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

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0052

For	calendar year 2011 or tax year beginning		, and ending		
	me of foundation			A Employer identification	number
	HE KIM AND GARY HEIMAN FA			24 6605476	
	OUNDATION C/O EDWARD M. F.			31-6605176	
	mber and street (or PO box number if mail is not delivered to street	address)	Room/suite	B Telephone number	0255
	O.O. BOX 371805			(513) 761-	
	y or town, state, and ZIP code INCINNATI, OH 45222-1805			C if exemption application is p	ending, check here
	Check all that apply: Initial return		rmer public charity	D 1. Foreign organizations	a abaak bara
u (Final return	Amended return	The public chartly	1. Foreign organizations	s, check here
	Address change	Name change		2. check here and attach co	eeting the 85% test,
H (Check type of organization: X Section 501(c)(3) ex			1	
ij,		Other taxable private founda	tion	E If private foundation sta under section 507(b)(1)	
I E	1777	ng method: X Cash	Accrual		
	· · · · · · · · · · · · · · · · · · ·	her (specify)		F If the foundation is in a under section 507(b)(1)	
	\$ 1,691,513. (Part I, colu	mn (d) must be on cash b	pasis.)		/(D), GHOOK HOTC
Ρź	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
L	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received	700,000.		N/A	
	2 Check I if the foundation is not required to attach Sch B				
	3 interest on savings and temporary cash investments	8,530.	8,530.		STATEMENT 1
	4 Dividends and interest from securities	3.	3.		STATEMENT 2
	5a Gross rents				
	b Net rental income or (loss)				
ø	6a Net gain or (loss) from sale of assets not on line 10	FILL			
Revenue	b Gross sales price for all assets on line 6a	والمستعليا	<u> </u>		
ě	7 Capital gain net income (from Part IV, line 2)	2012	<u>.0</u>		
-	8 Net short-term capital gain \. 5	MON I S 201	医		
	9 Income modifications	NO.			
	10a Gross sales less returns and allowances	EN U			
	b Less Cost of goods sold	hij Line			
	c Gross profit or (loss)			ļ <u> </u>	
	11 Other income	700 522	- O F 3 3		ļ
	12 Total. Add lines 1 through 11	708,533.	8,533.		
	13 Compensation of officers, directors, trustees, etc	0.	<u> </u>	<u> </u>	0.
	14 Other employee salaries and wages		·	 	
8	16a Legal fees				
enses	b Accounting fees STMT 3	2,250.	1,125.		1,125.
ă	c Other professional fees			-	1,123.
ঙ Administrative Exp	17 Interest				
aţį	18 Taxes				
istr	19 Depreciation and depletion		,		
<u>=</u>	20 Occupancy		 ,		
a ₽	21 Travel, conferences, and meetings		···		
See Read A	22 Printing and publications				
ָּהָ קּיי		471.	0.		0.
្រ 🖢 🕹 perating	24 Total operating and administrative				
Der Der	expenses. Add lines 13 through 23	2,721.	1,125.		1,125.
	25 Contributions, gifts, grants paid	603,205.			603,205.
	26 Total expenses and disbursements.				
]] 	Add lines 24 and 25	605,926.	1,125.		604,330.
2	27 Subtract line 26 from line 12;				
	Excess of revenue over expenses and disbursements	102,607.			
3	b Net investment income (if negative, enter -0-)		7,408.		
	c Adjusted net income (if negative, enter -0-)	<u> </u>	·	N/A	<u> </u>
1230 12-0	501 12-11 LHA For Paperwork Reduction Act Notice, see	instructions.			Form 990-PF (2011)

For	m 99	0-PF(2011) FOUNDATION C/O EDWARD M.	FRANKEL	——————————————————————————————————————	6605176 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	
느		Soletini Silosic Botto vita bi yaar ambaha viny	(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing			
		Savings and temporary cash investments	1,589,816.	1,691,513.	1,691,513.
	3	Accounts receivable			
	ļ	Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ►	-		
		Less; allowance for doubtful accounts ▶			
	5	O to			
	I -	Receivables due from officers, directors, trustees, and other		·····	
	"		İ		
	l _	disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
ţ		Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ä	10a	Investments - U.S. and state government obligations			
	Ь	Investments - corporate stock			
	c	Investments - corporate bonds			
	1	Investments - land, buildings, and equipment basis	· ·		,
	1''				
	1	Less accumulated depreciation			
		Investments - mortgage loans			
		Investments - other			· · · · · · · · · · · · · · · · · · ·
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation			
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers)	1,589,816.	1,691,513.	1,691,513.
	17	Accounts payable and accrued expenses	910.	_	
	18	Grants payable			
co.	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
藚	21	Mortgages and other notes payable			
<u>=</u>					
	22	Other liabilities (describe)			
			010	_	
_	23	Total liabilities (add lines 17 through 22)	910.	0.	
	l	Foundations that follow SFAS 117, check here			
to.		and complete lines 24 through 26 and lines 30 and 31.			
ë	24	Unrestricted			
<u>a</u>	25	Temporarily restricted			
Ba	26	Permanently restricted			
ā		Foundations that do not follow SFAS 117, check here			
Ţ		and complete lines 27 through 31.			
þ	27	Capital stock, trust principal, or current funds	0.	0.	
əts	1	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
SS	28		1,588,906.	1,691,513.	
Net Assets or Fund Balances	29	Retained earnings, accumulated income, endowment, or other funds			
ž	30	Total net assets or fund balances	1,588,906.	1,691,513.	
	1		1 500 016	1 601 510	
_	31	Total liabilities and net assets/fund balances	1,589,816.	1,691,513.	
ſΡ	art	III Analysis of Changes in Net Assets or Fund Ba	alances		
Ξ				1 1	_
1		I net assets or fund balances at beginning of year - Part II, column (a), line 3	SU		1 500 005
	•	st agree with end-of-year figure reported on prior year's return)		<u>[1</u>]	1,588,906.
		r amount from Part I, line 27a		2	102,607.
3	Othe	r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	1,691,513.
		eases not included in line 2 (itemize)		5	0.
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	. 6	1,691,513.

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Page 3

(a) List and describe	d Losses for Tax on In the kind(s) of property sold (e.g. ouse; or common stock, 200 shs	., real estate,	income	1 P	low acc - Purch - Donat	ase	(c) Date ac (mo., day	quired , yr.)	(d) Date sold (mo., day, yr.)	
				+-					· · · · · · · · · · · · · · · · · · ·	
b NONE	3		· 	†						
C										
d		-								
е		 		<u> </u>						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				(h) Gair (e) plus (t	or (loss) f) minus (
a	·									
b				\dashv						
C				\dashv						
d				\dashv						
Complete only for assets showing of	sain in column (h) and owned by:	the foundation	on 12/31/60				Coupe /Cal	(h)		
Complete only for assets showing t			cess of col. (i)			col.	Gains (Col. (k), but not	. (n) gain t less thar	minus 1 -0-1 or	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		col. (j), if any				Losses (fr	Losses (from col. (h))		
a			<u> </u>							
b	<u>.</u>									
C		ļ								
d		1							·-·	
e <u> </u>		<u>i</u>		- -	I					
Capital gain net income or (net capit	If gain, also enter al loss) If (loss), enter -0			}	2					
Net short-term capital gain or (loss)		nd (6):								
If gain, also enter in Part I, line 8, coll If (loss), enter -0- in Part I, line 8.	umn (c).			-	9					
Part V Qualification Und	der Section 4940(e) for	Reduced	Tax on Net	Inv	estm	ent Inc	ome			
las the foundation liable for the section "Yes," the foundation does not qualify Enter the appropriate amount in each	under section 4940(e). Do not co	mplete this pa	ırt.						Yes X No	
(a) Base period years Calendar year (or tax year beginning	(b) in) Adjusted qualifying dis	tributions	Net value of no	(c) onchai		use assets	(c	Distrib ol. (b) div	(d) ution ratio ided by col. (c))	
2010		9,300.		1	,483	3,144	•		.47824	
2009		2,699.				0,856	1		1.06428	
2008		3,950.				8,108			.46727	
2007		1,761.				8,417			.68670	
2006		7,307.		1	,248	8,032	•		.63885	
2 Total of line 1, column (d)							2		3.33536	
Average distribution ratio for the 5-y the foundation has been in existence			-	_			3		.66707	
4 Enter the net value of noncharitable-	use assets for 2011 from Part X,	line 5		_	••		4		1,496,349	
Multiply line 4 by line 3							5		998,173	
6 Enter 1% of net investment income	(40) -4 D- 4 L l 07h)						6		74	
								<u></u>	998,247	
						• ••••				
3 Enter qualifying distributions from P If line 8 is equal to or greater than lin See the Part VI instructions.						ate.	8		604,330	
123521 12-02-11	···	· ·			-				orm 990-PF (2011	

THE KIM AND GARY HEIMAN FAMILY

FORM 990-PF (2011) FOUNDATION C/O EDWARD M. FRANKEL 31-6605		F	Page 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	nstruc	ctior	īs)
1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.			
Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%		1	48.
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).			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
3 Add lines 1 and 2 3		1	48.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		1	48.
6 Credits/Payments:			
a 2011 estimated tax payments and 2010 overpayment credited to 2011 6a 27.			
b Exempt foreign organizations - tax withheld at source 6b			
c Tax paid with application for extension of time to file (Form 8868) 6c 350.			
d Backup withholding erroneously withheld			
7. Total gradita and payments. Add lines Sa through Sd		3	77.
A 5			//•
			20 -
			29.
11 Enter the amount of line 10 to be: Credited to 2012 estimated tax ▶ 229 • Refunded ▶ 11 Part VII-A Statements Regarding Activities			0.
	<u> </u>	VI	NI-
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	-	Yes	
any political campaign?	1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	1	l	
distributed by the foundation in connection with the activities.	i I	- 1	
c Did the foundation file Form 1120-POL for this year?	1c		<u> </u>
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	'		
(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$ 0.	1 1		
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?	2		X
If "Yes," attach a detailed description of the activities.			
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	i I	- 1	
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	- 1	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
If "Yes," attach the statement required by General Instruction T.		T	
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
By language in the governing instrument, or			
By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law		l	
remain in the governing instrument?	6	x	
7 Did the foundation have at least \$5,000 in assets at any time during the year?		X	
If "Yes," complete Part II, col. (c), and Part XV.			
8a Enter the states to which the foundation reports or with which it is registered (see instructions)			
ОН			
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	8b	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	9	ŀ	X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X
	n 990 -	PF (
TOTAL			~~ () }

THE KIM AND GARY HEIMAN FAMILY

	990-PF(2011) FOUNDATION C/O EDWARD M. FRANKEL 31-660	5176		Page 5
	art VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		x
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	· · · ·	ļ	
	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	Х	
10	Website address ► N/A	13	1 22	L
1.6	The books are in care of MR. EDWARD FRANKEL Telephone no. (513)	761	-02	55
14	Located at P.O. BOX 371805, CINCINNATI, OHIO			<u>75</u>
45		<u> </u>	-10	
10	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		► [/A	, L
40				l Ni-
10	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,	1	Yes	
	securities, or other financial account in a foreign country?	. 16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign	-		
Pa	country art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	——		Ц
خنا	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	\top	Yes	No
1:	a 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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			ĺ
	a disqualified person?			l
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? X Yes No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			l
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	(T) (T) (T) (T) (T) (T) (T)			ĺ
	tor the benefit or use of a disqualified person)?	-		ĺ
	If the foundation agreed to make a grant to or to employ the official for a period after			l
,	termination of government service, if terminating within 90 days.)			l
•	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		x
	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	-		
,	hafara the first day of the tay year had an an 1911	١		$ _{\mathbf{x}}$
		1c		
Z	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 , , , , , , , , , , , , , , , , , , ,	-		
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	1		
	statement - see instructions.)	. <u>2b</u>		
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
2.	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	İ		ĺ
3	V V.			
	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,	AL		1
	Form 4720, to determine if the foundation had excess business holdings in 2011.)	. 3b		
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	 	Х
1	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			70
	had not been removed from jeopardy before the first day of the tax year beginning in 2011?	. 4b	1	Х

					i
2	Compensation of five highest-paid employees (other than those inc		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				
				1	
To	otal number of other employees paid over \$50,000			. ▶	0

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Part VIII Information About Officers, Directors, Trustees, Foundar Paid Employees, and Contractors (continued)	tion Managers, Highly	
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		
	_	
	_	
		
	_	1
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 statist	information such as the	
number of organizations and other beneficiaries served, conferences convened, research papers prod		Expenses
1 N/A	-	
		0.
2		
3		
		
4		
Pärt IX-B Summary of Program-Related Investments	.	
Describe the two largest program-related investments made by the foundation during the tax year on l	ines 1 and 2.	Amount
1 N/A		
		0.
2		
All other program-related investments. See instructions.		
3 N/A		
		0
Total. Add lines 1 through 3	-	<u>0.</u>
Totals Add intes 1 billough o		Form 990- DE (2011)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	dations	, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
	Average of monthly cash balances	1b	1,519,136.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	1,519,136.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,519,136.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	22,787.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,496,349.
6	Minimum investment return. Enter 5% of line 5	6	74,817.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	74,817.
2a	Tax on investment income for 2011 from Part VI, line 5		
b	Income tax for 2011. (This does not include the tax from Part VI.)	Į.	
C	Add lines 2a and 2b	2c	148.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	74,669.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	74,669.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	74,669.
P	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	-	
١.	Evenness contributions wife etc. total from Bort Leadurgs (d) line 36	4.	604 220
	Durantura malakad kanasatan atau faran Dant IV D	1a 1b	604,330.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	<u>U•</u>
3	Amounts set aside for specific charitable projects that satisfy the:	-	<u></u>
-	Suitability test (prior IRS approval required)	ا ۔	
	Onch distribution that (other hat he required polyaly)	3a 3b	
b	Qualifying distributions Add loss to through 2h Enter here and an Dort V line 9 and Dart VIII loss 4		604,330.
4 5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	4	004,330.
J		_	^
e	income. Enter 1% of Part I, line 27b Adjusted qualifying distributions. Subtract line 5 from line 4	5	604,330.
6	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q		
	4940(e) reduction of tax in those years.	udiiiies I(OF THE SECTION

Form **990-PF** (2011)

Part XIII Undistributed Income (see instructions)

Form 990-PF (2011)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI,				
line 7				74,669.
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 735,998.				
b From 2007 725, 909.				
c From 2008 575,552.			1	
dFrom 2009 660,196. eFrom 2010 709,300.				
'''!' 	3,406,955.	ı		
f Total of lines 3a through e	3,400,333.			
4 Qualifying distributions for 2011 from Part XII, line 4: ►\$ 604,330.				
a Applied to 2010, but not more than line 2a			0.	
b Applied to undistributed income of prior		······································	0.	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus			· · · · · · · · · · · · · · · · · · ·	
(Election required - see instructions) **	604,330.			
d Applied to 2011 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2011	74,669.			74,669.
(If an amount appears in column (d), the same amount must be shown in column (a).)	·			
6 Enter the net total of each column as indicated below:				
8 Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,936,616.			
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		•		1
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	0.			
not applied on line 5 or line 7	661,329.			
9 Excess distributions carryover to 2012.	002,023		<u>-</u>	
Subtract lines 7 and 8 from line 6a	3,275,287.			
10 Analysis of line 9:	,			
a Excess from 2007 725,909.				
b Excess from 2008 575,552.				1
c Excess from 2009 660,196.				
d Excess from 2010 709,300.				
e Excess from 2011 604,330.	** CEE CMAME			5 000 PE (0) (1)

123581 12-02-11

SEE STATEMENT 5

THE KIM AND GARY HEIMAN FAMILY Form 990-PF (2011) FOUNDATION C/O EDWARD M. FRANKEL 31-6605176 Page 10 N/A Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2011, enter the date of the ruling b Check box to indicate whether the foundation is a private operating foundation described in section 4942(1)(5) 4942(j)(3) or Prior 3 years Tax year 2 a Enter the lesser of the adjusted net (a) 2011 (b) 2010 (c) 2009 (d) 2008 (e) Total income from Part I or the minimum investment return from Part X for each year listed **b** 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities . . e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter. (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed c "Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) ... (3) Largest amount of support from an exempt organization (4) Gross investment income Part XV | Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) SEE STATEMENT 6 b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here LX if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number of the person to whom applications should be addressed:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

b The form in which applications should be submitted and information and materials they should include:

Form **990-PF** (2011)

123601 12-02-11

c Any submission deadlines:

31-6605176 FOUNDATION C/O EDWARD M. FRANKEL Page 11 Form 990-PF (2011) Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution show any relationship to any foundation manager or substantial contributor Foundation Amount status of Name and address (home or business) recipient a Paid during the year N/A 501(C)(3) GENERAL PURPOSE SEE STATEMENT 7 PUBLIC CHARITY 603,205. 603,205. Total b Approved for future payment NONE

Form **990-PF** (2011)

٥.

Total

Part XVI-A Analysis of Income-Producing Activ	ivities
---	---------

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		led by section 512, 513, or 514	(e)
-	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	Tunction income
8					
b			\bot		
C		·····	\dashv		
d			\perp		
e			1 1		
		··			
g Fees and contracts from government agencies			_		
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	8,530.	
4 Dividends and interest from securities			14	3.	
5 Net rental income or (loss) from real estate:			+		
a Debt-financed property			1 1		
b Not debt-financed property			1 1	· · · · · · · · · · · · · · · · · · ·	
6 Net rental income or (loss) from personal				· · · · · · · · · · · · · · · · · · ·	
property			1 1		
7 Other investment income		· · =			
8 Gain or (loss) from sales of assets other			1 1		
than inventory					
9 Net income or (loss) from special events	-		1 1		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b		**			
•		-,			
d		·- ·- ·			
e				-	
12 Subtotal. Add columns (b), (d), and (e)		0).	8,533.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	8,533.
(See worksheet in line 13 instructions to verify calculations.)		••••	•	·	2,300.
				. D	
Part XVI-B Relationship of Activities to	tne Acc	omplishment of	⊨xempi	t Purposes	

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishmen the foundation's exempt purposes (other than by providing funds for such purposes).	t of
	N/A	
		·
		
-		
		-
123621 12-02-11	Form	990-PF (2011)

31-6605176 Page 13

Form 990-PF (2011) 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										NO
	•		• • •		7, relating to political organ	izations?				
a Tra	ansfers f	rom the reporting founda	ition to a noncharitab	le exempt org	anization of:					
(1)	Cash							1a(1)		X
(2	Other (assets						1a(2)		X
b Ot	her trans	sactions:								
(1	Sales	of assets to a noncharitat	ble exempt organizati	on				1b(1)		X
		ases of assets from a nor						1b(2)		X
		of facilities, equipment, of						1b(3)		X
		oursement arrangements						1b(4)		X
-										X
•	•	or loan guarantees						1b(5)		X
•	•	mance of services or me						1b(6)		
	•	facilities, equipment, mai	-					10_		X
		•		-	• •	•	arket value of the goods, ot		ets,	
		• • •			ed less than fair market valu	ie in any transaction	or sharing arrangement, sh	OW IN		
	•) the value of the goods, (
(a)Line	no	(b) Amount involved	(c) Name of		exempt organization	(d) Description	of transfers, transactions, and sh	arıng arı	angeme	nts
				N/A						
	<u> </u>		· · · · · · · ·							
	_	-							-	
	-									
						-				
							·			
			ļ							
	L									
2a Is	the four	dation directly or indirect	tly affiliated with, or re	elated to, one	or more tax-exempt organ	zations described		-		
		501(c) of the Code (other	· =					Yes	X	No
		mplete the following sch		(-,,						
	100, 00	(a) Name of org			(b) Type of organization	I ''	c) Description of relationsh	D		
		N/A			())		, , , , , , , , , , , , , , , , , , , ,	•		
		11/ 21			<u>.</u>	1				
										
					<u></u>	 				
				•		 				
	T11- a.	and the state of t	that I have a		a accompanying sebedules	Letatomento and to ""	host of my knowled-s			
	and be				g accompanying schedules and n taxpayer) is based on all inforr		has any knowledge May	he IRS	discuss : e prepar	his
Sign		£1 1	. 1.	1	all. 1	-10000	show	n below	(see ins	
Here	1 -	1 rough	1.1~	1	111218	- IRKU	1016F11 X	Yes		J No I
	Sign	nature of officer or trustee			Date	Title				
		Print/Type preparer's na	ame	Preparer's s	gnature	Date	Check if PTIN			
				D 1	I ALL	10/21/2	self- employed			
Paid		JACQUELYN	OTTO	Socolin	hm C. Otto	10/41/5015	P00	366	544	
Prep	arer	Firm's name ▶DEL		LLP		<u> </u>	Firm's EIN ▶ 86-10			
-	Only			_				•	-	
	~···y	Firm's address ▶ 25	TH TO A T O	र भगन	TITTE 1900					
			NCINNATI,	-			Phone no. (513)	791	_71	0.0
		L C1	TACTIMINATT,	OH 43	404					
							For	n 990		2011)

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

2011

Employer identification number

THE KIM AND GARY HEIMAN FAMILY FOUNDATION C/O EDWARD M. FRANKEL 31-6605176 Organization type (check one): Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt chantable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt chantable trust treated as a private foundation 501(c)(3) taxable private foundation Check 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, chantable, 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

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)

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization THE KIM AND GARY HEIMAN FAMILY FOUNDATION C/O EDWARD M. FRANKEL Employer identification number

31-6605176

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	STANDARD TEXTILE CO., INC. ONE KNOLLCREST DRIVE CINCINNATI, OH 45237	ss	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll 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 Payroli 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.)
123452 01-3	92.10	Schedule B (Form	990, 990-EZ, or 990-PF) (2011)

Name of organization

THE KIM AND GARY HEIMAN FAMILY FOUNDATION C/O EDWARD M. FRANKEL **Employer identification number**

31-6605176

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

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

Employer identification number

THE	KIM	AND	GAF	łΥ	HEIM	/N	FAMILY
FOIT	ייי ברוד.	TON (C/0	स्य	CI SI AWC	М.	FRANKEI.

	ATION C/O EDWARD M. FRA	NKEL	31-6605176							
Part III	the total of exclusively religious, charitable, etc	c., contributions of \$1,000 or less for t	(7), (8), or (10) organizations that total more than \$1,000 for the is completing Part III, enter the year. (Enter this information once)							
	Use duplicate copies of Part III if addition	al 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, a	nd ZIP + 4	Relationship of transferor to transferee							
(a) No. from	(IV) Durant of sift	(a) No. of -if	(d) Description of how sife is held							
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, a	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, a	110 217 + 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, a	<u></u>	Relationship of transferor to transferee							

FORM 990-PF INTEREST ON SAVINGS	AND TEM	PORARY CA	ASH IN	VESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
FIFTH THIRD PRIVATE BANK				,	8,5	30.
TOTAL TO FORM 990-PF, PART I, L	INE 3, CO	LUMN A			8,5	30.
FORM 990-PF DIVIDENDS A	AND INTER	EST FROM	SECUE	RITIES	STATEMENT	2
SOURCE	GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A)
FIFTH THIRD SECURITIES, INC.		3.		0.		3.
TOTAL TO FM 990-PF, PART I, LN 4	1	3.		0.		3.
FORM 990-PF	ACCOUNTI	NG FEES			STATEMENT	3
	(A) KPENSES ER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
ACCOUNTING FEES	2,250.	1,	,125.		1,1	 25.
TO FORM 990-PF, PG 1, LN 16B	2,250.	1,	,125.		1,1:	25. ——
FORM 990-PF	OTHER E	XPENSES			STATEMENT	4
	(A) KPENSES ER BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM		
MISCELLANEOUS	471.		0.			0.
TO FORM 990-PF, PG 1, LN 23	471.		0.			0.

FORM 990-PF

ELECTION UNDER REGULATIONS SECTION
53.4942(A)-3(D)(2) TO TREAT
EXCESS QUALIFYING DISTRIBUTIONS
AS DISTRIBUTIONS OUT OF CORPUS

STATEMENT

5

ELECTION TO TREAT QUALIFYING DISTRIBUTIONS AS COMING FROM CORPUS PURSUANT TO CODE SEC. 4942(H)(2) AND REG. SEC. 53.4942(1)-3(D)

THE KIM AND GARY HEIMAN FAMILY FOUNDATION C/O EDWARD M. FRANKEL PO BOX 371805 CINCINNATI, OH 45222-1805

PURSUANT TO CODE SEC. 4942(H)(2) AND REG. SEC. 53.4942(A)-3(D)(2), THE KIM AND GARY HEIMAN FAMILY FOUNDATION ELECTS TO TREAT CURRENT YEAR QUALIFYING DISTRIBUTIONS IN EXCESS OF THE IMMEDIATELY PRECEDING TAX YEAR'S UNDISTRIBUTED INCOME AS COMING FROM CORPUS.

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT

6

NAME OF MANAGER

GARY HEIMAN KIM HEIMAN

THE KIM AND GARY HEIMAN FAMILY FOUNDATION - 2011 EIN 31-6605176

2011 Form 990-PF For the Year Ended December 31, 2011

Form 990, Part XV, Line 3a, Supplementary Information

Date	Organization	Amount
2011	4C for Children	500
2011	Adath Israel Congregation	8,175
2011	American Friends of Alyn Hospital	250
2011	American Israel Education Foundation	75,000
2011	American Jewish Committee	5,000
2011	Back2Back Ministries	2,000
2011	Congregation Shaarei Torah	9,000
2011	Ellen B. Ganson Foundation	250
2011	Friends of the Israel Defense Forces	50,000
2011	Gift of Life Bone Marrow Foundation	180
2011	Hadassah	5,000
2011	Hadassah Foundation, The	2,500
2011	Israel Guide Dog Center for the Blind	20,000
2011	Jewish Family Service	5,000
2011	Jewish Federation of Cincinnati	243,750
2011	Jewish National Fund	2,500
2011	Jewish Women International	10,000
2011	Juvenile Diabetes Research Foundation	10,000
2011	Mayerson Jewish Community Center	3,500
2011	New Orleans Hillel	1,000
2011	Rockwern Academy	25,000
2011	Tulane Hillel	1,800
2011	Tulane University	10,000
2011	United Way	55,000
2011	University of Cincinnati Foundation	57,500
2011	University School of Nashville	200
2011	Wellness Community, The	100
	Total	603,205

Form 8868

(Rev. January 2012)
Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

OMB No. 1545-1709

110011001100	7 1.70 0 007-		TOURS IN THE ELECTIFICATION			
	re filing for an Automatic 3-Month Extension, complete					> X
	re filing for an Additional (Not Automatic) 3-Month Ex					
Do not co	mplete Part II unless you have already been granted a	an automa	tic 3-month extension on a previous	ly filed Fo	m 8868.	
	c filing (e-file). You can electronically file Form 8868 if y					
	o file Form 990-T), or an additional (not automatic) 3-mor					
	file any of the forms listed in Part I or Part II with the exc					
	Benefit Contracts, which must be sent to the IRS in pap		(see_instructions). For more details o	n the elec	tronic filing	of this form,
	irs.gov/efile and click on e-file for Charities & Nonprofits					
Part 1	<u> </u>					
	ition required to file Form 990-T and requesting an autor	-				·
Part I only						▶ └
	corporations (including 1120-C filers), partnerships, REM ome tax returns.		rusts must use Form 7004 to reques	t an exten	sion of time	
Type or	Name of exempt organization or other filer, see instru			Employer	Identification	on number (EIN) or
print	THE KIM AND GARY HEIMAN FAI		_			
File by the	FOUNDATION C/O EDWARD M. FI			LX.	31-66	05176
due date for filing your return. See	Number, street, and room or suite no. If a P.O. box, s P.O. BOX 371805	ee instruc	tions.	Social se	curity numb	er (SSN)
instructions.	City, town or post office, state, and ZIP code. For a find CINCINNATI, OH 45222-1805	oreign add	iress, see instructions.			
		· · · · · · · · · · · · · · · · · · ·				
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)	······		04
Applicati	on	Return	Application			Return
Is For		Code	Is For			Code
Form 990	l	01	Form 990-T (corporation)			07
Form 990	·BL	02	Form 1041-A			08
Form 990	HEZ.	01	Fpm 4720			09
Form 990	₽₽Ê	04	Form 5227			10
Form 990	-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 980	T (trust other than above)	06	Form 8870			12
	MR. EDWARD FRAI					
• The bo	books are in the care of \triangleright P.O. BOX 37180	5, CI	NCINNATI, OHIO -	45222	-1805	
	one No.▶ (513) 761-9255	_	FAX No. >			
If the c	organization does not have an office or place of business	s in the Ur	hited States, check this box			▶ 🗀
 If this i 	is for a Group Return, enter the organization's four digit	Group Ex	emption Number (GEN) . H	f this is to	r the whole	group, check this
box 🕨 l	If it is for part of the group, check this box	and atta	sch a list with the names and EINs of	all memb	ers the exte	ension is for.
1 Ire	quest an automatic 3-month (6 months for a corporation AUGUST 15, 2012to file the exemp		to file Form 990-T) extension of time tion return for the organization name		The extensi	ión
is fo	or the organization's return for:	•				
▶[X calendar year 2011 or					
▶[tax year beginning	, an	ed ending			
					-	
2 If th	ne fax year entered in line 1 is for less than 12 months, o	check reas	on: Initial return	Final retur	n	
h	The standard					
3a If th	nis application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any	T		
	nrefundable credits. See Instructions.			За	\$	377.
b If th	his application is for Form 990-PF, 990-T, 4720, or 6069,	, enter any	refundable credits and			
est	imated tax payments made. Include any prior year over	payment a	Bowed as a credit.	3b	\$	27.
c Bal	lance due. Subtract line 3b from line 3a, Include your pa	ayment wi	th this form, if required,			
	using EFTPS (Electronic Federal Tax Payment System).			3c	S	350.
Caution.	If you are going to make an electronic fund withdrawal	with this F	orm 8868, see Form 8453-EO and Fo	om 8879	EO for payn	nent Instructions.
	or Privacy Act and Paperwork Reduction Act Notice,					8868 (Rev. 1-2012)

Form 8868 (Rev. 1-2012)						Page 2
 If you are filing for an Additional (Not Autom) 	atic) 3-Month Ex	tension, c	complete only Part II and check this	box		X
Note. Only complete Part II if you have already it	been granted an a	automatic	3-month extension on a previously f	led Form	B868.	
 If you are filing for an Automatic 3-Month Ex 						
Part II Additional (Not Automati	c) 3-Month E	xtensio	n of Time. Only file the origin		·	
			Enter filer's	identifyin	g number,	see instructions
Type or Name of exempt organization or oth				Employer	identificatio	n number (EIN) or
print THE KIM AND GARY HE				X	24 66	05186
						05176
due date for filing your return See P.O. BOX 371805	o. If a P.O. box, s	ee instruc	tions.	Social se	curity numb	er (SSN)
City, town or post office, state, and CINCINNATI, OH 452	ZIP code. For a for 22-1805	oreign add	ress, see instructions.			
Enter the Return code for the return that this ap	plication is for (file	a separa	te application for each return)			0 4
Elliof the Hetern code for the Fotom that the ap	phodulottic for (inc	o a copaia		• • • • • • • • • • • • • • • • • • • •		(313)
Application		Return	Application			Return
Is For		Code	Is For			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 no			natic 3-month extension on a prev	iously file	d Form 886	i8
	WARD FRAI					
 The books are in the care of		5, CI	 	45222	-1805	
Telephone No. ► (513) 761-925			FAX No. >			
 If the organization does not have an office or 						, , ▶ └
If this is for a Group Return, enter the organized states of the st						
			ch a list with the names and EINs o	all memb	ers the exte	nsion is for.
4 I request an additional 3-month extension		NOVEM	BER 15, 2012.			
5 For calendar year 2011, or other tax y			, and endin			·
6 If the tax year entered in line 5 is for less t Change in accounting period	than 12 months, c	check reas	on: L Initial return L	Final r	eturn	
7 State in detail why you need the extension	n _·					
ADDITIONAL THIRD PART		MOITA	IS REQUIRED IN OR	DER T	O PREP	ARE A
COMPLETE AND ACCURATE	ERETURN					······································
8a If this application is for Form 990-BL, 990-	PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any			
nonrefundable credits. See instructions.	1			8a	\$	377.
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 yea	ar overpayment al	lowed as a	a credit and any amount paid			
previously with Form 8868.				8b	\$	<u>377.</u>
c Balance due. Subtract line 8b from line 8	a, Include your pa	ayment wil	th this form, if required, by using	i		_
EFTPS (Electronic Federal Tax Payment S				8c	\$	0.
_			st be completed for Part II	-		
Under penalties of perjury, I declare that I have examinit is true, correct, and complete, and that I am authorize	ned this form, includ zed to prepare this fo	ling accomp orm.	panying schedules and statements, and t	the best o	f my knowled i	ge and belief,
Signature > Jacquellon C. Otto	Title ▶	CPA		Date	> 8/10	1/2012
<i>, ,</i> .		SUITE 500	IUMENT AVE		Form 8	1868 (Rev. 1-2012)
		DAYTON O	H 45402-1223			