

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



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

		dar year 2011 or tax year beginning		, and ending		
Nan	ne of	foundation	•		A Employer identification	n number
\mathbf{T}	ΗE	SMITH FAMILY FOUNDATIO	N			
I	/C	O TODD A. SMITH			36-4401344	<u> </u>
Num	ber a	nd street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
3	<u>33</u>	W WELLINGTON			312-236-93	881
City	or to	own, state, and ZIP code			C If exemption application is p	pending, check here
_ <u>C</u>	HI	CAGO, IL 60657				
G C	heck	all that apply: Initial return	Initial return of a fo	ormer public charity	D 1 Foreign organization	s, check here
		Final return	Amended return		Foreign organizations m	eeting the 85% test
		Address change	Name change		Foreign organizations mi 2. check here and attach co	omputation
H C	_	type of organization: X Section 501(c)(3) ex			E If private foundation sta	
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Other taxable private founda		under section 507(b)(1)(A), check here
		irket value of all assets at end of year J Accounti	*	Accrual	F If the foundation is in a	
		Part II, col. (c), line 16)	her (specify)		under section 507(b)(1)(B), check here
<u></u>		133,402. (Part I, colu.				(d) Db
Pa	πι	(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)
	1	Contributions, gifts, grants, etc., received	125,025.		N/A	
	2	Check If the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	31.	31		STATEMENT 1
	4	Dividends and interest from securities	956.	956	•	STATEMENT 2
	5 a	Gross rents				
	b	Net rental income or (loss)				<u> </u>
e	6 a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all				
Revenue	b	assets on line 6a				<u> </u>
Re.	7	Capital gain net income (from Part IV, line 2)		0	•	
	8	Net short-term capital gain				
	9	Income modifications Gross sales less returns				
	10a	and allowances				
		Gross profit or (loss)				<u> </u>
	11	Other income				
	12	Total, Add lines 1 through 11	126,012.	987		
	13	Compensation of officers, directors, trustees, etc	0.	0	•	0.
	14	Other employee salaries and wages			DECE	
	15	Pension plans, employee benefits			RECEIV	/ED
ses	16a	Legal fees				
Sen	b	Accounting fees			S AUG 27	2012
Ä	C	Other professional fees				012
SEP 1 1 2012 ng and Administrative Expenses	17	Interest			OGDEN,	
28	18	Taxes STMT 3	10.	0	· CODLIN,	<u>Ur</u> 0.
	19	Depreciation and depletion				
~ ₩	20	Occupancy				
~ ₽	21	Travel, conferences, and meetings				
<u>اءِ ۾</u>	22	Printing and publications	1 5			
		Other expenses STMT 4	15.	0	•	0.
J ē	24	Total operating and administrative	25.	0		
OCANNED Operati	O.F.	expenses Add lines 13 through 23	302,500.	<u> </u>	•	302,500.
3	25	Contributions, gifts, grants paid Total expenses and disbursements	304,300.			304,500.
3	26	Add lines 24 and 25	302,525.	0		302,500.
5	27	Subtract line 26 from line 12:	304,343.	<u>_</u>	•	302,300.
	1	Excess of revenue over expenses and disbursements	-176,513.			
	i	Net investment income (if negative, enter -0-)	2,0,525	987	•	
		Adjusted net income (if negative, enter -0-)			N/A	
1235	21	LHA For Paperwork Reduction Act Notice, see	instructions	· · · · · · · · · · · · · · · · · · ·		Form 990-PF (2011)

36-4401344

Page 2

		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	<u>En</u>	d of year
<u> </u>	aπ	Column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	277,817.	101,304	101,304.
	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			
S.	8	Inventories for sale or use			
Assets	1 -	Prepaid expenses and deferred charges	**		
As	· ·	Investments - U.S. and state government obligations			
		Investments - corporate stock STMT 5	31,860.	32,098	32,098.
		Investments - corporate bonds			
		Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis			
		Less accumulated depreciation			
	15	Other assets (describe >			
	16	Total assets (to be completed by all filers)	309,677.	133,402	133,402.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Ś	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Ē	21	Mortgages and other notes payable		·	
Ë	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0.	().
		Foundations that follow SFAS 117, check here			
	1	and complete lines 24 through 26 and lines 30 and 31			
Ses	24	Unrestricted			
ä	25	Temporarily restricted			
Ba		Permanently restricted			
ā		Foundations that do not follow SFAS 117, check here			
Ť		and complete lines 27 through 31.			
S	27	Capital stock, trust principal, or current funds	0.		<u>) .</u>
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.) .
As	29	Retained earnings, accumulated income, endowment, or other funds	309,677.	133,402	
Net Assets or Fund Balance	30	Total net assets or fund balances	309,677.	133,402	2.
_	31	Total liabilities and net assets/fund balances	309,677.	133,402	2.
P	art	III Analysis of Changes in Net Assets or Fund B	Balances		
_	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
'		st agree with end-of-year figure reported on prior year's return)			1 309,677.
2		r amount from Part I, line 27a			$\frac{1}{2}$ $\frac{305}{0.00}$, $\frac{513}{0.00}$.
		ir increases not included in line 2 (itemize) CHANGE IN M	ARKET VALUES (3 238.
4		lines 1, 2, and 3			4 133,402.
		eases not included in line 2 (itemize)		<u> </u>	5 0.
6		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30		6 133,402.
<u> </u>	. J.a				Form 990-PF (2011)

Form 990-PF (2011)

I/C/O TODD A. SMITH

Part IV Capital Gains	and Lo	sses for Tax on In	vestmen	t Income					
(a) List and des 2-story brick v	cribe the k varehouse;	ind(s) of property sold (e.g or common stock, 200 shs	., real estate, s. MLC Co.)		(b) I	How acquired - Purchase - Donation		acquired day, yr.)	(d) Date sold (mo., day, yr.)
1a									
b NO	ONE								
С					ļ				
<u>d</u>			<u> </u>		<u> </u>				
е					<u> </u>				<u> </u>
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis expense of sale				Gain or (loss is (f) minus	
<u>a</u>					-		~		
b	+								
C	 -			·					
<u>d</u>	 								
Complete only for assets show	ung gain in	column (h) and owned by	the foundation	on 12/31/69		1	I) Gains (Col. (h) gain	minus
Complete only for accord creat		(j) Adjusted basis		cess of col. (1)			ľ. (k), buť	not less tha	n -0-) or
(i) F.M.V. as of 12/31/69		as of 12/31/69		col. (j), if any			Losses	s (from col (h))
a									
b									
C									
d									
е									
2 Capital gain net income or (net	capital loss	If gain, also enter) If (loss), enter -0			}	2			
Net short-term capital gain or (I	oss) as def	ined in sections 1222(5) ar	nd (6):						
If gain, also enter in Part I, line			(-/-] [
If (loss), enter -0- in Part I, line	8	4040/ \ 7			للب	3			
Part V Qualification (For optional use by domestic prival)		Section 4940(e) for					come		
if section 4940(d)(2) applies, leave Was the foundation liable for the se	ection 4942	tax on the distributable an			rıod?				Yes X No
If "Yes," the foundation does not qualify the foundation does					PS	-			
(a)	T Each Cold		denons before	making any char					(d)
Base period years Calendar year (or tax year begin	ning in)	(b) Adjusted qualifying dis		Net value of no	(c) onchai	ritable-use assets			oùtión ratio vided by col. (c))
2010			3,990.			159,729 243,949			.838858 .463056
2009			2,962. 0,317.			256,103			.313612
2008			2,020.			222,935		-	.188485
2007 2006	.		5,020.			235,243			.106359
2000			3,020.			200,24		T	1100333
Total of line 1, column (d) Average distribution ratio for th	a 5-vaar ha	se period - divide the total	on line 2 hy 5	or by the number	r of ve	are	2	 	1.910370
the foundation has been in exis			on mie z by o,	or by the number	OI ye	ais	3		.382074
4 Enter the net value of noncharit	able-use as	sets for 2011 from Part X,	line 5				4		168,537.
5 Multiply line 4 by line 3							5		64,394.
	ama /10/ a	FDort L line 97h)					6		
6 Enter 1% of net investment inco	176 0 אוויע	11 atti, iiile 270)					6		10.
7 Add lines 5 and 6							7		64,404.
8 Enter qualifying distributions fro	om Part XII	, line 4					8	<u> </u>	302,500.
If line 8 is equal to or greater th See the Part VI instructions.	an line 7, c	heck the box in Part VI, line	e 1b, and comp	olete that part usin	ng a 1'	% tax rate.	_		
123521 12-02-11				·				F	orm 990-PF (2011)

3

THE SMITH FAMILY FOUNDATION 36-4401344 I/C/O TODD A. SMITH Page 4 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) Part VI 1a Exempt operating foundations described in section 4940(d)(2), check here \(\bigcup \) and enter "N/A" on line 1. (attach copy of letter if necessary-see instructions) Date of ruling or determination letter: 10. b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► X and enter 1% 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-) 2 3 3 Add lines 1 and 2 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4 5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-5 6 Credits/Payments: a 2011 estimated tax payments and 2010 overpayment credited to 2011 6a 6b b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) 6c d Backup withholding erroneously withheld 6d 0. 7 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here ____ if Form 2220 is attached 8 10. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 10 10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 11 Enter the amount of line 10 to be: Credited to 2012 estimated tax Refunded 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 1a Х any political campaign? b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 1b 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 c Did the foundation file Form 1120-POL for this year? 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 0. (2) On foundation managers. > \$ (1) On the foundation. ► \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation 0. 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? X 2 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 3 bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A 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 If "Yes." attach the statement required by General Instruction T. 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law X remain in the governing instrument? 6 Х 7 7 Did the foundation have at least \$5,000 in assets at any time during the year?

Form **990-PF** (2011)

8b

10

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)

of each state as required by General Instruction G? If "No," attach explanation

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)

year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

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

THE SMITH FAMILY FOUNDATION

m 990-PF (2011) I/C/O TODD A. SMITH	36-440	<u> 1344</u>	Page 5
art VII-A Statements Regarding Activities (continued)		- 	
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	<u> </u>
Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had adv	sory privileges?		
If "Yes," attach statement (see instructions)		12	X
Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	X
Website address ► N/A	·		20 026/
The books are in care of ▶ TODD SMITH Telephon	e no. ▶ 312-2	36- 09	20 938/
Located at ► 333 W. WELLINGTON, CHICAGO, IL	ZIP+4 ► 6	<u>0657</u>	
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	N/	
At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,		_ Y	es No
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			
country		l	
art 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.		Y	es No
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?	Yes X No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
a disqualified person?	Yes X No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No		
(5) Transfer any income or assets to a disqualified person (or make any of either available			į
for the benefit or use of a disqualified person)?	Yes X 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		1 1	-
termination of government service, if terminating within 90 days.)	Yes X 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)?	N/A	1b	
Organizations relying on a current notice regarding disaster assistance check here	▶ □		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not correct	ed		
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 found	lation	'-	
defined in section 4942(j)(3) or 4942(j)(5)):	1411011		
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) be	ainnina		
	Yes X No		
· ·			
If "Yes," list the years \(\bigcup, \)	correct		
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and			
	N/A	2b	
statement - see instructions.) c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	IV/ A	20	
			1
Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	Yes X No		
during the year?			
b If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified pers			
May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7			
of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Sched	dule C, N/A	.	
Form 4 (20) to determine if the foundation had evence business heldings in 2011.	Ν / Δ	_3b	
Form 4720, to determine if the foundation had excess business holdings in 2011.)	II/A		1
a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a	<u> </u>
		4a 4b	X

Form **990-PF** (2011)

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

Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	dation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, en	ter "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 sta	itistical information such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers p	roduced, 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 <u>N/A</u>		
		_
		0.
2	_	
All other program-related investments. See instructions.		
3		
		<u> </u>
Total, Add lines 1 through 3	<u> </u>	0.
		Form 990-PF (2011)

36-4401344 Page 8 I/C/O TODD A. SMITH Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Part X Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 31,979. 1a a Average monthly fair market value of securities 1b 139,125. b Average of monthly cash balances Fair market value of all other assets 1c ,104. 10 d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1e 1c (attach detailed explanation) 2 Acquisition indebtedness applicable to line 1 assets 3 171,104. Subtract line 2 from line 1d 3 2,567. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 168,537. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 8.427. Minimum investment return Enter 5% of line 5 6 Distributable Amount (see instructions) (Section 4942(i)(3) and (i)(5) private operating foundations and certain Part XI and do not complete this part.) foreign organizations check here 8,427. Minimum investment return from Part X, line 6 10. 2a Tax on investment income for 2011 from Part VI, line 5 Income tax for 2011. (This does not include the tax from Part VI.) 2b 2c Add lines 2a and 2b C 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 4 Recoveries of amounts treated as qualifying distributions 8,417. 5 Add lines 3 and 4 Deduction from distributable amount (see instructions) 6 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 302,500. a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a 1b b Program-related investments - total from Part IX-B 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the: 3a a Suitability test (prior IRS approval required) 3Ь **b** Cash distribution test (attach the required schedule) 4 302,500. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 5

Form **990-PF** (2011)

6

income. Enter 1% of Part I, line 27b

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

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

THE SMITH FAMILY FOUNDATION I/C/O TODD A. SMITH

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				8,417.
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only			0.	
b Total for prior years:		. 1		
		0.		
3 Excess distributions carryover, if any, to 2011:				
a From 2006 13,462.				
b From 2007 31,068.				
c From 2008 67,618.				
d From 2009 100,791.				,
e From 2010 126,024.				
f Total of lines 3a through e	338,963.			
4 Qualifying distributions for 2011 from				
Part XII, line 4: ► \$ 302,500.			_	
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				8,417.
e Remaining amount distributed out of corpus	294,083.			
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:				
2 Corpus Add lines 3f 4c and 4e Subtract line 5	633,046.			
b Prior years' undistributed income Subtract	000/0101			
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		0		
assessed		0.		
d Subtract line 6c from line 6b. Taxable		, 0.		
amount - see instructions				
e Undistributed income for 2010. Subtract line			0.	
4a from line 2a. Taxable amount - see instr.			<u> </u>	
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				0.
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2006			u 1/2	
not applied on line 5 or line 7	13,462.			
· · ·	13,402.	···		
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	619,584.			
	019,304.			, , ,
10 Analysis of line 9: a Excess from 2007 31,068.				
b Excess from 2008 67,618.				
c Excess from 2009 100, 791.				
d Excess from 2010 126, 024.				
e Excess from 2011 294, 083.				
0 EXCOSS (1011 2011 20 4 7 0 0 0 5 4)				Form 990-PF (2011)

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

c Any submission deadlines:

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

Form **990-PF** (2011)

2011) I/C/O TODD A. SMITH
Supplementary Information (continued)

Part XV Supplementary Informa				
3 Grants and Contributions Paid During t	he Year or Approved for Future I	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	CONTRIBUTION	
a Paid during the year				
W PARKER SCHOOL			BUILDING FUND	
330 W. WEBSTER CHICAGO, IL 60614		_		50,000
OYOLA UNIVERSITY CHICAGO			UNRESTRICTED	
320 N. MICHIGAN AVENUE				
CHICAGO, IL 60611				205,000
			CCUOI ABCUTD FIND	
NORTHWESTERN UNIVERSITY 533 CLARK STREET			SCHOLARSHIP FUND	
EVANSTON IL 60208				32,500
WESLEYAN UNIVERSITY			UNRESTRICTED	
333 WEST WELLINGTON				15,000
CHICAGO, IL 60657				15,000
	L	<u> </u>	▶ 3a	302 500
total b Approved for future payment			- Ja	302,500
a Approved for fature payment				
NONE				
NONE				
		_		<u>.</u>
Total		<u> </u>	▶ 3b	0
Total			F 30	m 990-PF (2011

I/C/O TODD A. SMITH

Part XVI-A Analysis of Income-Producing Activities

	Unrelated b	usiness income	Excluded	by section 512, 513, or 514	(0)
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		code	7 tillount	
a	-				
b					
<u> </u>			 		
d	i I		 		
e			 		
g Fees and contracts from government agencies	-				
2 Membership dues and assessments					
3 Interest on savings and temporary cash		 			
investments			14	31.	
4 Dividends and interest from securities			14	956.	, , , , , , , , , , , , , , , , , , , ,
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			ļ		·
11 Other revenue:					
a	_		ļ <u></u>		
b	_				
c	_		1 1		
d	_		 		
e	_		 	0.07	
12 Subtotal Add columns (b), (d), and (e)		0.	<u> </u>	987.	
13 Total. Add line 12, columns (b), (d), and (e)				13	987.
(See worksheet in line 13 instructions to verify calculations.)	····		-	·· · ···	
Part XVI-B Relationship of Activities	to the Accom	plishment of E	xempt P	urposes	
Line No Explain below how each activity for which inc	ome is reported in c	olumn (e) of Part XVI-A	A contribute	d importantly to the accomp	lishment of
the foundation's exempt purposes (other than	n by providing funds	s for such purposes).		a importantly to the accomp	
		_ 		***	
			·		
				<u></u> .	
					_
		•			
123621 12-02-11					Form 990-PF (2011)

36-4401344 Page 13

Form **990-PF** (2011)

Part	XVII	Information Re	egarding Transfers To	and Transactions	and Relations	hips With Nonchar	itable	
		Exempt Organ	izations					
1 Di	d the org	anization directly or indir	rectly engage in any of the followi	ing with any other organizat	ion described in secti	on 501(c) of	Yes	No
)(3) organizations) or in section 5		ınızatıons?			
a Tr	ansfers t	rom the reporting found	ation to a noncharitable exempt o	rganization of:			1	
(1) Cash						1a(1)	X
(2) Other	assets					1a(2)	X
		sactions:						
		of assets to a noncharital					1b(1)	<u> </u>
(2) Purch	ases of assets from a no	ncharitable exempt organization				1b(2)	X
•	•	of facilities, equipment,					1b(3)	X
(4) Reimt	oursement arrangements					1b(4)	X
	•	or loan guarantees					1b(5)	<u> </u>
•			embership or fundraising solicitati				1b(6)	<u> </u>
			uling lists, other assets, or paid er					X
		•	"Yes," complete the following sch	• •				
		• • •	oundation. If the foundation recei		lue in any transaction	or snaring arrangement, si	10W IN	
		(b) Amount involved	other assets, or services received (c) Name of noncharitab		(d) Description	of transfers transactions and s	harra arran arra	
(a) Line	10	Alloulit ilivoived	N/A	ie exempt organization	(d) Description	of transfers, transactions, and s	namy arangen	ients
			IV/A		 	·	•	
								
		<u></u>						
								
						· · · · · · · · · · · · · · · · · · ·		.
						 		
			tly affiliated with, or related to, on		nizations described		, 	=-
			r than section 501(c)(3)) or in se	ction 527?		L	_ Yes ∟∑	No
b If	'Yes," co	mplete the following sch		(h) Tuno of organization		(c) Description of relationsh		
		(a) Name of org	Janizanon	(b) Type of organization		(c) Description of relations	lih	
		N/A				 		
					 			
				-				
			·					
	Under	penalties of perjury, I declare	that I have examined this return, includ	ling accompanying schedules an	d statements, and to the	best of my knowledge	the IRS discuss	
Sign	and be	lief, it is true, correct, and cor	mplete Declaration of preparer (other th	an taxpayer) is based on all infor	rmation of which preparer	retu	n with the prepared to be in the control of the con	arer
Here		- Jode a	fuith_	8/24/12	PRESI		Yes	ື່∾₀ [
	Sign	ature of officer or trustee		Date	Title			
	.1	Print/Type preparer's na	ame Preparer's	signature	18/18/12	Check If PTIN	· · ·	
			2010		19/6/12	<u>self-employed</u>		
Paid		JAMES C. B	EIEN		10		095595	5
Prep			FTONLAR SONALLE	N LLP	(Firm's EIN ► 41-07		
Use	Only							
			01 W. 22ND/ST,					
		OA	K BROOK, IL 60!	523		Phone no. (630)	573-8	3600

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

THE SMITH FAMILY FOUNDATION

I/C/O TODD A. SMITH

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	X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
• •	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions.				
General Rule	neral Rule				
X For an organization contributor Compl	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one ete Parts I and II				
Special Rules					
509(a)(1) and 170(l	e)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 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%) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II				
total contributions	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or ruelty to children or animals. Complete Parts I, II, and III				
contributions for us If this box is check purpose Do not co	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, se exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000 ed, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., omplete any of the parts unless the General Rule applies to this organization because it received nonexclusively except 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)					

Name of organization

THE SMITH FAMILY FOUNDATION

Employer identification number

36-4401344

<u> </u>	TODD A. SMITH		- ##OTO##
Part I	Contributors (see instructions) Use duplicate copies of Part I if add	ditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	TODD SMITH & MARCIA FRIEDL 333 W. WELLINGTON CHICAGO, IL 60657	\$ <u>125,025.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
140.	Name, address, and 2n + 4	\$	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 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

123452 01-23-12

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

is a noncash contribution)

Name of organization

THE SMITH FAMILY FOUNDATION

Employer identification number

I/C/O TODD A. SMITH 36-4401344 Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed

Part II	Noncash Property (see instructions) Use duplicate copies of P	art II if additional space is needed	
(a) No.	(b)	(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given	(see instructions)	Date received
-			
-			
-		\$	
(a) No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
Part I			
-			
-		\$	
(a)	<i>a</i> .	(c)	
No. from	(b) Description of noncash property given	FMV (or estimate) (see instructions)	(d) Date received
Part I		(000 1110 110 110 110 110 110 110 110 11	
-			
-		\$	
(a)		(c)	
No. from Part I	(b) Description of noncash property given	FMV (or estimate) (see instructions)	(d) Date received
-		<u> </u>	
-			
(a) No.	(b)	(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given	(see instructions)	Date received
-			
(a) No.	(b)	(c) FMV (or estimate)	(d)
rom Part I	Description of noncash property given	(see instructions)	Date received
-			
-			
453 01-23-1		Sahadula B (Form 6	 90, 990-EZ, or 990-PF) (2

Schedule B (Form 990, 990-EZ, or 990-PF) (2011) **Employer identification number** Name of organization THE SMITH FAMILY FOUNDATION 36-4401344 I/C/O TODD A. SMITH 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) Part III Use duplicate copies of Part III if additional space is needed (a) No. from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (d) Description of how gift is held (c) Use of gift (b) Purpose of gift Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (d) Description of how gift is held (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF INTEREST ON SAVI	INGS A	ND TEM	PORARY C	ASH IN	VESTMENTS	STATEMENT	1
SOURCE						AMOUNT	
NORTHERN TRUST					31.		
TOTAL TO FORM 990-PF, PART I,	LINE	3, CO	LUMIN A				31.
FORM 990-PF DIVIDEND	OS ANI	INTER	EST FROM	SECUF	RITIES	STATEMENT	2
SOURCE		GROSS	AMOUNT		TAL GAINS	COLUMN (A AMOUNT)
NORTHERN TRUST (MERCK)			956.		0.	9	56.
TOTAL TO FM 990-PF, PART I, I	LN 4		956.		0.	9	56.
FORM 990-PF		TAX	ES			STATEMENT	3
DESCRIPTION	EXPE	A) ENSES BOOKS					
EXCISE		10.		0.		0.	
TO FORM 990-PF, PG 1, LN 18		10.		0.			0.
TORW 000 PH	OTHER EXPENSES			STATEMENT 4			
FORM 990-PF							
	EXP	(A) ENSES BOOKS	(B) NET INV MENT IN		(C) ADJUSTED NET INCOM		
DESCRIPTION ANNUAL REPORT FILING FEE	EXP	ENSES	NET INV		ADJUSTED	CHARITA	

FORM 990-PF CORPORATE STOCK		STATEMENT 5
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
MERCK COMMON STOCK MEDCO HEALTH SOLUTIONS INC COM	23,713. 8,385.	23,713. 8,385.
TOTAL TO FORM 990-PF, PART II, LINE 10B	32,098.	32,098.

Form **8868**

(Rev. January 2012)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

	u are filing for an Automatic 3-Month Extension, comple					▶ 🗓		
• If yo	u are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II (on page 2 of	this form)				
Do not	complete Part II unless you have already been granted a	an automa	atic 3-month extension on a previous	sly filed Fo	rm 8868.			
Electro	onic filing (e-file). You can electronically file Form 8868 if y	ou need a	a 3-month automatic extension of tir	ne to file (6	6 months for a	a corporation		
require	d to file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically f	ile Form 8	368 to reques	t an extension		
•	to file any of the forms listed in Part I or Part II with the exc							
	al Benefit Contracts, which must be sent to the IRS in pap							
	vw irs gov/efile and click on e-file for Charities & Nonprofits							
Part			submit original (no copies ne	eded).				
	pration required to file Form 990-T and requesting an autor							
Part I o	,							
	er corporations (including 1120-C filers), partnerships, REM	ICs. and t	rusts must use Form 7004 to reques	st an exten	sion of time			
	ncome tax returns	, 	·	,				
Type o	e or Name of exempt organization or other filer, see instructions				Employer identification number (EIN) or			
print	THE SMITH FAMILY FOUNDATION	ν.						
File by th	I/C/O TODD A. SMITH			LXJ	01344			
due date	for Number, street, and room or suite no. If a P.O. box, s	ee instruc	tions	Social se	r (SSN)			
filing you return So	9 JJJ W WINDHINGTON			<u> </u>				
instructio	, and a parameter and a second a second and	oreign add	lress, see instructions					
	CHICAGO, IL 60657							
Entor t	ne Return code for the return that this application is for (file	a senara	ite application for each return)			0 4		
Entert	te Neturn code for the return that this application is for the	a separa	tte application for each return,					
Applic	ation	Return	Application			Return		
Is For		Code	Is For					
Form 9	90	01	Form 990-T (corporation)					
Form 9		02	Form 1041-A	<u> </u>				
		01	Form 4720			08		
Form 990-EZ Form 990-PF		04	Form 5227			10		
Form 990-T (sec 401(a) or 408(a) trust)		05	Form 6069			11		
	90-T (trust other than above)	06	Form 8870			12		
	TODD SMITH							
• The	books are in the care of ▶ 333 W. WELLING!	ron -	CHICAGO, IL 60657					
Tele	phone No ► 312-236-0920		FAX No ▶		•			
	e organization does not have an office or place of business	s in the Ur	nited States, check this box			ightharpoons		
	is is for a Group Return, enter the organization's four digit			If this is fo	r the whole gr	oup, check this		
box 🕨	. If it is for part of the group, check this box	and atta	ach a list with the names and EINs o	f all memb	ers the exten	sion is for		
1	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 exemp	t organiza	ition return for the organization name	ed above	The extension	n		
	s for the organization's return for							
1	▶ X calendar year 2011 or							
1	tax year beginning	, an	nd ending		_			
			[
2 I	f the tax year entered in line 1 is for less than 12 months, c	heck reas	on Initial return	Final retur	n			
	Change in accounting period							
								
	f this application is for Form 990-BL, 990-PF, 990-T, 4720, or	or 6069, e	enter the tentative tax, less any			^		
-	nonrefundable credits. See instructions			3a_	\$	0.		
	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and					0		
-	estimated tax payments made Include any prior year overp			3b	\$	0.		
	Balance due. Subtract line 3b from line 3a. Include your pa	•	· · · · · · · · · · · · · · · · · · ·		.	0		
	by using EFTPS (Electronic Federal Tax Payment System)			3c	S for pour	<u>0.</u>		
LHA	n. If you are going to make an electronic fund withdrawal v			OIIII 007 9-		RAR (Rev. 1-2012)		

123841 01-04-12

Form 8868 (Rev 1-2012)					Page 2	
 If you are filing for an Additional (Not Automatic) 3-Month Ex 	tension, d	complete only Part II and check this	box	>	X	
Note. Only complete Part II if you have already been granted an a	utomatic	3-month extension on a previously fi	led Form	8868		
• If you are filing for an Automatic 3-Month Extension, comple						
Part II Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no c	opies needed).		
		Enter filer's	identifvir	ng number, see ins	structions	
Type or Name of exempt organization or other filer, see instru	ctions			identification num		
TOTAL CALEBOA DANCE OF THE PARTY OF THE PART			p.o, o.		20. (21, 0.	
T /C /O MODD & CMTMH			$\overline{\mathbf{x}}$	36-44013	4.4	
filing your	Social se	curity number (55)	N)			
return See 333 W WELLINGTON						
City, town or post office, state, and ZIP code For a fo	oreign add	lress, see instructions				
CHICAGO, IL 60657	 -					
Enter the Return code for the return that this application is for (file	a separa	te application for each return)			0 4	
Application	Return	Application	•	Return		
Is For	Code	Is For			Code	
Form 990	01				1	
	02	Form 1041-A			08	
Form 990-BL				····	09	
Form 990-EZ	01	Form 4720			 	
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 auton	natic 3-month extension on a prev	iously file	d Form 8868.		
TODD SMITH						
• The books are in the care of ▶ 333 W. WELLING	ron -	CHICAGO, IL 60657				
Telephone No ► 312-236-0920		FAX No 🕨				
• If the organization does not have an office or place of business	s in the Ur	nited States, check this box		>		
If this is for a Group Return, enter the organization's four digit			this is fo	r the whole group,	check this	
box ▶ If it is for part of the group, check this box ▶	1	ach a list with the names and EINs of				
4 request an additional 3-month extension of time until	NOVEM:	BER 15, 2012				
0.011						
6 If the tax year entered in line 5 is for less than 12 months, c Change in accounting period		ona. rota		0.0		
•						
7 State in detail why you need the extension INFORMATION NECESSARY TO PREPARE	1 D E 1	COMPLETE AND ACCID	ס א חייבי	EODM QQO_1	DF TC	
					FF IS	
NOT YET AVAILABLE. AN ADDITION	JIML .	EXTENSION OF TIME	TO VE	OGP21ED.		
						
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, 0	or 6069, e	nter the tentative tax, less any			•	
nonrefundable credits. See instructions	.		8a	\$	0.	
b If this application is for Form 990-PF, 990-T, 4720, or 6069,	-					
tax payments made Include any prior year overpayment all	owed as a	a credit and any amount paid				
previously with Form 8868.			8b	\$	0.	
c Balance due. Subtract line 8b from line 8a. Include your pa	yment wit	th this form, if required, by using				
EFTPS (Electronic Federal Tax Payment System) See instru	EFTPS (Electronic Federal Tax Payment System) See instructions 8c \$					
Signature and Verificat	ion mu	st be completed for Part II o	nly.	•		
Under penalties of perjury, I declare that I have examined this form, includit is true, correct, and complete, and that I am authorized to prepare this form.	ing accomp orm.	panying schedules and statements, and to	the best o	f my knowledge and l	oelief,	
Signature Title 1	PRESI	DENT	Date			
Signature Title 1	LIVIUL.		Date	F 0000 /F	1 0010	

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