,000 00
12/26/2011	1287 Cuyahoga Community College Foundation	7000 Carnegie Ave	Cleveland	OH	44115	7,500 00
			Subtotal			144,700 00

# Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

**Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868

**Electronic filing (e-file).** You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on **e-file for Charities & Nonprofits**

## **Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Type or print	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
	<b>THE FEDELI FAMILY CHARITABLE FOUNDATION</b>	<input checked="" type="checkbox"/> <b>31-1740537</b>
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions.	Social security number (SSN)
	<b>P.O. BOX 318003</b>	<input type="checkbox"/>
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	<b>INDEPENDENCE, OH 44131</b>	

Enter the Return code for the return that this application is for (file a separate application for each return)

**04**

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

**DAVE GRAF**

- The books are in the care of ► **5005 ROCKSIDE ROAD, CLEVELAND, OHIO - 44131-6808**  
Telephone No ► **(216) 328-8080** FAX No ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2012**, to file the exempt organization return for the organization named above. The extension is for the organization's return for  
► ☒ calendar year **2011** or  
► ☐ tax year beginning , and ending .

- 2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return  
☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	<b>1,423.</b>
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	<b>223.</b>
c <b>Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	<b>1,200.</b>

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form **8868** (Rev. 1-2012)



- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒

**Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1)

**Part II** **Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed).

Enter filer's identifying number, see instructions		
<b>Type or print</b>	Name of exempt organization or other filer, see instructions	Employer identification number (EIN) or
File by the due date for filing your return. See instructions	<b>THE FEDELI FAMILY CHARITABLE FOUNDATION</b>	<input checked="" type="checkbox"/> <b>31-1740537</b>
	Number, street, and room or suite no. If a P.O. box, see instructions	Social security number (SSN)
	<b>P.O. BOX 318003</b>	<input type="checkbox"/>
	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
	<b>INDEPENDENCE, OH 44131</b>	

Enter the Return code for the return that this application is for (file a separate application for each return)

**04**

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

**JENNIFER TOOKMAN**

- The books are in the care of **5005 ROCKSIDE ROAD, CLEVELAND, OHIO - 44131-6808**

Telephone No **(216) 328-8080**

FAX No

- If the organization does not have an office or place of business in the United States, check this box ☐

- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for \_\_\_\_\_

**4** I request an additional 3-month extension of time until **NOVEMBER 15, 2012**

**5** For calendar year **2011**, or other tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

**6** If the tax year entered in line 5 is for less than 12 months, check reason ☐ Initial return ☐ Final return

☐ Change in accounting period

**7** State in detail why you need the extension \_\_\_\_\_

**THE TAXPAYER IS WAITING ON INFORMATION FROM AN UNRELATED THIRD PARTY IN ORDER TO FILE A COMPLETE AND ACCURATE RETURN.**

<b>8a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	<b>8a</b>	\$	<b>1,423.</b>
<b>b</b> If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	<b>8b</b>	\$	<b>2,200.</b>
<b>c</b> <b>Balance due.</b> Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	<b>8c</b>	\$	<b>0.</b>

**Signature and Verification must be completed for Part II only.**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature **▶**

Title **▶**

Date **▶**

Form **8868** (Rev 1-2012)