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SCANNED MAY 2 3 2012

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

OMB No 1545 0052

2011

Department of the Treasury Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements ar beginning , 2011, and ending ,

| For calendar year 2011, or tax year beginning , 2011, and ending , | | | | | | | | |
|--|---|--|--------------------------|---------------------|--|--|--|--|
| IRVI | NG & MARILYN L. NAIDITCH FAM | ILY | | | er identification num 4479217 | nber | | |
| 171 | FOUNDATION 171 SHERIDAN RD. HIGHLAND PARK, IL 60035 | | | | B Telephone number (see the instructions) | | | |
| u. | <u> </u> | C If exem | ption application is | pending, check here | | | | |
| G Che | ck all that apply Initial return | Initial Return of a form | ner public charity | D 1 Foreign | organizations, chec | k here | | |
| | Address change | Name change | | | ı organızatıons meet ıd attach computatio | ing the 85% test, check | | |
| н с | heck type of organization X Section 501 Section 4947(a)(1) nonexempt charitable t | (c)(3) exempt private for rust Other taxable p | | | te foundation status | | | |
| | ir market value of all assets at end of year J Acc | ounting method X Ca | sh Accrual | | section 507(b)(1)(A) | | | |
| ► \$ | 779, 607. (Part I, | Other (specify) column (d) must be on | | | oundation is in a 60 section 507(b)(1)(B) | | | |
| Part I | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)) | (a) Revenue and expenses per books | (b) Net investmen income | t (c) / | Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) | | |
| | 1 Contributions, gifts, grants, etc, received (att sch). 2 Ck X if the foundn is not req to att Sch B | | | | | , | | |
| | 3 Interest on savings and temporary cash investments | | | | | | | |
| | 4 Dividends and interest from securities 5 a Gross rents | 25,778. | 25,778 | 3. | 25,778. | , | | |
| _ | b Net rental income or (loss) | 16.750 | | | | | | |
| R E V | 6a Net gain/(loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 606, 162. | 16,753. | | | | | | |
| Ě N U | 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain | | 16,75 | 3. | 16,363. | | | |
| Ü | 9 Income modifications | | | | 10,303. | | | |
| - | 10 a Gross sales less returns and allowances | | | | | | | |
| | b Less Cost of goods sold | | | | | ··· ; | | |
| | c Gross profit/(loss) (att sch) 11 Other income (attach schedule) | | | - | | | | |
| | 12 Total. Add lines 1 through 11 | 42,531. | 42,53 | 1. | 42,141. | | | |
| | 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages | 0. | | | RIF | CEIVED | | |
| | 15 Pension plans, employee benefits | | | | | | | |
| A D | 16a Legal fees (attach schedule) b Accounting fees (attach sch) See St 1 | 700. | 700 | 0. | AM ES | 2 1 2012 | | |
| N M | c Other prof fees (attach sch) | | | | m | <u> </u> | | |
| O P E R A T | 17 Interest 18 Taxes (attach schedule)(See Instrs) See Stm 2 | 3,275. | 3,27 | 5. | <u> </u> | DEN, UT | | |
| A A | 19 Depreciation (attach sch) and depletion | | | | | | | |
| N V G E | 20 Occupancy 21 Travel, conferences, and meetings | | <u>-</u> | - | | | | |
| A E N X D P | 22 Printing and publications 23 Other expenses (attach schedule) | | | | - | | | |
| E N | See Statement 3 | 7,722. | 7,72 | 2. | | | | |
| S E S | 24 Total operating and administrative expenses. Add lines 13 through 23 | 11,697. | 11,69 | 7. | | | | |
| | 25 Contributions, gifts, grants paid Stmt 4 26 Total expenses and disbursements. | 41,848. | | _ | | 41,848. | | |
| | Add lines 24 and 25 27 Subtract line 26 from line 12: | 53,545. | 11,69 | 7. | 0. | 41,848. | | |
| | a Excess of revenue over expenses and disbursements | -11,014. | | | | | | |
| | b Net investment income (if negative, enter -0-). | | 30,83 | 4. | 40 141 | | | |
| | C Adjusted net income (if negative, enter -0-) | <u> </u> | | TEE AOSONI 1 | 42,141. | Form 990-PF (2011) | | |

775,920 764,906 (see instructions) Part III Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with 775,920 end-of-year figure reported on prior year's return) 2 -11,014.Enter amount from Part I, line 27a 3 3 Other increases not included in line 2 (itemize) 4 764,906. Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 764,906. 6 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

775,920

775,920

764,906

764,906

T A S N

O É R S

30

27 Capital stock, trust principal, or current funds

28 Paid-in or capital surplus, or land, building, and equipment fund

Total liabilities and net assets/fund balances

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

| (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shares MLC Company) | | | | | (b) How ac P — Purc D — Don | hase | (C) Date acquired (month, day, year) | (d) Date sold (month, day, year) |
|--|---|---|-----------------|---|-----------------------------------|--------------------|---|-------------------------------------|
| 1a PUBLICLY TRADED SECURITIES | | | | | | | Various | Various |
| b PUBLICLY | | | | | | | Various | Various |
| С | | | | | | | | |
| d | · | | | | | | | |
| е | | | | | | | | |
| (e) Gross | sales price | (f) Depreciation a (or allowable | | (g) Cost or other ba plus expense of sa | | | (h) Gain or (e) plus (f) m | |
| a | 55,413. | | | (| 55,023. | | | 390. |
| b | 550,749. | | | 53 | 34,386. | | | 16,363. |
| С | | | | | | | _ | |
| d | | | | | | | - | |
| e | | | | · | | | | |
| Complete or | ly for assets showing | g gain in column (h) a | and owned by | the foundation on 12/31/6 | 59 |] | (I) Gains (Coli | ımn (h) |
| | arket Value 2/31/69 | (j) Adjusted ba as of 12/31/ | | (k) Excess of column over column (j), if | n (ı) any | | ain minus column (I an -0-) or Losses (fi | |
| a | | | | | | | | 390. |
| b | | | | | | | | 16,363. |
| С | | | | | | | | |
| d | | | | | | | | |
| e | | | | | | | | |
| | net income or (net or m capital gain or (lo | apital loss) — | _lf (loss), ent | enter in Part I, line 7 ter -0- in Part I, line 7 and (6) | _ | 2 | | 16,753. |
| ın Part I, line | e 8 | 3, column (c) (see ins | | (loss), enter -0- | _ | 3 | | 16,363. |
| Was the foundatio | ation does not qualify | on 4942 tax on the dis under section 4940 | e) Do not co | nount of any year in the ba mplete this part e instructions before maki | | | Yes | No |
| Base pei Calendar yea | a) riod years ar (or tax year ning in) | (b) Adjusted qualifying d | istributions | (c) Net value of noncharitable-use as | ssets | (coli | (d) Distribution umn (b) divided | |
| 20 | 010 | · | | | | | | |
| 20 | 009 | | | · | | 1 | | |
| 20 | 008 | | | ··· ·- | | | | |
| 20 | 007 | | | | | <u> </u> | | |
| 20 | 006 | | | | - | | | |
| 2 Total of line | 1, column (d) | | | | | 2 | | |
| 3 Average dist | tribution ratio for the ears the foundation h | 5-year base period – nas been in existence | divide the to | otal on line 2 by 5, or by the 5 years | е | 3 | | |
| 4 Enter the ne | t value of noncharita | ble-use assets for 20 | 11 from Part | X. line 5 | | 4 | | |
| 5 Multiply line | | | | | | 5 | · · · · · · · · · · · · · · · · · · · | |
| | • | me (1% of Part I, line | 27h) | | | 6 | | |
| 7 Add lines 5 | | (170 Or 1 Git I, IIIIe | _, _, | | | 7 | | |
| | | n Dank VII. In a 4 | | | | | - | |
| If line 8 is ei | ring distributions fror qual to or greater tha | • | ox in Part VI, | line 1b, and complete tha | t part using | <u>8</u> 3 a 1% | tax rate See t | he |
| Part VI instr | uctions | | | | | | Fori | n 990-PF (2011 |

| Form | r 990-PF (2011) IRVING & MARILYN L. NAIDITCH FAMILY 36-4479217 | | Р | age 4 |
|------|--|-----------------|-------------|-------------|
| Par | t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instruction | ıs) | | |
| 1 a | 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 instrs) | | | |
| t | Domestic foundations that meet the section 4940(e) requirements in Part V, | | - 6 | 517. |
| | check here ☐ and enter 1% of Part I, line 27b | | | 1 |
| c | : All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b) | | | 1 |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable | | | |
| _ | foundations only Others enter -0-) | | | <u>0.</u> |
| 3 | Add lines 1 and 2 | | - 6 | <u>517.</u> |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | | <u>0.</u> |
| 5 | Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- | | 6 | <u>517.</u> |
| 6 | Credits/Payments | | | } |
| | 2011 estimated tax pmts and 2010 overpayment credited to 2011 6a 1,640. | | | |
| | Exempt foreign organizations — tax withheld at source | | | |
| | : Tax paid with application for extension of time to file (Form 8868). | | | |
| C | Backup withholding erroneously withheld | | | |
| 7 | Total credits and payments Add lines 6a through 6d | | 1,6 | <u>540.</u> |
| 8 | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8 | | | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | | <u>0.</u> |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. | | 1,0 | 023. |
| 11 | Enter the amount of line 10 to be Credited to 2012 estimated tax | | | <u>0.</u> |
| Par | t VII-A Statements Regarding Activities | | | |
| 1 a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? | 1a | Yes | No X |
| t | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)? | 1 b | | х |
| | 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 | | | i |
| | Did the foundation file Form 1120-POL for this year? | 1c | | X |
| C | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ►\$ 0. (2) On foundation managers ►\$ 0. | | | |
| e | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on | 1 | | ; |
| - | foundation managers. >\$ 0. | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? If 'Yes,' attach a detailed description of the activities | 2 | - | X |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles | | | |
| | of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes | 3 | | X |
| 4 a | 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 | N | /A |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 5 | | X |
| | If 'Yes,' attach the statement required by General Instruction T. | | | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or | | | |
| | By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? | 6 | X | اً ۔ ۔ ا |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV | 7 | X | |
| | Enter the states to which the foundation reports or with which it is registered (see instructions) | | | |
| | IL | | | ', |
| t | 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 <i>General Instruction G</i> ? 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 | | X |
| 10 | Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses | 10 | | x |
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Form **990-PF** (2011)

| Forn | n·990-PF (2011) IRVING & MARILYN L. NAIDITCH FAMILY 36-4479 | 217 | F | age 5 |
|------|--|---------------|------------|---------------------------------------|
| | rt VII-A Statements Regarding Activities (continued) | | | |
| `11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions) | 11 | | х |
| | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions). | 12 | - | х |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A | 13 | <u> </u> | |
| 14 | The books are in care of ► IRVING & MARILYN NAIDITCH Located at ► 171 SHERIDAN RD. HIGHLAND PARK IL ZIP + 4 ► 60035 | <u>-432-9</u> | 019 | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the year | N/A | 1 ► | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |
| 16 | At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? | 16 | Yes | No 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 ▶ | | | |
| Pa | rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | |
| | File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies. | | Yes | No |
| 1: | a During the year did the foundation (either directly or indirectly) | | | 1 |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X N (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a | 0 | | |
| | disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X N | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X N | | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X N | 0 | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) Yes | lo | | |
| | 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)? | 1b | N | I/A |
| | Organizations relying on a current notice regarding disaster assistance check here | | | |
| • | c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2011? | 1c | | X |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)) | | | |
| ; | a At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011? If 'Yes,' list the years ▶ 20, 20, 20 | lo | | |
| | b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to | | | |
| | all years listed, answer 'No' and attach statement — see instructions.). c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | 2 b | N | I/A |
| | ► 20 , 20 , 20 | İ | | İ |
| 3 | a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X | 10 | | |
| | b If 'Yes,' did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2011) | 31 | - N | I/A |
| 4 | a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 48 | | х |
| | ED dile to odd on one of the control | | | |
| | b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011? | 41 | | <u>_</u> |

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Form 990-PF (2011)

| Form 990-PF (2011) IRVING & MARILYN I | L. NAIDITCH FAM | IILY | 36-44 | 79217 | Page 6 |
|--|---|--|--|------------------------|-------------------------|
| Part VII-B Statements Regarding Activiti | es for Which Forn | n 4720 May Be Req | uired (continued) | | |
| 5a During the year did the foundation pay or incu | • | | | | |
| (1) Carry on propaganda, or otherwise attempt | ot to influence legislation | on (section 4945(e))? | Yes X | No | 1 1 |
| (2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra | lic election (see section ation drive? | n 4955); or to carry | | No | ; |
| (3) Provide a grant to an individual for travel, | study, or other similar | purposes? | ∐ Yes X | No | <u> </u> |
| (4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section | nan a charitable, etc, o 4940(d)(2)? (see instri | rganization described uctions) | Yes X | No | |
| (5) Provide for any purpose other than religio educational purposes, or for the preventio | us, charitable, scientific n of cruelty to children | c, literary, or or animals? | Yes X | No | ! |
| b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)? | | | | 5b | N/A_ |
| Organizations relying on a current notice rega | rding disaster assistani | ce check here | ▶ _ |] | |
| c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon | the foundation claim ex sibility for the grant? | emption from the | N/A Yes |] No | , |
| If 'Yes,' attach the statement required by Regi | ulations section 53 494 | 5-5(d) | | | 1 |
| 6a Did the foundation, during the year, receive ar on a personal benefit contract? | • | | Yes <u>X</u> |]No | |
| b Did the foundation, during the year, pay prem | iums, directly or indirec | ctly, on a personal bene | fit contract? | 6Ь | <u> </u> |
| If 'Yes' to 6b, file Form 8870 7a At any time during the tax year, was the found | dation a party to a prob | whited tay chalter transa | nction? Yes X | No | ĺ |
| b If 'Yes,' did the foundation receive any procee | , , | | | N/A 7b | |
| Part VIII Information About Officers, D | | | | | |
| and Contractors | · · · · · · · · · · · · · · · · · · · | | | | |
| 1 List all officers, directors, trustees, foundation | | | | , | |
| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense other allo | e account, wances |
| | | | | | |
| | - | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 2 Compensation of five highest-paid employee | | | structions). If none, e | nter '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 other allo | |
| None | | | • | | |
| | | | | | |
| | | | · · · · · · · · · · · · · · · · · · · | | |
| | | | | | |
| | | | | - | |
| | | | | | |
| Total number of other employees paid over \$50,000 | TEEA0306L | 12/05/11 | <u> </u> | | 0 - PF (2011) |

36-4479217

PartXXII Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes. 1 a 826,461. a Average monthly fair market value of securities **b** Average of monthly cash balances 1 b 1 c c Fair market value of all other assets (see instructions) 826,461 d Total (add lines 1a, b, and c) 1 d e Reduction claimed for blockage or other factors reported on lines 1a and 1c 0. (attach detailed explanation) 1e 0. 2 Acquisition indebtedness applicable to line 1 assets Subtract line 2 from line 1d 3 826,461. Cash deemed held for charitable activities. Enter 1-1/2% of line 3 4 12,397. (for greater amount, see instructions) 5 814,064. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 40,703. Minimum investment return. Enter 5% of line 5. 6 Partix Distributable Amount (see instructions) (Section 4942(i)(3) and (i)(5) private operating foundations and certain foreign organizations check here \bigcup \square and do not complete this part.) Minimum investment return from Part X, line 6 1 40,703. 617 2a 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) 2b 2 c 617. c Add lines 2a and 2b 3 Distributable amount before adjustments Subtract line 2c from line 1 3 40,086. Recoveries of amounts treated as qualifying distributions 4 5 40,086. Add lines 3 and 4 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1. 7 40,086. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes a Expenses, contributions, gifts, etc.— total from Part I, column (d), line 26 1 a 41,848. 1 b **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 2 1 Amounts set aside for specific charitable projects that satisfy the. a Suitability test (prior IRS approval required) 3a **b** Cash distribution test (attach the required schedule). 3 b 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 41,848 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions) 5 Adjusted qualifying distributions. Subtract line 5 from line 4 6 41,848.

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

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Form 990-PF (2011)

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Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2010 | (c) 2010 | (d) 2011 |
|---|----------------------|-----------------------------------|--------------------|---------------------------|
| Distributable amount for 2011 from Part XI, line 7 | | | | 40,086. |
| 2 Undistributed income, if any, as of the end of 2011 | | | | 107,000. |
| a Enter amount for 2010 only | | | 0. | |
| b Total for prior years. 20, 20, 20 | | 0. | | <u> </u> |
| 3 Excess distributions carryover, if any, to 2011 | | | Ì | |
| a From 2006 | | | | |
| b From 2007 12, 275. | | | | |
| c From 2008 | | | | |
| d From 2009 542. | | | | |
| e From 2010 7,765. | | | | |
| f Total of lines 3a through e. | 20,582. | | | |
| 4 Qualifying distributions for 2011 from Part | | | | |
| XII, line 4· ► \$ 41,848. | | | | |
| 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. | | | t |
| d Applied to 2011 distributable amount | | | | 40,086. |
| e Remaining amount distributed out of corpus | 1,762. | | | |
| 5 Excess distributions carryover applied to 2011 | 0. | | | 0. |
| (If an amount appears ın column (d), the same amount must be shown ın column (a)) | | | ļ | 1 |
| | | | | r |
| 6 Enter the net total of each column as | | | | 1 |
| indicated below: | | | | |
| a Corpus. Add lines 3f, 4c, and 4e Subtract line 5. | 22,344. | | | <u> </u> |
| b Prior years' undistributed income Subtract | | 0. | | |
| 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. | | |
| , , | | <u> </u> | | · · · · - |
| 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 instructions | | | 0. | |
| | | | | |
| f Undistributed income for 2011 Subtract lines 4d and 5 from line 1. This amount must be | | | | |
| distributed in 2012 | | | | 0. |
| 7 Amounts treated as distributions out of | 1 | | | |
| corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) | | | | 1 |
| (see instructions) | 0. | | | |
| 8 Excess distributions carryover from 2006 not | | | | |
| applied on line 5 or line 7 (see instructions) | 0. | | | |
| 9 Excess distributions carryover to 2012. | | | | 1 |
| Subtract lines 7 and 8 from line 6a | 22,344. | | | |
| 10 Analysis of line 9 | | | | |
| a Excess from 2007 12, 275. b Excess from 2008 | | | | 1 |
| c Excess from 2009 542. | |] | | |
| d Excess from 2010 7,765. | i | | | |
| e Excess from 2011 1,762. | | | | |
| e Lacess Holli 2011 1, 702. | <u> </u> | | | Form 900 PE (2011) |

| Form 990-PF (2011) IRVING & MARILYN | | | LVII A supplier | 0) | N/A |
|---|--------------------------------|--|--|---|------------------------------------|
| Part XIV Private Operating Foundat | | | | | N/A |
| 1a If the foundation has received a ruling or on is effective for 2011, enter the date of the | ietermination letter ruling | that it is a private | operating foundation | i, and the running | |
| b Check box to indicate whether the foundat | | rating foundation of | lescribed in section | 4942(j)(3) or | 4942(j)(5) |
| 2a Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | |
| income from Part I or the minimum investment return from Part X for | (a) 2011 | (b) 2010 | (c) 2009 | (d) 2008 | (e) Total |
| 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 | | | | | |
| Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c | | | | | |
| 3 Complete 3a, b, or c for the alternative test relied upon: | | | | | |
| a 'Assets' alternative test — enter. | | | | | |
| (1) Value of all assets | | | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed | | | | | |
| c 'Support' alternative test — enter | | | | | |
| (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) | | | | | |
| | | | - | | |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III). | | | | | |
| (3) Largest amount of support from an exempt organization | | | | | |
| (4) Gross investment income | | | <u> </u> | | |
| PantiXXV Supplementary Information assets at any time during th | (Complete this | part only if the | organization ha | ad \$5,000 or moi | re in |
| 1 Information Regarding Foundation Management | | istructions.) | | | |
| a List any managers of the foundation who led close of any tax year (but only if they have None | nave contributed m | ore than 2% of the than \$5,000) (See | total contributions resection 507(d)(2)) | eceived by the foun | dation before the |
| b List any managers of the foundation who | own 10% or more of | of the stock of a co | rporation (or an equ | ally large portion of | the ownership of |
| a partnership or other entity) of which the None | foundation has a 1 | 0% or greater inter | rest | | |
| 2 Information Regarding Contribution, Gran | nt. Gift. Loan. Scho | olarship, etc. Progr | ams: | | |
| Check here X if the foundation only requests for funds. If the foundation make complete items 2a, b, c, and d | nakes contributions | to preselected cha | arıtable organization | s and does not acce anizations under oth | ept unsolicited ner conditions, |
| a The name, address, and telephone number | er of the person to | whom applications | should be addresse | d | |
| | | | | | |
| | | | | | |
| b The form in which applications should be | submitted and info | rmation and materi | als they should inclu | ude | |
| c Any submission deadlines: | | | | | |
| | | -hand and the | ala Kalda III-da I | | footoro |
| d Any restrictions or limitations on awards, | sucn as by geograp | onicai areas, charit | able Heids, KINDS OF | msutunons, or other | Idulois |
| | | | | | |

Page 11

| 3 Grants and Contributions Paid During the Year or Approved for Future 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) | substantial contributor | recipient | | | | | | |
| a Paid during the year | Substantial Contributor | | | | | | | |
| Total | 1 | | <u> </u> | | | | | |
| b Approved for future payment | 1 | | <u>► 3a</u> | | | | | |
| | | | | | | | | |
| Total | | | ► 3b | 4 | | | | |

Part XVI-A Analysis of Income-Producing Activities

| Enter gross amounts unless otherwise indicated | Unrelated | business income | Excluded by | section 512, 513, or 514 | (e) |
|--|-------------------------|----------------------|-------------------------------|--------------------------|--|
| Program service revenue | (a) Business code | (b) Amount | (c) Exclu- sion code | (d) Amount | Related or exempt function income (See instructions) |
| a | | · · | | | |
| b | | | | | • |
| c | | , | | | · |
| d | | * | | | |
| e | | | | | · · · · · |
| f | | | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash investments | | | | | |
| 4 Dividends and interest from securities | | | | 25,778. | |
| 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 | | | <u> </u> | | 16,753. |
| 9 Net income or (loss) from special events | | | | | |
| 10 Gross profit or (loss) from sales of inventory | | | | | |
| 11 Other revenue | | | | | |
| a | | | | | |
| b | | | | | |
| c | | | | | |
| d | | | \perp | | |
| е | _ | | <u> </u> | | |
| 12 Subtotal Add columns (b), (d), and (e) | | | | 25,778. | 16,753. |
| 13 Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 42,531. |
| (See worksheet in line 13 instructions to verify calcul | ations) | | | | |

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

| Line No. ▼ | Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions) |
|---------------|---|
| N/A | |
| | |
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Form 990-PF (2011) IRVING & MARILYN L. NAIDITCH FAMILY 36-4479217 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

| | | | | | · | | | | V | N- |
|---|--|--|---------------------------------------|--|------------------------|---|----------------------------------|------------------------|---------------|------------|
| described | organization directly d in section 501(c) | of the Code (ot | ngage in any of t her than section | the following wit 501(c)(3) organ | h any oth izations) | er organization or in section 5 | n 527, | | Yes | No |
| | to political organiza | | | | | | | | | , |
| a Transfers from the reporting foundation to a noncharitable exempt organization of | | | | | | | | 1a(1) | | |
| • | (1) Cash . | | | | | | | | | <u>X</u> |
| (2) Othe | r assets | | | | | | | 1 a (2) | | _X_ |
| b Other tra | | | | | | | | | | |
| | s of assets to a nor | | , • | | | | | 1b(1) | | <u>X</u> |
| (2) Purc | hases of assets fro | m a noncharita | ble exempt orga | nızatıon | | | | 1 b (2) | | Χ |
| (3) Rent | al of facilities, equi | pment, or othe | r assets | | | | | 1 b (3) | | <u>X</u> _ |
| (4) Reim | nbursement arrange | ements | | | | | | 1 b (4) | | X |
| (5) Loan | is or loan guarantee | es | | | | | | 1 b (5) | | <u>X</u> |
| (6) Perfo | ormance of services | s or membershi | p or fundraising | solicitations | | | | 1 b (6) | | <u>X</u> |
| c Sharing o | of facilities, equipm | ient, mailing lis | ts, other assets, | or paid employe | ees | | | 1 c | <u> </u> | <u>X</u> _ |
| | | | | | | | | | | |
| the good | swer to any of the a ls, other assets, or s saction or sharing a | services given | by the reporting | foundation. If th | e foundat | ion received le | ess than fair marke | t value in | ue ot | |
| (a) Line no | (b) Amount involved | | f noncharitable exem | | | | sfers, transactions, and s | | naement | <u> </u> |
| N/A | (=) / | 1 | | J | | <u> </u> | | <u> </u> | | |
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| | | | | | | | | | | |
| 2a Is the for | undation directly or d in section 501(c) | indirectly affilia | ated with, or rela | ted to, one or m | ore tax-e | xempt organiz | ations | | s [X] | Na |
| | | • | ner man section | 501(0)(3)) 01 111 | section 5 | 127 ! | | ☐ res | • 🔼 | INO |
| | complete the follow Name of organizat | | (b) T | | 1 | | \ Danasataa = -{!s | A. a. a. b | | |
| <u>(a)</u> N/A | i Name or organizat | lion | (в) туре | of organization | | | Description of rela | шопѕпір | | |
| <u> </u> | | | | | | | | | | |
| | | | | - | | | | | | |
| | ·· | | | | | | | | | |
| | | | | | | | | | | |
| Titara | | | | | | -1-1 | 46-6-4-4 | | | |
| | enalties of perjury, I decla and complete. Declaration | of preparer (other t | than taxpayer) is base | ing accompanying sci d on all information o | f which prepared | statements, and to arer has any know | the best of my knowledge edge | | | |
| Sign | X. $-$ | 5 1:A | -/ | | | • | | May the this retur | IRS disc | uss ne |
| Here(▶ <u> </u> | 1/m // | edWh | | 5-14-12 | <u>-</u> _▶_ | PRES | | preparer (see insti | shown t | elow |
| Signa | | | | Date | Title | | | X | Yes | No |
| | Print/Type preparer's na | ime | Preparer's s | | 1 000 | Date | Check If | PTIN | | |
| Paid | HAL D. ROSE | TH | HAL D | HOBBERT ! | CPA | 5-10-1 | self-employed | P00399 | <u> 505</u> 6 | |
| Preparer | Firm's name | H.D. ROSET | H & ASSOCI | ATES, LTD | | | Firm's EIN ► 36-34 | 166704 | | |
| Use Only | Firm's address | 302 SAUNDE | RS RD. STE | 200 | | | | | | |
| | | RIVERWOODS | | | | | Phone no 847- | 597 - 19 | 70 | |
| BAA | | | | | | | | Form 99 | | (2011) |
| | | | | | | | | | | |

Federal Statements IRVING & MARILYN L. NAIDITCH FAMILY FOUNDATION

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| Statement 1 | |
|---------------------------|-----|
| Form 990-PF, Part I, Line | 16b |
| Accounting Fees | |

| | | | (a) Expenses per Books | (b) Net Investment Income | (c) Adjusted <u>Net Income</u> | (d) Charitable Purposes |
|------------|----|-------|------------------------------|---------------------------------|--------------------------------------|-------------------------------|
| ACCOUNTING | •• | Total | \$ 700. \$ 700. | \$ 700. \$ 700. | \$ 0. | \$ 0. |

Statement 2 Form 990-PF, Part I, Line 18 Taxes

| | | (a) Expenses <u>per Books</u> | (b) Net Investment <u>Income</u> | (c) Adjusted Net Income | (d) Charitable <u>Purposes</u> |
|--------------------|-------|-------------------------------------|--|-------------------------------|--------------------------------------|
| FEDERAL INCOME TAX | Total | \$ 3,275. \$ 3,275. | \$ 3,275. \$ 3,275. | \$ 0. | \$ 0. |

Statement 3 Form 990-PF, Part I, Line 23 Other Expenses

| | | | (a) | | (b) Net | (c) | | (d) |
|--------------|-------|------------|--------|-----|----------|------------|----------|------------------|
| | | Exp | enses | Inv | vestment | Adjusted | | Charitable |
| | | <u>per</u> | Books | | Income | Net Income | | <u> Purposes</u> |
| FEES | | \$ | 25. | \$ | 25. | | | |
| MANAGEMENT F | | | 7,697. | | 7,697. | | | |
| | Total | \$ | 7,722. | \$ | 7,722. | \$ 0. | <u> </u> | 0. |

Statement 4 Form 990-PF, Part I, Line 25 Contributions, Gifts, and Grants

Cash Grants and Allocations

Class of Activity: Donee's Name: Donee's Address:

TEMPLE BETH ISRAEL 567 BAY ISLES ROAD LONGBOAT KEY, FL 34228

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

\$ 810.

Class of Activity: Donee's Name: Donee's Address:

EPILEPSY FOUNDATION P O BOX 96546 WASHINGTON, DC 20077

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

200.

2011

Federal Statements IRVING & MARILYN L. NAIDITCH FAMILY FOUNDATION

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1,000.

1,800.

500.

800.

Statement 4 (continued) Form 990-PF, Part I, Line 25 Contributions, Gifts, and Grants

Class of Activity: Donee's Name: Donee's Address:

Relationship of Donee:

Organizational Status of Donee: Amount Given:

Class of Activity: Donee's Name: Donee's Address:

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

Class of Activity:

Donee's Name: Donee's Address:

Relationship of Donee:

Organizational Status of Donee:

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Class of Activity:

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Class of Activity:

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Relationship of Donee: Organizational Status of Donee:

Amount Given:

Class of Activity:

Donee's Name:

Donee's Address:

Relationship of Donee: Organizational Status of Donee:

Amount Given:

Class of Activity:

JEWISH FAMILY & CHILDREN'S SERVICES

2688 FRUITVILLE ROAD

SARASOTA, FL 34237

6,600. Ś

JUF EMERGENCY FUND

30 S. WELLS ST.

CHICAGO, IL 60606

ISRAEL CHILDREN'S CENTERS 3275 W. HILLSBORO BLVD.

DEERFIELD BEACH, FL 33442

SHRINERS HOSPITALS 600 N. BENEVA ROAD

SARASOTA, FL 34232

AMERICAN TECHNION SOCIETY 2146 TALL OAK COURT

SARASOTA, FL 34232

ST. JUDE RESEARCH HOSPITAL 501 ST. JUDE PLACE MEMPHIS, TN 38105

250.

GWIZ SCIENCE MUSEUM

1001 BLVD. OF THE ARTS SARASOTA, FL 34236

3,500.

2011

Federal Statements IRVING & MARILYN L. NAIDITCH FAMILY FOUNDATION

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Statement 4 (continued) Form 990-PF, Part I, Line 25 Contributions, Gifts, and Grants

Donee's Name: Donee's Address: PLANNED PARENTHOOD 736 CENTRAL AVE. SARASOTA, FL 34236

Relationship of Donee:

Organizational Status of Donee: Amount Given:

1,840. Ś

Class of Activity: Donee's Name:

SARASOTA ORCHESTRA Donee's Address: 709 N. TAMIAMI TRAIL SARASOTA, FL 34237

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

1,578.

Class of Activity: Donee's Name: Donee's Address:

DOCTORS WITHOUT BORDERS P O BOX 5022 HAGERSTOWN, MD 21741

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

250.

Class of Activity: Donee's Name: Donee's Address:

MISERICORDIA 6300 N. RIDGE CHICAGO, IL 60660

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

200.

Class of Activity: Donee's Name: Donee's Address:

UNITED NEGRO COLLEGE FUND 1080 WOODCOCK RD, SUITE 280 ORLANDO, FL 32803

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

100.

Class of Activity: Donee's Name:

Donee's Address:

CATHOLIC CHARITIES 5055 N. TAMIANI TRAIL SARASOTA, FL 34236

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

470.

Class of Activity: Donee's Name: Donee's Address:

BOYS & GIRLS CLUBS/SARASOTA

P O BOX 4068

SARASOTA, FL 34230

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

5,000.

Class of Activity:

Donee's Name:

US NAVY LEAGUE-SARASOTA

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|---|---|----------------|
| | FOUNDATION | 36-4479217 |
| Statement 4 (continued) Form 990-PF, Part I, Line 25 Contributions, Gifts, and Grants | | |
| Donee's Address: | 10571 OLD GROVE CTR BRADENTON, FL 34212 | |
| Relationship of Donee: Organizational Status of Done Amount Given: | | \$ 250. |
| Class of Activity: Donee's Name: Donee's Address: | AMERICAN JEWISH COMMITTEE 1650 MAIN ST SUITE 612 SARASOTA, FL 34236 | |
| Relationship of Donee: Organizational Status of Done Amount Given: | e: | 1,820. |
| Class of Activity: Donee's Name: Donee's Address: | SUNSHINE FROM DARKNESS PO BOX 49201 SARASOTA, FL 34230 | |
| Relationship of Donee: Organizational Status of Done Amount Given: | | 450. |
| Class of Activity: Donee's Name: Donee's Address: | BOYS & GIRLS CLUB SHOWHOUSE 1014 EAST AVE N SARASOTA, FL 34234 | |
| Relationship of Donee: Organizational Status of Done Amount Given: | e: | 600. |
| Class of Activity: Donee's Name: Donee's Address: | JEWISH HOUSING COUNCIL FDTN 1851 N. HONORE AVE. SARASOTA, FL 34236 | |
| Relationship of Donee: Organizational Status of Done Amount Given: | | 730. |
| Class of Activity: Donee's Name: Donee's Address: | ST. JUDE CATHOLIC CHURCH 4639 GLEVE FARM ROAD | |
| Relationship of Donee: Organizational Status of Done Amount Given: | SARASOTA, FL 34235 e: | 100. |
| Class of Activity: Donee's Name: Donee's Address: | EMBRACING OUR DIFFERENCES PO BOX 2559 SARASOTA, FL 34230 | |
| Relationship of Donee: | J | |

Relationship of Donee: Organizational Status of Donee: Amount Given:

Class of Activity: Donee's Name:

Donee's Address:

SYBARITE CHAMBER PLAYERS 720 W. 181ST #46

1,500.

2011

Federal Statements IRVING & MARILYN L. NAIDITCH FAMILY FOUNDATION

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Statement 4 (continued) Form 990-PF, Part I, Line 25 **Contributions, Gifts, and Grants**

NEW YORK, NY 10033

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

100.

Class of Activity:

Donee's Name: Donee's Address: CANCERS SUPPORT COMMUNITY 5481 COMMUNICATIONS PKWY

SARASOTA, FL 34240

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

100.

Class of Activity:

Donee's Name: Donee's Address: INST. OF PUERTO RICAN ARTS & CULTURE

3015 W. DIVISION ST.

CHICAGO, IL

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

500.

Class of Activity: Donee's Name:

Donee's Address:

GLASER/SCHOENBAUM HUMAN SVC CTR

1750 17TH ST BLDG J-1 SARASOTA, FL 34234

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

1,000.

Class of Activity:

Donee's Name: Donee's Address:

EMERGENCY FUND

651 W. WASHINGTON #504

CHICAGO, IL 60661

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

1,000.

Class of Activity:

Donee's Name:

Donee's Address:

DESIGNING WOMEN

1226 N. TAMIAMI TRAIL

SARASOTA, FL 34236

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

550.

2,500.

Class of Activity:

Donee's Name: Donee's Address:

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

WESTCOAST BLACK THEATRE TROUPE

PO BOX 1086

SARASOTA, FL 34230

Class of Activity:

Donee's Name:

Donee's Address:

SARASOTA OPERA 61 N. PINEAPPLE SARASOTA, FL 34236

| Statement 4 (continued) Form 990-PF, Part Line 25 Contributions, Giffs, and Grants Relationship of Donee: Organizational Status of Donee: Amount Given: Class of Activity: Donee's Name: Donee's Address: Class of Activity: Donee's Address: Relationship of Donee: Organizational Status of Donee: Amount Given: Class of Activity: Donee's Name: Donee's Address: Class of Activity: Donee's Name: Donee's Name: Donee's Address: Relationship of Donee: Organizational Status of Donee: Amount Given: Class of Activity: Donee's Name: Donee's Address: Class of Activity: Donee's Name: Donee's Address: CTR CATHOLIC JEWISH STUDIES PO BOX 6665 - MC2460 SAINT LEO, FL 33574 CTR CATHOLIC JEWISH STUDIES PO BOX 6665 - MC2460 SAINT LEO, FL 33574 Relationship of Donee: Organizational Status of Donee: Amount Given: Class of Activity: Donee's Name: Donee's Address: Class of Activity: Donee's Name: Donee's Address: Relationship of Donee: Organizational Status of Donee: Amount Given: Class of Activity: Donee's Name: Donee's Address: CTR CATHOLIC JEWISH STUDIES PO BOX 6665 - MC2460 SAINT LEO, FL 33574 SPECIAL OLYMPICS/IL PO BOX 699 NORMAL, IL 61761 | |
|--|------|
| Organizational Status of Donee: Amount Given: Class of Activity: Donee's Name: Donee's Address: Relationship of Donee: Organizational Status of Donee: Amount Given: Class of Activity: Donee's Name: Donee's Address: Relationship of Donee: Organizational Status of Donee: Amount Given: Class of Activity: Donee's Name: Donee's Name: Donee's Address: Relationship of Donee: Organizational Status of Donee: Amount Given: Class of Activity: Donee's Name: Donee's Address: Class of Activity: Donee's Name: Donee's Address: Class of Activity: Donee's Name: Donee's Name: Donee's Address: Class of Activity: Donee's Name: Donee's Address: CTR CATHOLIC JEWISH STUDIES PO BOX 6665 - MC2460 SAINT LEO, FL 33574 CTR CATHOLIC JEWISH STUDIES PO BOX 6665 - MC2460 SAINT LEO, FL 33574 SPECIAL OLYMPICS/IL PO BOX 699 NORMAL, IL 61761 | |
| Donee's Name: Donee's Address: Donee's Address: Relationship of Donee: Organizational Status of Donee: Amount Given: Class of Activity: Donee's Name: Donee's Address: Class of Activity: Donee's Name: Donee's Address: Class of Activity: Donee's Name: Donee's Address: Class of Activity: Donee's Name: Donee's Nam | 750. |
| Relationship of Donee: Organizational Status of Donee: Amount Given: Class of Activity: Donee's Name: Donee's Address: Relationship of Donee: Organizational Status of Donee: Amount Given: Class of Activity: Donee's Name: Donee's Name: Donee's Address: Relationship of Donee: Organizational Status of Donee: Amount Given: Class of Activity: Donee's Name: Donee's Name: Class of Activity: Donee's Name: Cranizational Status of Donee: Amount Given: Class of Activity: Donee's Name: Class of Activity: Donee's Name: Donee's Address: CTR CATHOLIC JEWISH STUDIES PO BOX 6665 - MC2460 SAINT LEO, FL 33574 Relationship of Donee: Organizational Status of Donee: Amount Given: Class of Activity: Donee's Name: Donee's Address: Class of Activity: Donee's Name: Donee's Name: Donee's Address: Class of Activity: Donee's Name: | |
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| Relationship of Donee: Organizational Status of Donee: Amount Given: Class of Activity: Donee's Name: Donee's Address: Relationship of Donee: Organizational Status of Donee: Amount Given: Class of Activity: Donee's Name: Donee's Name: Donee's Address: SPECIAL OLYMPICS/IL Donee's Address: PO BOX 699 NORMAL, IL 61761 Relationship of Donee: Organizational Status of Donee: | |
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| Relationship of Donee: Organizational Status of Donee: Amount Given: Class of Activity: Donee's Name: Donee's Address: PO BOX 699 NORMAL, IL 61761 Relationship of Donee: Organizational Status of Donee: | |
| Donee's Name: SPECIAL OLYMPICS/IL Donee's Address: PO BOX 699 NORMAL, IL 61761 Relationship of Donee: Organizational Status of Donee: | 500. |
| Relationship of Donee: Organizational Status of Donee: | |
| Amount Given. | 100. |
| Class of Activity: Donee's Name: Donee's Address: CHICAGO, IL 60645 | |
| Relationship of Donee: Organizational Status of Donee: Amount Given: | 100. |
| Class of Activity: Donee's Name: Donee's Address: MARCH OF DIMES PO BOX 2547 DECATUR, IL 62525 | |

Relationship of Donee:

| 2011 | Federal Statements IRVING & MARILYN L. NAIDITCH FAMILY FOUNDATION | Page 7 36-4479217 |
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| Statement 4 (continued) Form 990-PF, Part I, Line 25 Contributions, Gifts, and Gra | | |
| Organizational Status o Amount Given: | of Donee: | \$ 200. |
| Class of Activity: Donee's Name: Donee's Address: | LITERARY COUNCIL/SARASOTA 1750-17TH ST - BLDG D SARASOTA, FL 34234 | |
| Relationship of Donee: Organizational Status o Amount Given: | | 100. |
| Class of Activity: Donee's Name: Donee's Address: | CHILDREN'S FIRST 1723 N. ORANGE SARASOTA, FL 34234 | |
| Relationship of Donee: Organizational Status o Amount Given: | | 100. |
| Class of Activity: Donee's Name: Donee's Address: | BIRTHRIGHT ISRAEL FDTN PO BOX 5892 HICKSVILLE, NY 11802 | |
| Relationship of Donee: Organizational Status o Amount Given: | | 100. |
| Class of Activity: Donee's Name: Donee's Address: | HILLEL PO BOX 92994 WASHINGTON DC 20090 | |
| Relationship of Donee: Organizational Status o Amount Given: | | 100. |
| Class of Activity: Donee's Name: Donee's Address: | ALS ASSOC PO BOX 6051 ALBERT LEA, MN 56007 | |
| Relationship of Donee: Organizational Status o Amount Given: | · · | 200. |
| Class of Activity: Donee's Name: Donee's Address: | JEWISH GUILD FOR BLIND 15 WE. 65TH ST | |
| Relationship of Donee: Organizational Status o Amount Given: | NEW YORK, NY 10023 of Donee: | 100. |
| Class of Activity: Donee's Name: Donee's Address: | EASTER SEALS PO BOX 909726 | |
| Relationship of Donee: Organizational Status (| | |

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| 2011 | Federal Statements IRVING & MARILYN L. NAIDITCH FAMILY FOUNDATION | | |
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| Statement 4 (continued) Form 990-PF, Part I, Line 25 Contributions, Gifts, and Gra | ents | | |
| Amount Given: | | \$ | 100. |
| Class of Activity: Donee's Name: Donee's Address: | GUIDE DOG FDTN FOR BLIND 371 E. MAIN ST SMITHTOWN, NY 11787 | | |
| Relationship of Donee: Organizational Status o Amount Given: | of Donee: | | 100. |
| Class of Activity: Donee's Name: Donee's Address: | ANAD PO BOX 640 NAPERVILLE, IL 60566 | | |
| Relationship of Donee: Organizational Status o Amount Given: | | | 100. |
| Class of Activity: Donee's Name: Donee's Address: | COMMUNITY FAMILY CENTER 580 ROGER WILLIAMS AVE HIGHLAND PARK, IL 60035 | | |
| Relationship of Donee: Organizational Status o Amount Given: | | | 100. |
| Class of Activity: Donee's Name: Donee's Address: | UNIV CALIF IRVINE GIFT FDTN 100 THEORY #250 IRVINE, CA 92617 | | |
| Relationship of Donee: Organizational Status o Amount Given: | | | 1,000. |
| Class of Activity: Donee's Name: Donee's Address: | OHIO STATE UNIV DEV FUND 1645 NELL AVE COLUMBUS, OH 43210 | | |
| Relationship of Donee: Organizational Status o Amount Given: | | | 1,000. |
| Class of Activity: Donee's Name: Donee's Address: | AMERICAN FRIENDS OF KENYA 150 YANTIC ST #142 NORWICH, CT 06360 | | |
| Relationship of Donee: Organizational Status o Amount Given: | · | | 500. |
| Class of Activity: Donee's Name: Donee's Address: | LARABIDA CHILD HOSPITAL EAST 65TH AT LAKE MICHIGAN CHICAGO, IL 60649 | | |
| Relationship of Donee: Organizational Status o | · · | | |

20¹1 Page 9 **Federal Statements** IRVING & MARILYN L. NAIDITCH FAMILY FOUNDATION 36-4479217 Statement 4 (continued) Form 990-PF, Part I, Line 25 Contributions, Gifts, and Grants \$ Amount Given: -100. 41,848. Total \$