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Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
on may be able to use a copy of this return to satisfy state rec

OMB No 1545-0052

-	THE STATE OF		ne roundation may	22 3010 1	o doo a dopy o				ig roquironionio		
<u> </u>		calendar year 2011 or tax	year beginning		<del></del>	, 2011	, and ending			<del> </del>	, 20
		me of foundation						A	Employer identif		Ðr
_	LA	VIN FAMILY FOUNDAY	rion						36-6106074		
	Nur	mber and street (or P O box nur	mber if mail is not deliv	ered to stre	et address)		Room/suite	В	Telephone numb	er (see instruc	tions)
_	50	01 SW 27TH AVE			· · · · · · · · · · · · · · · · · · ·						
	City	y or town, state, and ZIP code									
	OC.	ALA, FL 34474						C	If exemption applic pending, check here	ation is	▶∐
7			nitial return		Initial return	of a former p	ublic charity	∄_			
•	<b>,</b> 0,	· · · · · · · · · · · · · · · · · · ·	inal return	<del> </del>	Amended re	•	dono charty	'   B	1. Foreign organiza		
_			ddress change		Name chang				2. Foreign organiza 85% test, check in computation	here and attach	
H	$\overline{}$	neck type of organization						Ε	If private foundatio		
1		Section 4947(a)(1) nonexemp				rivate foundat		4	under section 507(b	)(1)(A), check he	re . ▶ 📖
ı		ur market value of all assets	1	_		ash Acc	rual	F	If the foundation is	ın a 60-month te	mination
		year (from Part II, col. (c), lii i) ▶ \$ 66, 283, 44		ther (spe		n cash basis )		-	under section 507(b	)(1)(B), check he	. ▶
		Analysis of Revenue an		1	(a) made be or	1	1			(d) Dishu	reamonte
	aru	total of amounts in columns may not necessarily equal ti column (a) (see instructions)	(b), (c), and (d) he amounts in	exp	evenue and enses per books	(b) Net inve			djusted net income		
-	1	Contributions, gifts, grants, etc., receiv	ed (attach schedule)							(000)1100	iolo orny)
	2	Check In the foundation attach Sch B	n is <b>not</b> required to		- 		•				
	3	Interest on savings and temporal		1	,147,133		2,476.			ATCH	1
	4	Dividends and interest from	securities		406,007	400	5,007.			ATCH	2
	5 a	Gross rents									
	1	Net rental income or (loss)							RECEI\	VFD	
9	6 a	Net gain or (loss) from sale of as	sets not on line 10	27	,247,172.			_			,
Revenue	b	Gross sales price for all assets on line 6a	73,177,323.					9			
ě.	7	Capital gain net income (from		,		27,247	7,172.	2	JUN 0 4	2012	?
œ ,	8	Net short-term capital gain	. 1							6	2
	9	Income modifications · · ·		, .		,	· ·		OGDEN		=
	-	Gross sales less returns				<del></del>		L	COULIN	<del>, U 1</del>	
		and allowances · · · · Less Cost of goods sold		<del>,</del>	•		<del></del>				
	i	Gross profit or (loss) (attach s	chadula)			<u> </u>	· · · · · · · · · · · · · · · · · · ·				·
- 1		Other income (attach schedu			7,282.	7	,282.			ATCH	3
	12	Total. Add lines 1 through 11	4	28	,807,594.	28,752				AICH	<del></del>
$\dashv$					0		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
- !		Compensation of officers, director Other employee salaries and				· · · · · · · · · · · · · · · · · · ·					
န္မ	14	• •	- г								
Š	15	Pension plans, employee ben			5,255.		,255.				
8	тьа.	Legal fees (attach schedule)			30,250.		,250.				<del></del>
ű,	þ	Accounting fees (attach sche			30,230.		,230.			<del></del>	
<b>%</b>	C	Other professional fees (attac							-		<del></del>
E	17	Interest	كد ـــ		25.	<del></del>					
S	18	Taxes (attach schedule) (see instruc			23.						<del></del>
Ē	19	Depreciation (attach schedul	· · · · · ·								<del></del>
PA	20	Occupancy									
ġ	21	Travel, conferences, and mee	ľ	··-		<del> </del>					<del></del>
<u>ē</u>	22	Printing and publications				<del></del> =	112				
Ĕ	23	Other expenses (attach sched	ule) ATCH /.		5,442.	5	,442.				
ē	24	Total operating and adminis	- 1		40 000				ļ		
Operating and Administrative Expenses		Add lines 13 through 23			40,972.	40	,947.				
۲):	25	Contributions, gifts, grants pa	ıd		591,500.	·					591,500
- 1		Total expenses and disbursements A	dd lines 24 and 25	2,	632,472.	40	,947.		Q	2,5	591,500
2	27	Subtract line 26 from line 12		<u> </u>		· · <del></del>	F -				
	а	Excess of revenue over expenses and	disbursements	26,	175,122.	· · · · · · · · · · · · · · · · · · ·					··-
-	b	Net investment income (if ne	gative, enter -0-)			28,711	,990.				
ı		Adjusted not income (if pegal	tive enter 0.\					_			

Part I	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	f year
	amounts only (See Instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing		10 011 610	10.040.075
2	Savings and temporary cash investments	728,758.	10,911,612.	10,849,073
3	Accounts receivable			
	Less allowance for doubtful accounts ▶			<del></del>
4	Pledges receivable			,
1	Less: allowance for doubtful accounts ▶			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
-	disqualified persons (attach schedule) (see instructions)			
7	Other notes and loans receivable (attach schedule)			
	Less allowance for doubtful accounts ▶			
ø 8	Inventories for sale or use			
	Prepaid expenses and deferred charges			
₩ 10 a	Investments - U S and state government obligations (attach schedule). **	25,783,185.		
	Investments - corporate stock (attach schedule) ATCH 9	13,548,082.	16,998,741.	17,504,308
c	Investments - corporate bonds (attach schedule) ATCH 10		28,389,741.	28,396,758
11	Investments - land, buildings, and equipment basis Less accumulated depreciation (attach schedule)		· · · · · · · · · · · · · · · · · · ·	
	Investments - mortgage loans			
13	Investments - other (attach schedule)			
	Land, buildings, and equipment basis			
	Less accumulated depreciation (attach schedule)			
	Other assets (describe			
	Total assets (to be completed by all filers - see the			
<u> </u>	ınstructions Also, see page 1, ıtem I)	40,060,025.	65,718,937.	66,283,443
17	Accounts payable and accrued expenses			
18	Grants payable			
ខ្លា 19	Deferred revenue			
<b>≣</b>  20	Loans from officers, directors, trustees, and other disqualified persons			
19 20 21	Mortgages and other notes payable (attach schedule)			
J <sub>22</sub>	Other liabilities (describe			•
23_	Total liabilities (add lines 17 through 22)	0	O	
	Foundations that follow SFAS 117, check here			,
I I	and complete lines 24 through 26 and lines 30 and 31.			
8 24 I	Unrestricted			
21 -	Temporarily restricted			
26	Permanently restricted			
	Foundations that do not follow SFAS 117,			
	check here and complete lines 27 through 31.			
	Capital stock, trust principal, or current funds	40,060,025.	65,718,937.	
	Paid-in or capital surplus, or land, bldg , and equipment fund			
اس	Retained earnings, accumulated income, endowment, or other funds			
حمدالة	Fotal net assets or fund balances (see instructions)	40,060,025.	65,718,937.	•
a. I	Fotal liabilities and net assets/fund balances (see	10,000,000		v
	·	40,060,025.	65,718,937.	
Dart III	Analysis of Changes in Net Assets or Fund E		03/110/337.	<del> </del>
	net assets or fund balances at beginning of year - Part I		vuot aaroa vuth	
				40,060,025.
End-01	f-year figure reported on prior year's return)	• • • • • • • • • • • • • • • • • • • •		26,175,122
Enter	amount from Part I, line 27a		2	40,113,142
	increases not included in line 2 (itemize) ▶			66 025 147
Add lir	nes 1, 2, and 3 ases not included in line 2 (itemize) ► ATTACHI		4	66,235,147
				516,210.
Total r	net assets or fund balances at end of year (line 4 minus lii **ברל א	ne 5) - Part II, column (b),	line 30 6	65,718,937.

LAVIN FAMILY FOUNDATION 36-6106074 Form 990-PF (2011) Page 3 Capital Gains and Losses for Tax on Investment Income (b) How (c) Date acquired (mo , day, yr ) (a) List and describe the kind(s) of property sold (e.g., real estate. (d) Date sold acquired P-Purchase (mo , day, yr ) 2-story brick warehouse, or common stock, 200 shs MLC Co ) SEE PART IV SCHEDULE b d (g) Cost or other basis (f) Depreciation allowed (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) b d е Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col (h) gain minus (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col (i) (i) F.M V. as of 12/31/69 as of 12/31/69 Losses (from col (h)) over col. (j), if any b If gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) 27,247,172. If (loss), enter -0- in Part I, line 7 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income) If section 4940(d)(2) applies, leave this part blank Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part 1 Enter the appropriate amount in each column for each year, see the instructions before making any entries (d) (c) Base period years Distribution ratio Adjusted qualifying distributions Net value of nonchantable-use assets Calendar year (or tax year beginning in) (col (b) divided by col (c)) 4,011,031. 58,529,230. 2010 0.068530

_			,,	1	0.00000
	2009	2,744,750.	56,534,960.		0.048550
	2008	1,087,095.	56,580,555.		0.019213
	2007	835,950.	55,681,556.		0.015013
_	2006	2,936,588.	44,667,774.		0.065743
2	Total of line 1, column (d)	<u></u>		2	0.217049
3	Average distribution ratio for	r the 5-year base period - divide the to tion has been in existence if less than 5	tal on line 2 by 5, or by the	3	0.043410
4	Enter the net value of nonch	4	65,883,457.		
5	Multiply line 4 by line 3			5	2,860,001.
6	Enter 1% of net investment i	ncome (1% of Part I, line 27b)		6	287,120.
7	Add lines 5 and 6			7	3,147,121.
8	Enter qualifying distributions If line 8 is equal to or great	from Part XII, line 4 er than line 7, check the box in Part	Vi, line 1b, and complete t	8 hat part us	2,591,500.
	Part VI instructions				

JSA 1E1430 1 000 Form 990-PF (2011)

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## LAVIN FAMILY FOUNDATION

3 Five highest-paid independent contractors for professional services (see instru	uctions). If none. enter "NONE	11
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NOT APPLICABLE		
		<u> </u>
otal number of others receiving over \$50,000 for professional services	· · · · · · · · · · · · · · · · · · ·	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in organizations and other beneficianes served, conferences convened, research papers produced, etc.	formation such as the number of	Expenses
1 DISTRIBUTES FUNDS TO OTHER CHARITABLE ORGANIZATIONS	- · · · · · · · · · · · · · · · · · · ·	
		2,591,500
2		
		<del></del>
3		
4		
4		
4		
art IX-B Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and	2	Amount
		Amount
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and NOT APPLICABLE		Amount
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and NOT APPLICABLE		Amount
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and NOT APPLICABLE		Amount
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and NOT APPLICABLE		Amount
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and NOT APPLICABLE		Amount
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and  NOT_APPLICABLE  2		Amount
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and  NOT APPLICABLE  All other program-related investments See instructions		Amount
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and  NOT APPLICABLE  All other program-related investments See instructions		Amount

_	art X Minimum Investment Return (All domestic foundations must complete this part. Fore	ign founda	ations,
_	see instructions.)  Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	1 1	
•	purposes.		
•	Average monthly fair market value of securities	1a	65,965,628.
b	Average of monthly cash balances		921,130.
c		1c	<u> </u>
d	Total (add lines 1a h and c)	1d	66,886,758.
e		'0	- 00,000,730.
٠	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Cultivant line O from line dul	3	66,886,758.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see	-	00,000,730.
•		4	1,003,301.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	65,883,457.
6	Minimum investment return. Enter 5% of line 5	6	3,294,173.
	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating		3,234,173.
Т 6	foundations and certain foreign organizations check here	oart )	
1	Minimum investment return from Part X, line 6	1	3,294,173.
' 2а			3,234,113.
b	Income tax for 2011 (This does not include the tax from Part VI)  2b		
		2c	574,240.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	2,719,933.
4		4	2/110/000.
<del>-</del> 5	Add lines 0 and 4	5	2,719,933.
6		6	
7	Distributable amount (see instructions)  Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		<del></del>
•		7	2,719,933.
_	line 1 · · · · · · · · · · · · · · · · · ·	<u> </u>	271137333.
Pa	rt XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	2,591,500.
b	Program related investments, total from Part IV P	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.		
•		2	
3	Amounts set aside for specific charitable projects that satisfy the	-	
a	Suitability test (prior IRS approval required)  Cash distribution test (attach the required schedule)	3a	
b	Cash distribution test (attach the required schedule)	3b	
,	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	2,591,500.
5	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	0
j	Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,591,500.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calc		
	qualifies for the section 4940(e) reduction of tax in those years		ino roundation

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	Part XIII Undistributed Income (see instr	ructions)	<del></del>		
1	Distributable amount for 2011 from Part XI,	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
	line 7				2,719,933.
2					
	a Enter amount for 2010 only			606,798.	
	b Total for pnor years 20 09 20 08 20 07				
3	Excess distributions carryover, if any, to 2011				
	a From 2006				
	<b>b</b> From 2007	] .		-	
	c From 2008	<b>1</b> ` ,		,	
	<b>d</b> From 2009			·- '	
	e From 2010			٤, ، ه	
	f Total of lines 3a through e		, , , , , , , , , , , , , , , , , , ,		, , , , , , , , , , , , , , , , , , , ,
4	Qualifying distributions for 2011 from Part XII, line 4 > \$2,591,500.				
	Applied to 2010, but not more than line 2a	*,		606,798.	
١	Applied to undistributed income of prior years (Election required - see instructions)				
' (	Treated as distributions out of corpus (Election required - see instructions)				
	Applied to 2011 distributable amount	,			1,984,702.
	Remaining amount distributed out of corpus		-		<u></u>
5	Excess distributions carryover applied to 2011		3,		
6	(If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below:			,	
	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
	·				· · · · · · · · · · · · · · · · · · ·
	Prior years' undistributed income Subtract line 4b from line 2b				
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	,			· · · · · · · · · · · · · · · · · · ·
d	Subtract line 6c from line 6b Taxable	· . `			
	amount - see instructions		,		
е	Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount - see instructions				
f	Undistributed income for 2011 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2012				735,231.
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8	Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2012.				
	Subtract lines 7 and 8 from line 6a	0			
10	Analysis of line 9.				
а	Excess from 2007	· · · · · · · · · · · · · · · · · · ·		,	
b	Excess from 2008		· · · · · · · · · · · · · · · · · · ·		
C	Excess from 2009		, ,		-
d	Excess from 2010				
<u>e</u>	Excess from 2011			<u> </u>	

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Page **11** 

Part XV Supplementary Information (	continued)			
3 Grants and Contributions Paid Duri Recipient Name and address (home or business)	ng the Year or Appi	roved for I	Future Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	7
a Paid during the year				
ATTACHMENT 14				
	1			
				1
				İ
				1
		ľ		
		Ì		
Total			▶ 3a	2,591,500.
b Approved for future payment				
		j		
		i		
		]		
		1		
			j	
Total			▶ 3b	

Page **12** 

Part XVI-A Analysis of Income-Produ		ated business income	Excluded by	section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
a			<del>- </del>		(000
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			14	1,092,476.	54,657
Dividends and interest from securities			14	406,007.	
Net rental income or (loss) from real estate					
a Debt-financed property					<del> </del>
b Not debt-financed property					····
Net rental income or (loss) from personal property .					
Other investment income			18	27 247 172	
Gain or (loss) from sales of assets other than inventory	<del></del>		10	27,247,172.	
Net income or (loss) from special events					<del></del>
Gross profit or (loss) from sales of inventory			<del> </del>		
b LEGAL FEE REIMBURSEMENT			01	7,282.	
· · · · · · · · · · · · · · · · · · ·			1 01	1,202.	
c			+		
d			-		
Subtotal. Add columns (b), (d), and (e)			1	28,752,937.	54,657
B Total. Add line 12, columns (b), (d), and (e)			1		28,807,594
Explain below how each activity accomplishment of the foundatio		•			•
		<u> </u>			

Par	t XVI	Information R Exempt Orga		ansfers To and	d Transacti	ons and	Relatio	nships With Nor	char	itable	)
•	ın se	he organization direction 501(c) of the Co	tly or indirectly		-		_			Yes	No
	_	nizations? sfers from the reportir	na foundation to	a noncharitable i	evemnt organi	ization of					
		ash							1a(1)		x
		ther assets							1a(2)		Х
		transactions									.,
	(1) S	ales of assets to a no	ncharitable exe	mpt organization					1b(1)		X
	(2) Pi	urchases of assets fro	om a noncharita	ible exempt organi	zation				1b(2)		X
	(3) N (4) R	ental of facilities, equ eimbursement arrang	ements	assets	• • • • • • •				1b(3) 1b(4)		X
	(5) Lo	pans or loan guarante	es						1b(5)		Х
	(6) Pe	erformance of service	s or membersh	np or fundraising s	solicitations				1b(6)		X
C	Sharıı	ng of facilities, equipm	nent, mailing lis	ts, other assets, o	r paid employe	ees					X
,	value	answer to any of the of the goods, other in any transaction or	assets, or servi	ces given by the	reporting fou	ındatıon. I	f the foun	dation received less	than	faır m	arke
(a) Lin	e no	(b) Amount involved	(c) Name of n	oncharitable exempt o	rganization	<del></del>	iption of trans	fers, transactions, and sha	nng arra	ngemer	ıts
		N/A	<u> </u>			N/A					
		<del></del>									
							<del></del>				
		.,	· · · · · · · · · · · · · · · · · · ·	<del></del>							
										<u></u>	
	+							<del></del>			
			<del></del>	<del></del>							
							<del></del>	·			
d	lescril	foundation directly obed in section 501(c)	of the Code (ot					t organizations	Ye	s X	No
D II	res	" complete the follow (a) Name of organization		(b) Type of	organization	<del></del> -		(c) Description of relations	hip		
	_						<del></del>				
Sign	Under	penalties of perjury, I dectar t, and complete Declaration of	e that I have examin preparer other than ta	ed this return, including expayer) is based on all info	accompanying sche	edules and streeparer has any	atements, and the knowledge				_
Here			me	Slaali	2	•		May the IRS	discuss		
	Sign	nature of officer or trustee	•	Date	7	itle		(see instruction	s)? X	Yes	_]No
	<u> </u>	Print/Type preparer's i	name	Preparer's signa	ture a	<del></del>	Date		אודי		
Paid		James ?	Breen	Vana I	T. (m .	_	2-22	Cueck [ii		5944	n
Prepa	rer	7	IG LLP	1 CANA	vive		3-66	Firm's EIN ▶ 13-5			
Use C	nly	Firm's address ▶ 303		RETVE							
		СН	CAGO, IL			6060	)1	Phone no. 312-6	<u>55-1</u> (	000	
								F,	m 990	-PF	2011)

LAVIN FAMILY FOUNDATION
FORM 990-PF - PART IV

Description or Date Date sold	Kind of Property Description			perty Description		
FMV Adj. basis Excess of Gain as of as of FMV over or 12/31/69 12/31/69 adj basis (loss)	Cost or other basis	Depreciation allowed/ allowable	Gross sale price less expenses of sale			
G-TERM COMMON TRUST FUND AND IP, S CORPORATION, AND OTHER R TRUST GAIN OR LOSS 3,098.	TOTAL LONG-					
ITAL GAIN DISTRIBUTIONS 1,199.	TOTAL CAPIT					
YNCH 6CW-04204 28304856.	MERRILL LYN		41852938.			
TNCH 6CW-04322 -324,877.	MERRILL LYN 6,491,582.		6,166,705.			
NCH 6CW-04323	MERRILL LYN 3,324,476.		3,186,235.			
TNCH 6CW-04324 -146,801.	MERRILL LYN 3,020,009.		2,873,208.			
NCH 6CW-04325	MERRILL LYN		930,362.			
NCH 6CW-04326 -16,420.	MERRILL LYNG 945,876.		929,456.			
NCH 6CW-04327	MERRILL LYNG		3,260,484.			
NCH 6CW-04328 -228,585.	MERRILL LYNG 2,566,491.		2,337,906.			
NCH 6CW-04329	MERRILL LYNG 1,351,657.		,267,963.			
99 ANNUAL STMT 56,486.	ML 7DQ-02299 3,680,777.		,737,263.			
99 ANNUAL STMT -5,872.	ML 7DQ-02299 5,245,776.		,239,904.			
99 SUPPLEMENTAL	ML 7DQ-02299 1,390,602.		,390,602.			
<u> </u>		ss)	TAL GAIN(LO			
99 SUPPLEMENTAL	5,245,776. ML 7DQ-02299 1,390,602.		5,239,904. 1,390,602. OTAL GAIN(LO			

ATTACHMENT

36-6106074

FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

REVENUE

312. 1,092,164. EXPENSES PER BOOKS AND MERRILL LYNCH NORTHERN TRUST TAX-EXEMPT INTEREST DESCRIPTION

INVESTMENT

INCOME

NET

1,092,164. 312.

1,092,476.

TOTAL

1,147,133.

V 11-4.5

ATTACHMENT 2

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

LAVIN FAMILY FOUNDATION

NET INVESTMENT INCOME	86,111. 319,896.	406,007.
REVENUE AND EXPENSES PER BOOKS	86,111. 319,896.	406,007.
		TOTAL
DESCRIPTION	ALBERTO CULVER MERRILL LYNCH	

V 11-4.5

ATTACHMENT 3

FORM 990PF, PART I - OTHER INCOME

LAVIN FAMILY FOUNDATION

DESCRIPTION LEGAL FEE REIMBURSEMENT

AND EXPENSES PER BOOKS REVENUE

NET INVESTMENT

INCOME 7,282.

7,282.

7,282.

TOTALS

20526

ATTACHMENT 4 PAGE 20

ATTACHMENT 4		
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	AL FEES	
	I - LEGAI	
	ART	
	FORM 990PF, P	
	FORM	

REVENUE AND EXDENSES	PER BOOKS	5,255	5,255
			TOTALS
	DESCRIPTION	LEGAL FEES	

NET INVESTMENT INCOME	5,255.	
AND EXPENSES PER BOOKS	5,255.	2 2

5,255.

5,255.

CHARITABLE PURPOSES

ADJUSTED NET INCOME

ATTACHMENT

FORM 990PF, PART I - ACCOUNTING FEES TOTALS ACCOUNTING FEES DESCRIPTION

' '1		
INVESTMENT	30,250.	30,250.

ADJUSTED	NET	INCOME	

NET

20526

ATTACHMENT 5 PAGE 21

## LAVIN FAMILY FOUNDATION

36-6106074

ATTACHMENT 6

# FORM 990PF, PART I - TAXES

DESCRIPTION		REVENUE AND EXPENSES PER BOOKS
SECRETARY OF STATE ILLINOIS STATE TAX FEES		10. 15.
•	TOTALS	25.

FORM 990PF, PART I - OTHER EXPENSES

LAVIN FAMILY FOUNDATION

REVENUE AND EXPENSES PER BOOKS 5,442.

DESCRIPTION INVESTMENT EXPENSES

NET INVESTMENT INCOME 5,442.

TOTALS

5,442.

5,442.

20526

V 11-4.5

ATTACHMENT 7

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FORM 990P	

LAVIN FAMILY FOUNDATION

ATTACHMENT 8	ENDING ENDING BOOK VALUE FMV	9,418,843. 9,533,304.	9,418,843.	
CONTRIBUTION OF STAND STATE OBLIGATIONS	DESCRIPTION	MERRILL LYNCH 6CW-02299	US OBLIGATIONS TOTAL	

ATTACHMENT 9 PAGE 25

ATTACHMENT 9

DESCRIPTION

FORM 990PF, PART II - CORPORATE STOCK

BOOK VALUE ENDING

ENDING FMV

MERRILL LYNCH 7DQ-02299 MERRILL LYNCH 6CW-04317

16,998,741.

16,998,741.

17,504,308.

17,504,308.

TOTALS

V 11-4.5

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- CORPORATE BONDS

PART II

FORM 990PF,

ATTACHMENT 10

DESCRIPTION

MERRILL LYNCH 7DQ-02299 MERRILL LYNCH 6CW-04317

BOOK VALUE ENDING

ENDING FMV

22,829,817.5,559,924.

28,389,741.

22,836,834.5,559,924. 28,396,758.

TOTALS

20526

ATTACHMENT 10

PAGE 26

LAVIN FAMILY FOUNDATION

36-6106074

ATTACHMENT 11

# FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION AMOUNT

OTHER DECREASES 516,210.

516,210. TOTAL

PART VIII

FORM 990PF,

ATTACHMENT 12

NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

- LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

LEONARD H. LAVIN 5001 SW 27TH AVE

OCALA, FL 34474

PRESIDENT

0

0

0

RIVER FOREST, IL 60305 CAROL L. BERNICK 909 ASHLAND AVENUE

VICE PRES.

0

0

0

GRAND TOTALS

20526

ATTACHMENT 12 PAGE 28

ATTACHMENT 13

# FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

LEONARD H. LAVIN 5001 SW 27TH AVE OCALA, FL 34474

LAVIN FAMILY FOUNDATION

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

INTERNATIONAL COMMITTEE OF ARTISTS FOR PEACE

RECIPIENT NAME AND ADDRESS

JUNIOR ACHIEVEMENT OF CHICAGO

CHILDREN'S HOME + AID

SCRIPPS HEALTH FOUNDATION #1

ADDISON COUNTY HUMANE SOCIETY

FARM AID

150,000.

AMOUNT

PURPOSE OF GRANT OR CONTRIBUTION

ATTACHMENT 14

40,000.

5,000.

50,000.

7,500.

50,000.

ATTACHMENT 14

V 11-4.5

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RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR	AND	FOUNDATION STATUS OF RECIPIENT
		RECIPIENT NAME AND ADDRESS

BOY SCOUTS OF AMERICA

PURPOSE OF GRANT OR CONTRIBUTION

ATTACHMENT 14 (CONT'D)

50,000. 1,000. 5,000. 3,000. AMOUNT

50,000.

500.

FOOD FOR THE POOR INC.

HOSPITAL OF THE UNIV. OF PA - JOEL COOPER REASERCH

RONALD MCDONALD HOUSE CHARITIES OF SAN DIEGO

FOOD FOR THE POOR

HOPE HOSPICE

V 11-4.5

20526

PAGE 31 ATTACHMENT 14

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

20526

RECIPIENT NAME AND ADDRESS

LEWIS UNIVERSITY

THE FIELD MUSEUM

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

20,000.

AMOUNT

PURPOSE OF GRANT OR CONTRIBUTION

ATTACHMENT 14 (CONT'D)

10,000.

50,000.

10,000.

5,000.

15,000.

US NAVY MEMORIAL

CHICAGO SYMPHONY ORCHESTRA

CHILDREN'S HOME AND AID

FRIENDS OF PRENTICE

ATTACHMENT 14

# FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR FOUNDATION STATUS OF RECIPIENT RECIPIENT NAME AND ADDRESS

MARINE CORPS SCHOLARSHIP

15,000. AMOUNT

3,000.

5,000.

CHICAGOLAND CHAMBER OF COMMERCE FOUNDATION

TECH MUSIC, INC - JUMPSTART SCHOLARSHIP PRODUCTION

THE BOYS AND GIRLS CLUBS OF CHICAGO

THE POSSE FOUNDATION

LEWIS UNIVERSITY

20526

ATTACHMENT 14 (CONT'D)

PURPOSE OF GRANT OR CONTRIBUTION

7,500.

5,000.

5,000.

ATTACHMENT 14

PAGE 33

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

RECIPIENT NAME AND ADDRESS

THE AMERICAN RED CROSS

PROVIDENCE ST. MEL

UCAN

THE HARBOUR INC

FOUNDATION STATUS OF RECIPIENT

5,000.

AMOUNT

PURPOSE OF GRANT OR CONTRIBUTION

ATTACHMENT 14 (CONT'D)

1,000.

ART INSTITUTE OF CHICAGO 5TH & FINAL PLEDGE PMT

INTERNATIONAL COMMITTEE OF ARTISTS FOR PEACE

400,000.

5,000.

5,000.

2,000.

PAGE 34 ATTACHMENT 14

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

RECIPIENT NAME AND ADDRESS

MILLENIUM PARK INC

FOUNDATION STATUS OF RECIPIENT

ART INSTITUTE OF CHICAGO SUSTAINING FELLOWS

WITW II SATELLITE COUNCIL

US NAVY MEMORIAL

USO OF ILLINOIS

PURPOSE OF GRANT OR CONTRIBUTION

ATTACHMENT 14 (CONT'D)

10,000.

AMOUNT

25,000.

500.

3,000.

10,000.

2,500.

MUSEUM OF SCIENCE AND INDUSTRY

V 11-4.5

20526

ATTACHMENT 14

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

NORTHWESTERN UNIVERSITY FEINBERG SCHOOL OF MED.

RECIPIENT NAME AND ADDRESS

SAN DIEGO STATE CAMPANILE FOUNDATION

CHICAGO BOTANIC GARDEN

PURPOSE OF GRANT OR CONTRIBUTION

25,000. AMOUNT

ATTACHMENT 14 (CONT'D)

500,000. 400,000. 400,000.

100,000.

50,000.

JEWISH UNITED FUND

UNIVERSITY OF WASHINGTON PLEDGE PARTS 2012 & 2013

J-HELP

ATTACHMENT 14

PAGE 36

LAVIN FAMILY FOUNDATION

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

RECIPIENT NAME AND ADDRESS

RIME MUSICORPS

NORTHWESTERN UNIVERSITY FEINBERG SCHOOL OF MED.

VACATIONS FOR VETERANS

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

ATTACHMENT 14 (CONT'D)

10,000.

50,000.

25,000.

2,591,500.

TOTAL CONTRIBUTIONS PAID

PAGE 37 ATTACHMENT 14

20526

V 11-4.5

# SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

# **Capital Gains and Losses**

► Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

Name of estate or trust					Employer identification number			
LAVIN FAMILY FOUNDATION 36-					36-61060	74		
Note:	Form 5227 filers need to complete <b>only</b> Pa							
Part	Short-Term Capital Gains and Lo	sses - Assets	Held One Ye	ear or Less				
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	basıs ns)	(f) Gain or (loss) for the entire year Subtract (e) from (d)					
1a								
	<del></del>							
	<u> </u>							
		[						
b I	Enter the short-term gain or (loss), if any, fr	rom Schedule D	-1, line 1b			1b	-1,056,109.	
2 3	Short-term capital gain or (loss) from Form	s 4684, 6252,	6781, and 882	4		2		
3 1	Net short-term gain or (loss) from partners	hips S corporat	tions, and other	r estates or trusts		3		
4 5	Short-term capital loss carryover Enter	the amount, it	f any, from I	ne 9 of the 2010	Capital Loss		,	
5 P	Carryover Worksheet	nes 1a throug	 ih 4 in colum			4	,	
c	column (3) on the back	_		• •		5	-1,056,109.	
Part	Long-Term Capital Gains and Los	sses - Assets	Held More 1	han One Year	1		(f) Coin or (loss) for	
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo, day, yr)	(c) Date sold (mo , day, yr )	(d) Sales price	(e) Cost or other (see instruction		(f) Gain or (loss) for the entire year Subtract (e) from (d)	
6a								
			<del> </del>					
			4 17 01		1	6 b	20 200 004	
b E	b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b						28,298,984.	
7 L	ong-term capital gain or (loss) from Forms	s 2439, 4684, 6	252, 6781, ar	nd 8824		7		
8 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts						8	3,098.	
9 Capital gaın dıstrıbutıons						9	1,199.	
0 Gain from Form 4797, Part I						10		
1 L	ong-term capital loss carryover Enter th	ne amount, if	any, from lin	e 14 of the 2010	Capital Loss	11	( )	
2 N							20 202 201	
C(	column (3) on the back						28, 303, 281.	

Sch	edule D (Form 1041) 2011					Page 2
Ρ̂а	Summary of Parts I and II		(1) Beneficiaries	(2) Esta or trus		(3) Total
40	Caution: Read the instructions before completing this		(see instr)	Of trus	15	-1,056,109.
13	Net short-term gain or (loss)	13				-1,030,109.
14	Net long-term gain or (loss):	14a				28,303,281.
ė 1	Total for year	14a				
	28% rate gain	14c		-		
15	Total net gain or (loss). Combine lines 13 and 14a	15		·		27,247,172.
	e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (		m 990-T. Part I. line 4	a) If lines 14	a and	15. column (2), are net
	s, go to Part V, and do not complete Part IV If line 15, column (3), is a net loss, co					
Pa	rt IV Capital Loss Limitation					
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, P	art I, lı	ne 4c, if a trust), the sr	naller of		
а	The loss on line 15, column (3) or b \$3,000 e: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page			. <b></b> . L	16 (	
Not	e: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page yover Worksheet in the instructions to figure your capital loss carryover.	1, lin	e 22 (or Form 990-T, II	ne 34), is a lo	ss, com	plete the Capital Loss
	rt V Tax Computation Using Maximum Capital Gains Rates					
	n 1041 filers. Complete this part only if both lines 14a and 15 in colui		') are gains or an am	nount is ente	red in	Part I or Part II and
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more	-	-	iount is crite	,, CG 111	Tarror raith and
	tion: Skip this part and complete the Schedule D Tax Worksheet in the ii					
	ither line 14b, col (2) or line 14c, col (2) is more than zero, or					
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero					
	<b>n 990-T trusts.</b> Complete this part <b>only</b> if both lines 14a and 15 are orm 990-T, <b>and</b> Form 990-T, line 34, is more than zero. Skip this part ar					
	her line 14b, col. (2) or line 14c, col. (2) is more than zero.	iu coi	implete the Schedule	D TAX WOT	KSHEE	t in the mistructions
	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34	4)	17	····		
17	Enter the smaller of line 14a or 15 in column (2)	•/	• •   • • • • • • • • • • • • • • • • •			
18						
19	but not less than zero					
13	from Form 1041, line 2b(2) (or enter the qualified					
	dividends included in income in Part I of Form 990-T) . 19					
20	Add lines 18 and 19		-			-
21	If the estate or trust is filing Form 4952, enter the					
	amount from line 4g, otherwise, enter -0 ▶ 21					
22	Subtract line 21 from line 20 If zero or less, enter -0		22		1	
23	Subtract line 22 from line 17 If zero or less, enter -0-		23		ļ	
		• • •	· • • • • • • • • • • • • • • • • • • •			
24	Enter the smaller of the amount on line 17 or \$2,300		. 24			
25	Is the amount on line 23 equal to or more than the amount on line 247					
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box					
	No. Enter the amount from line 23		. 25			
26	Subtract line 25 from line 24		26			
27	Are the amounts on lines 22 and 26 the same?				1	
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line	22	27			
28,	Enter the amount from line 26 (If line 26 is blank, enter -0-)		. 28		-	
29	Subtract line 28 from line 27					
30	Multiply line 29 by 15% ( 15)				30	<del></del>
31	Figure the tax on the amount on line 23 Use the 2011 Tax Rate			L L		
	(see the Schedule G instructions in the instructions for Form 1041)		• • • • • • • • • • • • • • • • • • • •	≟	31	
2 0	Add lines 20 and 24					
32	Add lines 30 and 31	 Sab-	dula for Estatas		32	
33	(see the Schedule Ginstructions in the instructions for Form 1041)			I	3	
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 he				,,	
- <del></del>	G, line 1a (or Form 990-T, line 36)				4	
	C, mo ta (or tour ood t) mo do) t t t t t t t t t t t t t t t t t t t	<del></del>				le D (Form 1041) 2011
				•		(, _,,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,

JSA 1F1220 2 000

# SCHEDULE D-1 (Form 1041)

Department of the Treasury Internal Revenue Service

# Continuation Sheet for Schedule D (Form 1041)

▶ See instructions for Schedule D (Form 1041). ▶ Attach to Schedule D to list additional transactions for lines 1a and 6a. OMB No 1545-0092

Name of estate or trust

LAVIN FAMILY FOUNDATION

**Employer identification number** 36-6106074

LAVIN FAMILY FOUNDATION	36-6106074				
Part I Short-Term Capital Gains and	d Losses - Asse	ets Held One Yea	r or Less		
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)
1a MERRILL LYNCH 6CW-04322	· · · · · · · · · · · · · · · · · · ·		6,166,705.	6,491,582.	-324,877.
MERRILL LYNCH 6CW-04323			3,186,235.	3,324,476.	-138,241.
MERRILL LYNCH 6CW-04324			2,873,208.	3,020,009.	-146,801.
MERRILL LYNCH 6CW-04325			930,362.	951,627.	-21,265.
MERRILL LYNCH 6CW-04326			929,456.	945,876.	-16,420.
MERRILL LYNCH 6CW-04327	<del></del>		3,260,484.	3,413,196.	-152,712.
MERRILL LYNCH 6CW-04328			2,337,906.	2,566,491.	-228,585.
MERRILL LYNCH 6CW-04329		}	1,267,963.	1,351,657.	-83,694.
ML 7DQ-02299 ANNUAL STMT			3,737,263.	3,680,777.	56,486.
ML 7DQ-02299 SUPPLEMENTAL			1,390,602.	1,390,602.	<del>-</del>
				!	·····

1b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 1b . . . For Paperwork Reduction Act Notice, see the Instructions for Form 1041. JSA 1F1221 2 000

Schedule D-1 (Form 1041) 2011

20526

**-1**,056,109.

Schedule D-1 (Form 1041) 2011
Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side

Employer identification number

Part II Long-Term Capital Gains and  (a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d
MERRILL LYNCH 6CW-04204			41,852,938.	13,548,082.	28,304,850
ML 7DQ-02299 ANNUAL STMT			5,239,904.	5,245,776.	-5,872
					<del> </del>
					<del></del>
		,			
		<del></del>			
	-				
Total. Combine the amounts in column (f)	<u></u>				28,298,984

(Rev January 2012)

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

OMB No 1545-1709

Internal Reven		► File a	separate ap	plication for each return.			
If you are	• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box						
If you are	filing for an	Additional (Not Automatic) 3-Mo	nth Extens	ion, complete only Part	II (on page 2 of this form)		
<ul> <li>If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)</li> <li>Do not complete Part II unlessou have already been granted an automatic 3-month extension on a previously filed Form 8868</li> </ul>							
a corporation	n required t	You can electronically file Form o file Form 990-T), or an addition	nai (not au	tomatic) 3-month exten-	sion of time. You can elect	ronically file Form	
		ension of time to file any of the					
Return for	Transfers A	ssociated With Certain Persona	al Benefit	Contracts, which must	be sent to the IRS in	paper format (see	
		etails on the electronic filing of the				& Nonprofits	
		Month Extension of Time. Or					
		file Form 990-T and requesting ar					
Part I only .		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				▶ 📖	
All other cor	porations (inc	cluding 1120-C filers), partnerships	s, REMICs,	and trusts must use For	m 7004 to request an extens	sion of time	
to file incom	<u>e tax retums</u>				Enter filer's identifying nu	mber, see Instructions	
Type or	Name of exe	empt organization or other filer, see ins	tructions		Employer identification r	iumber (EIN) or	
print	1						
-		AMILY FOUNDATION			X 36-6106074		
File by the due date for	1	et, and room or suite no. If a P.O. box	, see instruc	tions	Social security number (	SSN)	
filing your		27TH AVE				<del></del>	
return See instructions	City, town or	post office, state, and ZIP code. For a	foreign add	ress, see instructions			
	<del>. L </del>	FL 34474					
Enter the Re	turn code for	the return that this application is f	or (file a se	parate application for ea	ch return)	0 4	
Application			Return	Application		Detur	
Is For			Code	Is For		Return	
					-1	Code	
Form 990			01	Form 990-T (corporatio	n)	07	
Form 990-BL			02	Form 1041-A		08	
Form 990-EZ			01	Form 4720		09	
Form 990-PF		100/ 11 11	04	Form 5227 10			
		or 408(a) trust)	05	Form 6069		11	
Form 990-1	trust other th	an above)	06	Form 8870		12	
The books	are in the ca	are of LEONARD H. LAVI	IN				
Telephone	No N		_	AX No. ▶			
•		not have an office or place of bu	<del></del>		hie hov	$\sim$	
-		turn, enter the organization's four		·			
		k this box ▶ ☐ If		•		_ If this is	
		EINs of all members the extension		tor the group, check this	box ▶ a	and attach	
-		ic 3-month (6 months for a corpor		od to file Form 000 T) as	dension of time		
until	ot all automat	$\frac{08/15}{}$ , 20 $\frac{12}{}$ , to file the ex					
	organization's		kempi diya	inzation return for the org	Janization hamed above Tri	le extension is	
for the organization's return for ► X calendar year 20 11 or							
	tay your boar	nning	20	and and no	20		
	lax year begi	g	— · <sup>20</sup> —	, and ending	, 20		
2 If the tax	v vear entere	d in line 1 is for less than 12 mont	he chock r	oocon Instal reta	Evant return		
	•	d in line 1 is for less than 12 mont ounting period	ns, check i	eason Initial rete	urn Final return		
3a If this a	application is	for Form 990-BL, 990-PF, 990	D-T, 4720.	or 6069, enter the te	entative tax, less any		
	nonrefundable credits See instructions 3a \$ 590,000.						
	b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and						
estimated tax payments made Include any prior year overpayment allowed as a credit.							
	c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS						
		ax Payment System) See instruct		uno tomi, ii tequ	3c	590,000.	
		to make an electronic fund w		with this Form 8868, s	see Form 8453-EO and Fo	orm 8879-EO for	
payment instr	uctions						