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Form **990-PF**

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

OMB No 1545-0052

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.

For	calen	dar year 2011 or tax year beginning		, and ending		
Nar	ne of	foundation			A Employer identification	number
T	HE	LYLE AND JANIS BERMAN	FAMILY FOUND	ΑT		
- <u>C</u>	/0	MASLON EDELMAN BORMAN	& BRAND		41-1809328	
Nun	nber a	nd street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
_3	30	WELLS FARGO CENTER 90	SO 7TH STREI	E	612-672-82	00
City	or to	wn, state, and ZIP code			C If exemption application is p	ending, check here
_M	IN	NEAPOLIS, MN 55402				
G	heck	all that apply: Initial return	Initial return of a fo	rmer public charity	D 1 Foreign organizations	, check here
		Final return	Amended return		_	
		Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test, mputation
H_C	heck	type of organization: X Section 501(c)(3) ex	empt private foundation		 E If private foundation stat	tus was terminated
<u>L</u>	Se	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda		under section 507(b)(1)	
l Fa	ıır ma	rket value of all assets at end of year J Accounti	-	Accrual	F If the foundation is in a (60-month termination
			her (specify)		under section 507(b)(1)	
	\$		mn (d) must be on cash b	oasis.)		
Pa	<u>ırt l</u>	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
	_	necessarily equal the amounts in column (a))	expenses per books	ıncome	income	(cash basis only)
	1	Contributions, gifts, grants, etc., received	200,700.		N/A	
	2	Check fithe foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities				
	5a	Gross rents				
	b	Net rental income or (loss)				
ire	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all				<u>-</u>
Š	7	assets on line 6a Capital gain net income (from Part IV, line 2)		0.		
Revenue	8	Net short-term capital gain		<u></u>		
	9	Income modifications		•		
		Gross sales less returns and allowances	-			
	١	Less Cost of goods sold		 		
		Gross profit or (loss)				
	11	Other income				
	12	Total. Add lines 1 through 11	200,700.	0.		
-	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
	14	Other employee salaries and wages				
.	15	Pension plans, employee benefits				
Ses	16a	Legal fees STMT 1	100.	0.		100.
Sen 🧟	1 5	Accounting the ENED				
Expense	Ç	Uther projessionar tees				
CHINE Expense		Interest				
and Administrative		Interest Flaxes NOV 1 9 2012 Sepreciation and depletion				
髻						
	20	Occupancy Travel conferences, and meetings				
€						
ØĔ.		Printing and publications				
Operatung.	23	Other expenses STMT 2	25.	<u> </u>		25.
FE	24	Total operating and administrative		ē		
adc		expenses Add lines 13 through 23	125.	0.		125.
_		Contributions, gifts, grants paid	195,300.			195,300.
	26	Total expenses and disbursements	405 405	_		4.5
	<u> </u>	Add lines 24 and 25	195,425.	0.		195,425.
	27	Subtract line 26 from line 12:				
		Excess of revenue over expenses and disbursements	5,275.			
		Net investment income (if negative, enter -0-)		0.	/-	
1235		Adjusted net income (if negative, enter -0-)			N/A	5 000 DE (004)

12-02-11 LHA For Paperwork Reduction Act Notice, see instructions

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	_	00-PF (2011) C/O MASLON EDELMAN BORM		41-	1809328 Page 2
Р	art	II. Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		f year
Ė			(a) Book Value	(b) Book Value	(c) Fair Market Value
•	1	- · · · · · · · · · · · · · · · · · · ·			
		Savings and temporary cash investments	657.	532.	532.
	3	Accounts receivable ►			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable >			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts >			
ţ	8	Inventories for sale or use			-
ssets	9	Prepaid expenses and deferred charges			
Ÿ	10a	Investments - U.S. and state government obligations			
	Ь	Investments - corporate stock			· · ·
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			-
	13	Investments - other			
	I	Land, buildings, and equipment; basis			
	` `	Less accumulated depreciation			
	15	Other assets (describe >	-		
	.*				
	16	Total assets (to be completed by all filers)	657.	532.	532.
_		Accounts payable and accrued expenses	037.	332.	
	18	Grants payable			
w	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			•
Ϊġ	I				1 •
:	1	Other liabilities (describe)			
		Other Habilities (describe			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			ı
		and complete lines 24 through 26 and lines 30 and 31.			
Ses	24	Unrestricted			
au	25	Temporarily restricted			
Bal	I	Permanently restricted			
or Fund Balances		Foundations that do not follow SFAS 117, check here			
Ŀ		and complete lines 27 through 31			
ō	27	Capital stock, trust principal, or current funds	0.	0.	
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ass	29	Retained earnings, accumulated income, endowment, or other funds	657.	532.	STATEMENT 4
et	30	Total net assets or fund balances	657.	532.	DIAILMENT 4
Z	"	Total liet assets of fully parallees	037.		
	31	Total liabilities and net assets/fund balances	657.	532.	
			•	3323	
	art				
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
	•	st agree with end-of-year figure reported on prior year's return)		1	657.
		r amount from Part I, line 27a		2	5,275.
3	Othe	r increases not included in line 2 (itemize)			0.
4	Add	lines 1, 2, and 3		4	5,932.
5	Decr	eases not included in line 2 (itemize)	SEE STA	TEMENT 3 5	5,400.
<u>6</u>	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	532.
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123511 12-02-11

2-story brick w		nd(s) of property sold (e.g or common stock, 200 sh			(b)	How acc - Purch - Dona	quired lase tion	c) Date acqu (mo., day, y		(d) Date sold (mo., day, yr.)
la					ļ					
	NE		_							
<u>c</u> d										
e								_		
(e) Gross sales price	(f) (Depreciation allowed (or allowable)		st or other basis expense of sale				(h) Gain o (e) plus (f) r		
a										_
b										
<u> </u>	-									
<u> </u>			·							
Complete only for assets shown	no dain in i	rolumn (h) and owned by	the foundation	on 12/31/69			//\	Counc (Col. (h	\ aaın	minuo
Complete only for assets shown	T	j) Adjusted basis	1	cess of col. (1)	-			Gains (Col. († (k), but not le	ss than	-0-) or
(i) F.M.V. as of 12/31/69	,	as of 12/31/69		col. (j), if any				Losses (fron	n col. (†	n))
<u> </u>										
)										
3		· · ·								
<u></u>										
		788 - 1 · · · · · · · · · · · · · · · · · ·								
Capital gain net income or (net capital	apıtal loss)	If gain, also ente	r in Part I, line	7 7	}	2				
Net short-term capital gain or (lo		•		•	7					
If gain, also enter in Part I, line 8,			nu (o).		٦l					
If (loss), enter -0- in Part I, line 8	<u>. </u>	•			ľ	3				
Part V Qualification L	Inder S	ection 4940(e) fo	r Reduced	Tax on Net	Inv	estm	ent Inco	ome		
section 4940(d)(2) applies, leave the section 4940(d)(2) applies, leave the section for the section does not quarter the section to the section of the section that the section the section that the s	ction 4942	tax on the distributable ar section 4940(e). Do not c	omplete this pa	ırt.						Yes X
Enter the appropriate amount in (a)	each colur		ructions before	making any entri				T		(d)
Base period years Calendar year (or tax year beginn	ıng in)	(b) Adjusted qualifying dis	stributions	Net value of no	(c) incha		use assets	(col.	Distrib	ution ratio ded by col. (c))
2010		47	73,320.			6'	7,483.			7.01393
2009			21,358.				1,904			11.2174
2008			6,852.				3,75 4 .			1.8252
2007			11,874.				1,366			1.9598
2006			57,951.			3.	3,722	•		2.0150
Total of line 1, column (d)								2		24.0314
Average distribution ratio for the	5-year bas	se period - divide the total	on line 2 by 5,	or by the number	of ye	ars				
the foundation has been in existe	ence if less	than 5 years						3		4.8062
Enter the net value of noncharital	ble-use as:	sets for 2011 from Part X,	line 5					4		1,65
Multiply line 4 by line 3								5		7,95
Enter 1% of net investment incor	me (1% of	Part I, line 27b)						6		
Add lines 5 and 6								7		7,95
Enter qualifying distributions from	m Part XII,	line 4						8		195,42
If line 8 is equal to or greater that	n line 7, ch	eck the box in Part VI, line	e 1b, and comp	lete that part usin	ig a 1	% tax ra	ate.			
See the Part VI instructions.										

THE LYLE AND JANIS BERMAN FAMILY FOUNDAT C/O MASLON EDELMAN BORMAN & BRAND 41-1809328 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) Part VI 1a Exempt operating foundations described in section 4940(d)(2), check here \(\bigs \) and enter "N/A" on line 1. Date of ruling or determination letter: _ (attach copy of letter if necessary-see instructions) b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1% 0. of Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 0. 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-5 6 Credits/Payments a 2011 estimated tax payments and 2010 overpayment credited to 2011 6a b Exempt foreign organizations - tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 6с d Backup withholding erroneously withheld 6d 7 Total credits and payments Add lines 6a through 6d 0. 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 10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 11 Enter the amount of line 10 to be: Credited to 2012 estimated tax Refunded > Part VII-A | Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 1b If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. c Did the foundation file Form 1120-POL for this year? Х 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ 0. (2) On foundation managers. > \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? X 2 If "Yes," attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? X 4a b If "Yes," has it filed a tax return on Form 990-T for this year? N/A4b 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? X 5 If "Yes," attach the statement required by General Instruction T. 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? Х 7 Did the foundation have at least \$5,000 in assets at any time during the year? X 7 If "Yes," complete Part II, col. (c), and Part XV 8a Enter the states to which the foundation reports or with which it is registered (see instructions) b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation X 86 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 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

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THE LYLE AND JANIS BERMAN FAMILY FOUNDAT 41-1809328 Form 990-PF (2011) C/O MASLON EDELMAN BORMAN & BRAND Page 5 Part VII-A Statements Regarding Activities (continued) 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) 11 X 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) 12 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address N/A Telephone no. $\triangleright 612-672-8200$ 14 The books are in care of ▶ NEIL I. SELL ZIP+4 ▶55402 Located at ▶ 3300 WELLS FARGO CENTER, MINNEAPOLIS MN 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here N/A and enter the amount of tax-exempt interest received or accrued during the year 15 16 At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, No Yes securities, or other financial account in a foreign country? X 16 See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. Yes No 1a During the year did the foundation (either directly or indirectly): Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) Yes X No a disqualified person? Yes X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available Yes X No for the benefit or use of a disqualified person)? (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 Yes X No termination of government service, if terminating within 90 days.) 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 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 X before the first day of the tax year beginning in 2011? 1c 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(1)(3) or 4942(1)(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 Yes X No before 2011? If "Yes," list the years 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.) N/A 2b c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time Yes X No during the year?

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X

3b

4a

N/A

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.

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2011)

had not been removed from jeopardy before the first day of the tax year beginning in 2011?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

THE LYLE AND JANIS BERMAN FAMILY FOUNDAT C/O MASLON EDELMAN BORMAN & BRAND Form 990-PF (2011) 41-1809328 Page 6 Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? Yes X No Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? N/A 5b Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained N/A Yes expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945-5(d) 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? X b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b If "Yes" to 6b, file Form 8870 Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? N/A 7b Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred compensation (b) Title, and average (c) Compensation (e) Expense account, other hours per week devoted to position (If not paid, (a) Name and address enter -0-) allowances LYLE BERMAN PRESIDENT HUGHES CENTER DRIVE SUITE 606 LAS VEGAS, NV 89109 1.00 0. 0 0. JANIS BERMAN TREASURER 345 CAMDEN PLACE LAGUNA BEACH, CA 92651 1.00 0 0. 0. NEIL SELL C/O MASLON EDELMAN BORMAN &SECRETARY 3300 WELLS FARGO CENTER 90 SOUTH SEVE MINNEAPOLIS, MN 55402 1.00 0 . 0 0. Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other (b) Title, and average (a) Name and address of each employee paid more than \$50,000 hours per week (c) Compensation devoted to position allowances NONE

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

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)		1809328
3 Five highest-paid independent contractors for professional services. If none, enter "	NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		-
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		▶ 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistica number of organizations and other beneficiaries served, conferences convened, research papers produc	al information such as the eed, etc.	Expenses
1N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lin	es 1 and 2.	Amount
1 N/A		
2		
All other exercism related investments. See instructions		
All other program-related investments. See instructions. 3		
Total. Add lines 1 through 3	>	0 . Form 990-PF (2011)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations	, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а		1a	1,091.
ь	Average of monthly cash balances	1b	1,091. 588.
C		1c	
d	Total (add lines 1a, b, and c)	1d	1,679.
е	Reduction claimed for blockage or other factors reported on lines 1a and		•
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	1 2	0.
3	Subtract line 2 from line 1d	3	1,679.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	25.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,654.
6_	Minimum investment return Enter 5% of line 5	6	83.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	83.
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.)	1	
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	83.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	83.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	83.
P	art 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	195,425.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		<u> </u>
a		3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	195,425.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	195,425.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies f	or the section
	4940(e) reduction of tax in those years.		

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI,	·	·		
line 7				83.
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2011.				
a From 2006 67,171.				
b From 2007 41,286.				
c From 2008 6,664.				
d From 2009 21, 263.				
e From 2010 469,946.	_			
f Total of lines 3a through e	606,330.			
4 Qualifying distributions for 2011 from				
Part XII, line 4: ► \$ 195,425.			_	
a Applied to 2010, but not more than line 2a			0.	
b Applied to undistributed income of prior		_		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2011 distributable amount	105 010			83.
e Remaining amount distributed out of corpus	195,342.			·
5 Excess distributions carryover applied to 2011 (if an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below.				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	801,672.			
b Prior years' undistributed income. Subtract	002/0/21			
line 4b from line 2b		0.		
c Enter the amount of prior years'		•		•
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously	•			
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2010. Subtract line				<u> </u>
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2011. Subtract			·	
lines 4d and 5 from line 1. This amount must				
be distributed in 2012				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2006				
not applied on line 5 or line 7	67,171.	<u></u> .		
9 Excess distributions carryover to 2012				
Subtract lines 7 and 8 from line 6a	734,501.			·
10 Analysis of line 9:				
a Excess from 2007 41,286.				
b Excess from 2008 6,664.				
c Excess from 2009 21, 263.				
d Excess from 2010 469,946.				
e Excess from 2011 195,342.			<u> </u>	

THE LYLE AND JANIS BERMAN FAMILY FOUNDAT Form 990-PF (2011) C/O MASLON EDELMAN BORMAN & BRAND 41-1809328 Page 10 Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2011, enter the date of the ruling 4942(j)(3) or 4942(j)(5) b Check box to indicate whether the foundation is a private operating foundation described in section Prior 3 years Tax year 2 a Enter the lesser of the adjusted net (a) 2011 (b) 2010 (c) 2009 (d) 2008 (e) Total income from Part I or the minimum investment return from Part X for each year listed **b** 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year c "Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization (4) Gross investment income

Part XV | Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)

Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

LYLE BERMAN

listed

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here LX_I if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

- a The name, address, and telephone number of the person to whom applications should be addressed:
- b The form in which applications should be submitted and information and materials they should include:
- c Any submission deadlines.
- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Form **990-PF** (2011)

orm 990-PF (2011) C/O MASLON EDELMAN BORMAN & BRAND

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Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient	" "	
a Paid during the year				
UNIVERSITY OF MINNESOTA FOUNDATION	NONE	PUBLIC	GENERAL FUNDING	
200 OAK STREET SE	NONE	FOBBIC	GENERAL FUNDING	
MINNEAPOLIS, MN 55455				65,100.
MINNEAPOLIS JEWISH FEDERATION	NONE	PUBLIC	GENERAL FUNDING	
13100 WAYZATA BOULEVARD				•
MINNEAPOLIS, MN 55305				130,200,
			1	
		+	1	
	1	<u> </u>	▶ 3a	195,300,
b Approved for future payment				173,300
2 / pp. o. o. ratero payment				
NONE				
		İ		
· · · · · · · · · · · · · · · · · · ·	-			
		<u> </u>		
Total			▶ 3b	0

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Part XVI-A · Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)
	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue	Code		Code		
a			 		
b					<u> </u>
c					
d			ļ		
e					
f		-	ļ		
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					
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events			<u> </u>		
10 Gross profit or (loss) from sales of inventory			\vdash		
11 Other revenue;			 		
<u>a</u>			<u> </u>	_	
b	-		-		
<u> </u>	ļ				
d			 		
e	ļi		├		
12 Subtotal. Add columns (b), (d), and (e)		0.		0.	0.
13 Total Add line 12, columns (b), (d), and (e)				13	0.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	o the Acc	omplishment of Ex	cemp	t Purposes	
Line No Explain below how each activity for which incomplete the foundation's exempt purposes (other than			contri	buted importantly to the accor	mplishment of
	-7	, , , , , , , , , , , , , , , , , , ,			
					·
					· · · · · · · · · · · · · · · · · · ·
					·
		.			
				· · · · · · · · · · · · · · · · · · ·	
					
					 -
				<u> </u>	

C/O MASLON EDELMAN BORMAN & BRAND

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Part XVII	Information Re Exempt Organ		sfers To a	and Transactions	and Relations	ships With Noncha	ritable	•	
1 Did the or			of the followin	g with any other organizati	on described in sec	tion 501(c) of		Yes	No
				7, relating to political organization		1011 30 1(0) 01			
	from the reporting founds								
(1) Cash				9			1a(1)		_X
(2) Other							1a(2)		X
b Other tran									
(1) Sales	of assets to a noncharital	ble exempt organizat	ion				1b(1)		_X_
(2) Purch	nases of assets from a nor	ncharitable exempt o	rganization				1b(2)		<u>X</u>
(3) Renta	al of facilities, equipment,	or other assets					1b(3)		X
(4) Reim	bursement arrangements						1b(4)		<u>X</u>
	s or loan guarantees						1b(5)		X
	rmance of services or me						1b(6)		X
	f facilities, equipment, ma						10		X
or service	s given by the reporting fo	oundation. If the four	ndation receive			market value of the goods, n or sharing arrangement,		ieis,	
· · · · ·	 the value of the goods, (b) Amount involved 			e exempt organization	(d) Description	n of transfers, transactions, and	sharing an	rangeme	ents
<u>,-,</u>	1-1	(5)	N/A		(a) coorbio				
			21/22						
							_		
				- .					
			-						
				1-1					
ın section	ndation directly or indirectly or indirectly of the Code (other complete the following sch	r than section 501(c)	-	or more tax-exempt organ tion 527?	nzations described		Yes	X] No
<i>v</i> 11 100, 0	(a) Name of org		· ·	(b) Type of organization	1	(c) Description of relations	ship		
	N/A						-		
				ng accompanying schedules and n taxpayer) is based on all infor	mation of which prepare	er has any knowledge rel	ay the IRS turn with th own below X Yes	e prepar (see ins	er
Šigi	nature of officer or trustee	l		Date/	Title				
	Print/Type preparer's na	ame	Preparer's s	ignature	Date	Check If PTIN	-		
			N.	a. ()		self- employed			
Paid	ANNE M. LE		Aur	me July	10/25/12		0448		
Preparer	Firm's name ► CBI	Z MHM, LL	ıC			Firm's EIN ► 34-1	8732	82	
Use Only		0 0011511 0	mir cm-	DDM CUITOR 1	1000				
		NNEAPOLIS		EET, SUITE 1 5402	LUUU	Dhone no 612	339-	701	1
		MNEAFOLLS	<u>, гии э</u>	J4U4	<u> </u>		orm 990		

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2011

Name of the organization

THE LYLE AND JANIS BERMAN FAMILY FOUNDAT

C/O MASLON EDELMAN BORMAN & BRAND

Employer identification number

41-1809328

Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year

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

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

Name of organization

THE LYLE AND JANIS BERMAN FAMILY FOUNDAT

Employer identification number

· C/O MASLON EDELMAN BORMAN & BRAND

41-1809328

Part I	Contributors (see instructions) Use duplicate copies of Part I if ac	ditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LYLE BERMAN 1 HUGHES CENTER DRIVE STE #606 LAS VEGAS, NV 89109	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Name of organization

THE LYLE AND JANIS BERMAN FAMILY FOUNDAT

C/O MASLON EDELMAN BORMAN & BRAND

Employer identification number

41-1809328

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

No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_1	90,000 SHARES OF VOYAGER OIL & GAS INC		7 10 10 10 10 10 10 10 10 10 10 10 10 10
-		\$ 200,700.	09/28/11
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
 - -		\$	
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-		\$	
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
.		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Name of organization Employer identification number THE LYLE AND JANIS BERMAN FAMILY FOUNDAT C/O MASLON EDELMAN BORMAN & BRAND <u>41-1809328</u> Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter Part III the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once) > \$_ Use duplicate copies of Part III if additional space is needed (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF	LEGAL	FEES		STATEMENT	1
DESCRIPTION		(B) NET INVEST- MENT INCOME		CHARITAE	
MASLON EDELMAN BORMAN & BRAND	100.	0.		10	0.
TO FM 990-PF, PG 1, LN 16A	100.	0.		10	0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT	2
DESCRIPTION		(B) NET INVEST- MENT INCOME		CHARITA	
MN ANNUAL FEES	25.	0.			25.
TO FORM 990-PF, PG 1, LN 23	25.	0.			25.
FORM 990-PF OTHER DECREASE	ES IN NET AS	SETS OR FUND	BALANCES	STATEMENT	3
DESCRIPTION				AMOUNT	
UNREALIZED LOSS ON STOCK DISTORGANIZATIONS	TRIBUTED TO	CHARITABLE		5,4(0.
TOTAL TO FORM 990-PF, PART I	II, LINE 5			5,40	0.
FORM 990-PF	OTHER F	UNDS		STATEMENT	4
FORM 990-PF DESCRIPTION	OTHER F		(A) INNING OF YEAR	STATEMENT (B) END OF YEAR	4
	OTHER F		INNING OF	(B) END OF YEAR	4

Form 8	8868 (Rev. 1-2012)	_				Page 2		
• If yo	u are filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II and check this	box		X		
Note.	Only complete Part II if you have already been granted an a	utomatic	3-month extension on a previously fi	led Form 8	3868			
● If yo	u are filing for an Automatic 3-Month Extension, comple							
Part	II Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no co	pies nee	ded).		
			Enter filer's	identifyin	g number, s	see instructions		
Туре								
print	int THE LYLE AND JANIS BERMAN FAMILY FOUNDAT							
File by t	the C/O MASLON EDELMAN BORMAN & BRAND					X 41-1809328		
due date	I NUMBER STEET AND FORM OF SHITE DO IT A P U DOX SEE INSTRUCTIONS					ocial security number (SSN)		
return S	your 12200 write mando drawing 00 do 7mu confron							
ınstructı	Crty, town or post office, state, and ZIP code For a foreign address, see instructions							
	MINNEAPOLIS, MN 55402							
Enter	he Return code for the return that this application is for (file	e a separa	te application for each return)			0 4		
Applic	ation	Return	Application			Return		
is For		Code	Is For			Code		
Form !	990	01		r gett eft i de en operaties op de en				
Form 9	990-BL	02	Form 1041-A			08		
Form !	990-EZ	01	Form 4720	09				
Form !	990-PF	04	Form 5227	10				
Form !	990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11				
Form 9	990-T (trust other than above)	06	Form 8870					
STOP	Do not complete Part II if you were not already granted	an autor	natic 3-month extension on a prev	nously file	d Form 886	8.		
	NEIL I. SELL							
	books are in the care of > 3300 WELLS FAR	GO CE	NTER - MINNEAPOLIS	, MN	55402			
Tel	ephone No. ► 612-672-8200		FAX No. ▶					
• If ti	ne organization does not have an office or place of busines	s in the Ui	nited States, check this box			▶ □		
• If ti	nis is for a Group Return, enter the organization's four digit	Group Ex	emption Number (GEN) I	f this is fo	the whole o	group, check this		
box	If it is for part of the group, check this box	and atta	ach a list with the names and EINs of	f all memb	ers the exte	nsion is for.		
4	request an additional 3-month extension of time until	NOVEM	BER 15, 2012		_			
5	For calendar year 2011 , or other tax year beginning		, and endin	g		·		
6	If the tax year entered in line 5 is for less than 12 months, o	heck reas	son: Initial return	Final r	eturn			
	Change in accounting period							
7	State in detail why you need the extension	_						
	ADDITIONAL TIME IS NEEDED IN	ORDER	TO GATHER THE INF	ORMAT	ION NE	CESSARY		
	TO PREPARE A COMPLETE AND ACC	URATE	RETURN.					
8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any					
	nonrefundable credits. See instructions					0.		
b	If this application is for Form 990-PF, 990-T, 4720, or 6069,							
	tax payments made. Include any prior year overpayment allowed as a credit and any amount paid							
	previously with Form 8868.					0.		
С	Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using							
	EFTPS (Electronic Federal Tax Payment System). See instructions					0.		
			st be completed for Part II	only.				
Under it is tru	penalties of perjury, I declare that I have examined this form, include, e, correct, and complete, and that I am authorized to prepare this f	ing accom			f my knowled	ge and belief,		
Signat	ure > Unn M-Schin Title >	Acc	4	Date	> 81	0/12		
						2060 /Day 1 2010\		

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

Form 886	68 (Rev. 1-2012)					Page 2		
	are filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II and check this	box		X		
	ly complete Part II if you have already been granted an a				8868			
• If you	are filing for an Automatic 3-Month Extension, complet	te only Pa	rt I (on page 1)					
Part II	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no c	opies need	led).		
			Enter filer's	identifyır	ng number, s	ee instructions		
Type or								
print	THE LYLE AND JANIS BERMAN FA							
File by the	C/O MASLON EDELMAN BORMAN &	BRAND		X	X 41-1809328			
due date for filing your	I Number, street, and room or suite no. It a P.O. box, see instructions.			Social se	cial security number (SSN)			
return See	See 3300 WELLS FARGO CENTER 90 SO /TH STREET							
instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions. MINNEAPOLIS, MN 55402							
								
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4		
Applicat	ion	Return	Application			Return		
Is For		Code	Is For			Code		
Form 990		01						
Form 990	D-BL	02	Form 1041-A	1-A				
Form 990	D-EZ	01	Form 4720			09		
Form 990	O-PF	04	Form 5227			10		
Form 990	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11		
Form 990	O-T (trust other than above)	06	Form 8870			12		
Telepi If the If this box 4 I re 5 Fo 6 If t 7 Sta	NEIL I. SELL cooks are in the care of ▶ 3300 WELLS FARCE thone No. ▶ 612-672-8200 organization does not have an office or place of business is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit organization does not have an office or place of business is for a Group Return, enter the organization's four digit organization does not have an office or place of business is for a Group Return, enter the organization's four digit organization does not have an office or place of business is for a Group Return, enter the organization's four digit organization does not have an office or place of business is for a Group Return, enter the organization's four digit organization organiza	s in the Ur Group Exe and atta NOVEM	FAX No Inted States, check this box emption Number (GEN) If ich a list with the names and EINs of BER 15, 2012, and ending on Initial return	this is fo all memb	r the whole g ers the exter	ision is for.		
no	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated				\$	0.		
	tax payments made. Include any pnor year overpayment allowed as a credit and any amount paid							
pi	previously with Form 8868					0.		
	Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using							
EF	EFTPS (Electronic Federal Tax Payment System). See instructions.					0.		
Under per	Signature and Verificat nattes of perjury, I declare that I have examined this form, includ correct, and complete, and that I am authorized to prepare this form.	ling accomi	st be completed for Part II of panying schedules and statements, and to	_	of my knowledg	ge and belief,		
Signature		-:- 		Date				
J.g.,41010	Title			2411		868 (Rev. 1-2012)		