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## Department of the Treasury

A For the 2011 calendar year, or tax year beginning

Internal Revenue Service

## **Return of Organization Exempt From Income Tax**

2011

JUL 1,

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung

benefit trust or private foundation) ▶ The organization may have to use a copy of this return to satisfy state reporting requirements

and ending JUN 30, 2012

OMB No 1545-0047

Open to Public Inspection

B c	heck if pplicable	C Name of organization	ACV. N		D Emp	oyer identific	ation number
_	Address change	MANDEL SUPPORTING FOUNDATIONS - JA	ACK N.				
-	_]change ∃Name	<del></del>			-	24 1250	E C C
$\vdash$	_]change ]]Initial	Doing Business As		D / t-	<del> </del>	34-1350	
$\vdash$	_return ∃Termin-	Number and street (or P.O. box if mail is not deli	vered to street address)	Room/suite	E Telep	hone number	93-2900
$\vdash$	Jated □Amende	25701 SCIENCE PARK DRIVE		L	<del>                                     </del>		89,645,697.
<u> </u>	∐return ∏Applica	City or town, state or country, and ZIP + 4			G Gross		
L.,	⊥tiòn pending	CDEVEDAND, ON 44122	PRIC		7	this a group ref	Yes X No
		F Name and address of principal officer.BARRY				affiliates?	uded? Yes No
		mpt status: X 501(c)(3) 501(c)( )	√ (insert no.)	or 527	7		ist (see instructions)
		mpt status: X 501(c)(3) 501(c) ( )  NONE	(IIISELL 110.) 4947(a)(1)	01 321	-{ ``		
_			sociation Other	I Vear	of formation	oup exemption	State of legal domicile, OH
		Summary	occional Caron P	IL Icai	or jointain	11 2302 1101	State of legal dolllienc, 522
		Briefly describe the organization's mission or most	significant activities MANDEI	SUPPORT	ING FOUR	NDATIONS -	
Activities & Governance		VACK N. & LILYAN MANDEL FUND WAS ESTAB					
nar	-	Check this box  if the organization disco			e than 25	% of its not as	
Ver		Number of voting members of the governing body	·	osed of mor	e than 25	3	8
ဗိ		Number of independent voting members of the go	• • •			4	7
ళ ഗ	1	otal number of individuals employed in calendary				5	0
ıtıe	1	otal number of inclinations employed in calendar j	real 2011 (Fait V, line 2a)			6	8
cţi	1	Total unrelated business revenue from Part VIII, co	dumn (C) line 12			7a	54,347.
٩	1	Net unrelated business taxable income from Form	• •			7b	<1,198,847.>
			<u> </u>		Prio	r Year	Current Year
d)	8 (	Contributions and grants (Part VIII, line 1h)	•			1,143,860.	17,492,188.
ž	1	Program service revenue (Part VIII, line 2g)				0.	0.
Revenue	1	nvestment income (Part VIII, column (A), lines 3, 4	. and 7d)		1	9,585,359.	52,872,345.
ď		Other revenue (Part VIII, column (A), lines 5, 6d, 8d	· · · · · · · · · · · · · · · · · · ·	-		5,561,990.	<5,001,378.>
	1	fotal revenue - add lines 8 through 11 (must equal	· · · · · · · · · · · · · · · · · · ·	_		5,167,229.	65,363,155.
		Grants and similar anounts paid (Part IX, column (				5,928,753.	8,882,159.
	1	Benefits paid to or for members (Part IX, column (A	•			0.	0.
S	l	Salaries, other compandation, employee benefits (				0.	0.
nse	16a F	Professional fundraising lees (Part IX, column (A),	line 11e)			0.	0.
Expenses	b b	otal tundraising expanses (eart IX, column (D), lin	e 25) 🕨	0.			
Û	17/	the expenses (Part IX, column (A), lines 11a-11d	, 11f-24e)			23,584.	705,481.
	18	total expenses Add Imes 13.17 (must equal Part I	X, column (A), line 25)		1	5,952,337.	9,587,640.
_	19	Revenue less expenses Subtract line 18 from line				9,214,892.	55,775,515.
ts or		otal assets (Part / line 16)		В	eginning o	f Current Year	End of Year
sets	20	opal assets (Part X line 16)			57	3,486,673.	586,839,219.
Net Asset	21	rotal liabilities (Part X, line 26)			1	4,410,994.	12,524,160.
<u> </u>	22	Vet assets or fund balances. Subtract line 21 from	line 20		5.5	9,075,679.	574,315,059.
- 2010		Signature Block					
		ties of perjury, I declare that I have examined this return,					y knowledge and belief, it is
true	, correct	, and complete. Declaration of preparer (other than office	er) is based on all information of v	vhich prepare	er has any l	nowledge.	<del></del>
		Signature of officer			(		0/13
Sig	- 1	-			/	Date	
He	re	BARRY REIS, ASSISTANT TREASURER Type or print name and title					
_		<u> </u>	T <sub>5</sub>		Date		T PTIN
D-'	, [	Print/Type preparer's name	Preparer's signature Patricia B. Rubin, CPA Date 2013 05 01	9 16 26 12 DA DO		Check	
Pai	1	PATRICIA B. RUBIN	1		5/09/	1 dull chiplo)	
	parer	Firm's name SS&G, INC.				Firm's EIN	34-1945695
US	Only	Firm's address 32125 SOLON ROAD					40. 040 0505
N45		SOLON, OH 44139-2284				Phone no. (4	40) 248-8787

132001 01-23-12 LHA For Paperwork Reduction Act Notice, see the separate instructions. SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form 990 (2011 **EXTENSION ATTACHED** 

orm	330 (2011)	AN MANDEL FUND	34-1350566 Page <b>2</b>
Par	tillig Statement of Program	m Service Accomplishments	
	Check if Schedule O contain	ns a response to any question in this Part III	<u> </u>
1	Briefly describe the organization's		
		IONS - JACK N. & LILYAN MANDEL FUND WAS	
	ESTABLISHED AS A SUPPORTIN	NG FOUNDATION OF THE JEWISH FEDERATION OF	
	CLEVELAND AND AS SUCH, IS	ORGANIZED AND OPERATED EXCLUSIVELY FOR	
	CHARITABLE, EDUCATIONAL OF	R RELIGIOUS PURPOSES BY CONDUCTING OR	
2	Did the organization undertake an	ny significant program services during the year which were not listed	on
	the prior Form 990 or 990-EZ?	, , , , , , , , , , , , , , , , , , , ,	Yes X No
	If "Yes," describe these new servi	ices on Schedule O	<del></del>
3		acting, or make significant changes in how it conducts, any program:	services? Yes X No
J	If "Yes," describe these changes		services.
	•		
4		am service accomplishments for each of its three largest program se	
		ganizations and section 4947(a)(1) trusts are required to report the a	amount of grants and allocations to
		evenue, if any, for each program service reported.	<del></del>
4a	· ——		· ) (Revenue \$)
		ADE TO FURTHER CHARITABLE, EDUCATIONAL &	
	RELIGIOUS PURPOSES OF THE	JEWISH FEDERATION OF CLEVELAND (FEDERATION)	
		<del></del>	<del></del>
		<del></del>	<del></del>
		<del></del>	
			<del></del>
		<del></del>	
4b	(Code ) (Expenses \$	7,985. including grants of \$	) (Revenue \$
	GRANT PROGRAM DESIGN AND		
		<del></del>	<del></del>
			<del></del>
		<del></del>	<del></del>
		<del></del>	
			<del></del>
		<del></del>	
		<del></del>	<del></del>
	(0-1)		\ /-
4c	(Code ) (Expenses \$	including grants of \$	) (Revenue \$)
	<del></del>	<del></del>	<del></del>
	<del></del>		<del></del>
			<del></del>
	Other program services (Describe	e in Schedule O )	
4d	Other program services (Describe (Expenses \$	e in Schedule O)	

132002 02-09-12

Form **990** (2011)

Page 3

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	L
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	_7	<u> </u>	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	 	x
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	_ 9	L.	х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X		ŀ	
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			]
	Part VI	11a		Х
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	<u> </u>
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	<u> </u>	<u> </u>
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			,
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	├—	X
e	, , , , , , , , , , , , , , , , , , , ,	11e	├	_^_
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		x	
100	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f	<del>  ^</del>	<del> </del>
120	Schedule D, Parts XI, XII, and XIII	12a		x
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	120	<del>                                     </del>	+-
-	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	x	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	†	x
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	T -	х
b				
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	}		1
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	<u></u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	1		
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	<u> </u>	Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	↓	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	1		
	1c and 8a? If "Yes," complete Schedule G, Part II	18	┼	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		1	
00:-	complete Schedule G, Part III	19	┼—	X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a	<del> </del>	X
<u>u</u>	in 166 to into 266, did the organization attach a copy of its audited shancial statements to this return?	20b	1	1

Form **990** (2011)

& LILYAN MANDEL FUND

Page 4 Rart IV Checklist of Required Schedules (continued) Yes No 21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II Х 21 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Х 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete 23 Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No", go to line 25 24a 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a Х disqualified person during the year? If "Yes," complete Schedule L, Part I 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L. Part I 25b Х 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified Х person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member X of any of these persons? If "Yes," complete Schedule L, Part III 27 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) X a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c Х 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M X 30 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Х 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II Х 32 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I x 33 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? X 35a b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Х 35b 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes." complete Schedule R, Part V, line 2 х 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization

Form 990 (2011)

37

Х

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197

Note. All Form 990 filers are required to complete Schedule O

	111111111111111111111111111111111111111			
	990 (2011) & LILYAN MANDEL FUND 34-1350566		Pa	1ge <b>5</b>
Par				
	Check if Schedule O contains a response to any question in this Part V			<u> </u>
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  1a 0	٠		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b 0	.	l	Į.
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W·3, Transmittal of Wage and Tax Statements,		_	
	filed for the calendar year ending with or within the year covered by this return  2a 0	,		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a_	Х	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b_	Х	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a_		Х
b	If "Yes," enter the name of the foreign country	[		
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			Ì
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a_		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b_		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit		,	
	any contributions that were not tax deductible?	6a_		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b_		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).	شــــــــــــــــــــــــــــــــــــ	*	[
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a_		х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	1		Ì
	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	Ci	<u>2</u>	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e_		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		ļ
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	L	X
9	Sponsoring organizations maintaining donor advised funds.		# . j	ļ
а	Did the organization make any taxable distributions under section 4966?	9a_		<u> </u>
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	₩ wew	1 -
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12	3		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1		
11	Section 501(c)(12) organizations. Enter	á -		
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against		1954	
	amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	0.20.20.00	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the	7	3.56	
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	2 5:2		F

14b Form **990** (2011)

14a

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

34-1350566

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions

	Check if Schedule O contains a response to any question in this Part VI					X
Sect	ion A. Governing Body and Management				,	
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		8,	-	1
	If there are material differences in voting rights among members of the governing body, or if the governing				]	1
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0					i
b	Enter the number of voting members included in line 1a, above, who are independent	1b		7		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ıp with	any other		`	
	officer, director, trustee, or key employee?			2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the	ne dire	ct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?			3_		х
4	Did the organization make any significant changes to its governing documents since the prior Form	990 w	as filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		5		x
6	Did the organization have members or stockholders?			6	х	<u></u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	appoint	t one or			1
	more members of the governing body?			7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders, or			1
	persons other than the governing body?			7b	х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ear by th	ne following:		;	
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	ached	at the			Ì
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal I	Revenu	ie Code )			
_					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such of	chapte	rs, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bo	dy bef	ore filing the form			Х
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	se to co.	nflicts?	12b	Х	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "	Yes," c	describe			
	ın Schedule O how this was done			12c	х	}
13	Did the organization have a written whistleblower policy?			13	Х	
14	Did the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review and appro-	val by i	ndependent		9.	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision	?			8	, <del>, , , , , , , , , , , , , , , , , , </del>
а	The organization's CEO, Executive Director, or top management official			15a	<u>.                                    </u>	х
b	Other officers or key employees of the organization			15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			<u> </u>	10.7	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ement	with a		23	
	taxable entity during the year?			16a	х	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu	ate its	participation	* 10 m		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the org	anızatı	on's			
	exempt status with respect to such arrangements?			16b	<u>L</u>	х
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ▶○H					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	-T (Sec	tion 501(c)(3)s c	only) availal	ble	
	for public inspection. Indicate how you made these available. Check all that apply.					
	Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, or	conflict	of interest polic	y, and fina	ncial	
	statements available to the public during the tax year					
20	State the name, physical address, and telephone number of the person who possesses the books	and re	cords of the orga	anızatıon: )	▶	
	BARRY REIS - 216-593-2900					
	25701 SCIENCE PARK DRIVE, CLEVELAND, OH 44122			- <del></del>		

MANDEL SOFFORTING FOODBATTONS CACK I

Form 990 (2011)

& LILYAN MANDEL FUND 34-1350566

## Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0 in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order: individual trustees or directors, institutional trustees, officers; key employees; highest compensated employees, and former such persons.

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average	(do	not c	Position one than one				Reportable	Reportable	Estimated
	hours per week	box	, unle	ss pe	rson	inan is bot or/trus	h an	compensation from	compensation from related	amount of other
	(describe hours for related organizations in Schedule O)	1	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) HENRY J. GOODMAN	ĺ	l	l	1		j		}		
TRUSTEE, VP & TREASURER	0.30	х		х	ļ	ĺ		0.	0.	C
(2) STEPHEN H. HOFFMAN					Γ					
TRUSTEE	5.00	х						0.	722,061.	31,438
(3) SALLY H. WERTHEIM										
TRUSTEE	0.30	x						٥.	0.	С
(4) CHARLES RATNER	· · · ·				┢	†	$\vdash$			
TRUSTEE	0.30	x					ŀ	0.	0.	(
(5) MORTON L. MANDEL	<u> </u>	Ë	1		-		├	· ·		
TRUSTEE, VP UNTIL 12/7/11, PRES EFFE	5.00	x		x				0.	0.	(
(6) BARBARA MANDEL		<del> </del>	╁	Ë		╁	├	· · · · · · · · · · · · · · · · · · ·		<u> </u>
TRUSTEE	0.30	v						0.	0.	
(7) HARLEY GROSS	0.50	<del>                                     </del>	┼─	┼-	<del> </del>	⊢	├	· · · · · · · · · · · · · · · · · · ·	0.	
TRUSTEE	0.30	l <sub>x</sub>						0.	0.	C
(8) STEPHEN J. WEINBERG		Ë		-	╁╌	╁	┢	· · · · · · · · · · · · · · · · · · ·	0.	
TRUSTEE, UNTIL 12/7/11	0.30	l v						0.	0.	(
(9) PENNI WEINBERG	1.50	+	├-	┢	$\vdash$	+		· · · · · · · · · · · · · · · · · · ·	<u> </u>	<u> </u>
TRUSTEE, EFFECTIVE 12/7/11	0.30	v v						0.	0.	
(10) BARRY REIS		+	$\vdash$	┼	┢	┢	$\vdash$	· · · · · · · · · · · · · · · · · · ·	Ŭ.	
ASSISTANT TREASURER	2,00			x				0.	245,764.	22 411
(11) HEDY MILGROM	2.00	╁─	╁	A	├	-	┝	ļ	243,704.	32,415
SECRETARY	2.00		ļ	x				0.	155 122	10 274
Jacks III.	2,00			A.					155,123.	12,276
					-					
	<del> </del>	T	一	$\vdash$	T	1	<del>                                     </del>	<del>                                     </del>	-	<del>  · · · · · · · · · · · · · · · · · </del>

Page 7

& LILYAN MANDEL FUND 34-1350566 Page 8 Form 990 (2011) Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (B) (C) (F) (E) Average Position Name and title Reportable Reportable Estimated (do not check more than one box, unless person is both an hours per compensation compensation amount of officer and a director/trustee) week from from related other (describe the organizations compensation trustee or director hours for from the organization (W 2/1099-MISC) related nstitutional trustee (W 2/1099-MISC) organization organizations and related ey employee ın Schedule organizations Officer O) 1b Sub-total 1,122,948 76,129.

2	Total number of individuals (including but not limited to those	listed above) who received more than \$100,000 of reportable
	compensation from the organization	

- Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
		į .
3		х
		,
4	х	
3,99		
5		Х

76 129.

0.

1 122 948

### Section B. Independent Contractors

d Total (add lines 1b and 1c)

c Total from continuation sheets to Part VII, Section A

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
PARKWOOD TRUST COMPANY, 919 NORTH MARKET	INVESTMENT MANAGEMENT	
STREET, SUITE 429, WILMINGTON, DE 19801	CONSULTING	725,782.
		<del> </del>

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization



34-1350566

& LILYAN MANDEL FUND

Part VIII Statement of Revenue (D) Revenue (A) (B) (C) Total revenue Related or Unrelated excluded from exempt function business tax under sections 512, 513, or 514 revenue revenue 1 a Federated campaigns b Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 17,492,188 similar amounts not included above 1f 6,192,188 g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f 17,492,188 Business Code Program Service Revenue 2 a f All other program service revenue 1 1879 g Total. Add lines 2a-2f Investment income (including dividends, interest, and 13,132,008 other similar amounts) 13,132,008. Income from investment of tax-exempt bond proceeds Royalties (i) Real (II) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory 25,240,952. 38,781,927. b Less' cost or other basis 24,282,542 and sales expenses 958,410. 38,781,927 c Gain or (loss) 39,740,337 d Net gain or (loss) 1,376,193 38,364,144, 8 a Gross income from fundraising events (not Revenue including \$ contributions reported on line 1c). See Part IV, line 18 Other | **b** Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances **b** Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code OTHER PARTNERSHIP INCO 11 a 900099 <5,001,378. <1,321,846 <3,679,532.> b d All other revenue <5,001,378. e Total. Add lines 11a-11d Total revenue. See instructions. 65,363,155. 54,347. 47,816,620

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& LILYAN MANDEL FUND

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

СОПР	iete columns (B), (C), and (D)				<del></del>
	Check if Schedule O contains a respon	ise to any question in thi	s Part IX (B)	(C)	(D)
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	4,263,681.	4,263,681.	<u></u>	<del></del>
2	Grants and other assistance to individuals in				·
	the United States See Part IV, line 22			, <u> </u>	,
3	Grants and other assistance to governments,			**************************************	
	organizations, and individuals outside the	<b>\</b>			
	United States See Part IV, lines 15 and 16	4,618,478.	4,618,478.	, , , , , , , , , , , , , , , , , , ,	·
4	Benefits paid to or for members			·	
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees).				
а	Management				
b	Legal				
С	Accounting	6,425.		6,425.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17		The state of the s		
f	Investment management fees	725,782.		725,782.	
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	7,985.	7,985.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				_
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	CUSTODIAL FEES	3,477.		3,477.	
b	MISC.	2,404.		2,404.	
С	TAX REFUNDS/FILING FEES	<40,592.	>	<40,592.	>
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	9,587,640.	8,890,144.	697,496.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				<u></u>
	n n1-23-12		<del></del>		Form 990 (2011)

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Form 990 (2011)

& LILYAN MANDEL FUND

Part∗X♀ Balance Sheet (B) (A) Beginning of year End of year 1 Cash - non-interest-bearing 4 706 284. 2,716,531 2 Savings and temporary cash investments 2 3 3 Pledges and grants receivable, net 70,817 174,313. 4 Accounts receivable, net 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II 5 of Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 6 7 Notes and loans receivable, net 8 8 Inventories for sale or use Prepaid expenses and deferred charges 9 WITE SE 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a b Less accumulated depreciation 10b 10c 17,925,793 21 676 862. 11 Investments - publicly traded securities 552,773,532, 560 281 760. Investments - other securities. See Part IV, line 11 12 12 13 Investments - program-related. See Part IV, line 11 13 14 14 Intangible assets 15 Other assets. See Part IV, line 11 15 573,486,673. 586,839,219, 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 1,471. 370 018 17 Accounts payable and accrued expenses 17 14,409,523. 12 154 142. 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 Total liabilities. Add lines 17 through 25 14,410,994 12,524,160 26 Organizations that follow SFAS 117, check here \( \textstyle \text lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 559,075,679 574,315,059, 27 Unrestricted net assets 27 Temporarily restricted net assets 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here complete lines 30 through 34. walio) 30 Capital stock or trust principal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32 559,075,679 574,315,059. 33 Total net assets or fund balances 33 573,486,673 586,839,219. Total liabilities and net assets/fund balances 34

-orm	990 (2011)	34-1350566		Pag	<sub>je</sub> 12
Pa	Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				x
	Tabel margin (mark annual Dark VIII) and mark (A) 1 — 40)	1.1	<b>.</b>	262	155
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,363,	
2	Total expenses (must equal Part IX, column (A), line 25)	2		,587,	
3	Revenue less expenses Subtract line 2 from line 1	3			515.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			679,
5	Other changes in net assets or fund balances (explain in Schedule O)	5			135.
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	574	,315	059.
Pa	Timancial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
	<u> </u>			Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	<u> </u>	,		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	nedule O	) Š (	1 .	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue				
	separate basis, consolidated basis, or both			ź.	
	Separate basis X Consolidated basis Both consolidated and separate basis		Leave .		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	ındle Audıt	Mergin,		
	Act and OMB Circular A-133?		За		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?	ured audit	Ja	<del> </del>	
~	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	aned addit	3h		

Form **990** (2011)

132012 01-23-12

### SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

### **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

MANDEL SUPPORTING FOUNDATIONS - JACK N.

OMB No 1545-0047

**2011**Open to Public

Inspection

Yes

11g(ı)

11g(II)

11g(iii)

No

X

Х

X

Employer identification number

& LILYAN MANDEL FUND 34-1350566 Reason for Public Charity Status (All organizations must complete this part ) See instructions Part The organization is not a private foundation because it is: (For lines 1 through 11, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii) (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2), (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 X An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a X Type I b Type II c Type III - Functionally integrated d Type III - Other e X By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box

(i) Name of supported organization	(ii) EiN	(ii) EIN (iii) Type of organization (described on lines 1-9 above or IRC section		sted in your	(v) Did you notify the organization in col (i) of your support?		organization in col.		(vii) Amount of support	
		(see instructions))	Yes	No	Yes	No	Yes	No		
JEWISH FEDERATION							<u> </u>			
OF CLEVELAND	34-0714445	7	х				<u></u>		8,890,144.	
		<del> </del>	<del> </del>	<del> </del>				$\vdash$		

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below,

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

the governing body of the supported organization?

(iii) A 35% controlled entity of a person described in (i) or (ii) above?

Provide the following information about the supported organization(s)

(ii) A family member of a person described in (i) above?

Schedule A (Form 990 or 990-EZ) 2011

8,890,144.

h

Schedule A (Form 990 or 990-EZ) 2011

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

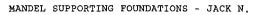
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III )

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and	,			·		
	membership fees received (Do not		1				
	ınclude any "unusual grants ")	ı					
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions					[ , ]	
	by each person (other than a						
	governmental unit or publicly			* Total gent			
	supported organization) included			- 14 <u>0</u>	7.6 × 15		
	on line 1 that exceeds 2% of the			4.5			
	amount shown on line 11,						
	column (f)	4,2	and the second s	P. Carlotte			
	Public support. Subtract line 5 from line 4			44, 44, 44, 44, 44, 44, 44, 44, 44, 44,			
	ction B. Total Support	τ	· · · · · · · · · · · · · · · · · · ·	1	1	Г Т	<del></del>
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
_	Amounts from line 4				ļ		
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
_	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital	1					
	assets (Explain in Part IV)		5 10 10 Land 5		1 0000000000000000000000000000000000000	A. V. S.	
	Total support. Add lines 7 through 10	<u>\$1</u>		71.50		2.04	<del> </del>
	Gross receipts from related activities		•				<del></del>
13	First five years. If the Form 990 is fo organization, check this box and sto	_	s iirst, secona, thii	iu, iourin, or iiith t	ax year as a sectio	911 3U 1(C)(3)	
Sec	ction C. Computation of Pub	ic Support Pe	rcentage			<del></del>	
	Public support percentage for 2011 (			column (fi)		14	%
	Public support percentage from 2010		•			15	%
	33 1/3% support test - 2011. If the	•	· ·	on line 13. and line	14 is 33 1/3% or r		<del></del>
	stop here. The organization qualifies					,	<b>&gt;</b>
b	33 1/3% support test - 2010. If the		•		d line 15 is 33 1/3%	6 or more, check th	nis box
	and stop here. The organization qua						▶ 🗀
17a	10% -facts-and-circumstances tes	i <b>t - 2011.</b> If the orc	janization did not	check a box on lin	e 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fac	cts and-circumstar	nces" test, check t	his box and <b>stop</b> l	here. Explaın ın Pa	rt IV how the organ	nization
	meets the "facts-and-circumstances"	test. The organiza	ation qualifies as a	publicly supporte	d organization	_	ightharpoons
b	10% -facts-and-circumstances tes	i <b>t - 2010.</b> If the orc	ganization did not	check a box on lin	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets t	he "facts-and-cırcı	ımstances" test, c	heck this box and	stop here. Explai	n in Part IV how the	·
	organization meets the "facts-and-cir	cumstances" test.	The organization	qualifies as a publ	licly supported org	anızatıon	
18	Private foundation. If the organization	on did not check a	box on line 13, 16	ia, 16b, 17a, or 17	b, check this box	and see instruction	s 🕨
					Scho	edule A (Form 990	or 990-FZ) 2011

## Schedule A (Form 990 or 990 EZ) 2011 Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below please complete Part II.)

Sec	tion A. Public Support	elow, please comp	nete Part II )				
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Gifts, grants, contributions, and	(4/2007	(17 2222	(0) 2000	(=/,=====	, , , , , , , , , , , , , , , , , , , ,	
•	membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that				1	i	
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to					1	
	or expended on its behalf						
5	The value of services or facilities				-		
	furnished by a governmental unit to		!			1	
	the organization without charge						
6	Total. Add lines 1 through 5						
7 <i>a</i>	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)	5.00 mg/mg/30-54" . 4	大きがした		· barni bati la NG		
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6						
10	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
Ł	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
(	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support (Add lines 9, 10c, 11, and 12)	L					
14	First five years. If the Form 990 is for	r the organization'	s first, second, thi	rd, fourth, or fifth	tax year as a secti	on 501(c)(3) organiza	ation,
	check this box and stop here						▶
Se	ction C. Computation of Pub	lic Support Pe	ercentage				
15	Public support percentage for 2011	(line 8, column (f) d	livided by line 13,	column (f))		15	9/
16	Public support percentage from 201	0 Schedule A, Parl	t III, line 15			16	9
Se	ction D. Computation of Inve	stment Incom	e Percentage	,	·		
17	Investment income percentage for 2	<b>011</b> (line 10c, colu	mn (f) divided by li	ne 13, column (f))		17	9
18	Investment income percentage from	2010 Schedule A,	Part III, line 17			18	9
19	a 33 1/3% support tests - 2011. If the			on line 14, and lin	ne 15 is more than	33 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box a						▶□
ŀ	33 1/3% support tests - 2010. If the						ınd
	line 18 is not more than 33 1/3%, ch						⊳□
20	Private foundation. If the organization						<b>▶</b> □



Schedule A (Form 990 or 990-EZ) 2011 & LILYAN MANDEL FUND	34-1350566	Page 4
Part V Supplemental Information. Complete this part to provide the explanations required by Part II, lin	e 10, Part II, line 17a	or 17b;
and Part III, line 12 Also complete this part for any additional information (See instructions)		
COVERNIL A DARM I LIMB W/WII		
SCHEDULE A, PART I, LINE H(VII)		
AMOUNT OF SUPPORT TO SUPPORTED ORGANIZATION.		
THESE EXPENSES ALL SUPPORT THE CHARITABLE, EDUCATIONAL AND RELIGIOUS		
PURPOSES OF THE JEWISH FEDERATION OF CLEVELAND (FEDERATION). OF THE		
AMOUNT REPORTED, \$948,667 WENT DIRECTLY TO THE FEDERATION.		
AMOUNT REPORTED, \$340,007 WENT DIRECTLY TO THE PEDERATION.		
		<del></del>
		· ·· · ·
	<u> </u>	
		•
	•	
	<del></del>	
		-

Form 8868 (Rev. 1-2012)						ge 2
• If you are filing for an Additional (Not Automatic) 3-Month	Extension, o	complete only Part II and check this	box		ightharpoons	
Note. Only complete Part II if you have already been granted a				3868.		
• If you are filing for an Automatic 3-Month Extension, com						
Part If Additional (Not Automatic) 3-Month			unal (no	conies	needed)	
(2.4/2)			•	-	, see instruction	
Type or Name of exempt organization or other filer, see ins	tructions	Entermers			ion number (EII	
MEASURE ATTROCPUTATION TOTAL ACTION		TACK N.	Litiployer	idej ililiout	ion nariber (En	4, 0.
C TITVAN MANDET EIND		011011	X	34_11	350566	
110 5) 210		tions	_ لـجيد			
filing your DE 701 COTENCE DADY DE THE	k, see instruc	lions		cunty num	Del (0014)	
City, town or post office, state, and zir code. For	a toreign add	iress, see instructions				
CLEVELAND, OH 44122	<del></del>					
					[0]	77
Enter the Return code for the return that this application is for	(file a separa	te application for each return)	-	-	. [0]	<u> </u>
		<b>Y</b>				
Application	Return	Application			Retu	ırn
ls For	Code	Is For		·····	Cod	
Form 990	01		<u> </u>			
Form 990-BL	02	Form 1041-A			08	}
Form 990-EZ	01_	Form 4720			20	<u>)                                    </u>
Form 990-PF	04	Form 5227			10	)
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	ii
Form 990-T (trust other than above)	06	Form 8870			12	2
STOP! Do not complete Part II if you were not already gran	ted an autor	natic 3-month extension on a prev	iously file	d Form 88	168.	
BARRY REIS					<del></del>	
<ul> <li>The books are in the care of ► 25701 SCIENCE</li> </ul>	PARK	DRIVE - CLEVELAND,	он 4	4122		
Telephone No. ► 216-593-2900		FAX No. ▶ 216-593-29				
If the organization does not have an office or place of busing	- ness in the l li	<del></del>			<b>b</b> [	
If this is for a Group Return, enter the organization's four di			 fthie ie foi	the whole	aroup checkt	hie
box . If it is for part of the group, check this box		ach a list with the names and EINs of			-	1113
4 I request an additional 3-month extension of time until		15, 2013	airmemo	era the evi	ension is ior	
•	7777 7	, 2011 , and endin	TIIN	30, 3	2012	
5 For calendar year, or other tax year beginning		<del></del>	~		2012	
6 If the tax year entered in line 5 is for less than 12 months	s, check reas	on: Initial return	Final r	elurn		
Change in accounting period						
7 State in detail why you need the extension THE INFORMATION REQUIRED FOR	7 COM	DIETE ETTING TO NO	ייים עדי ייי	7\ T/7\ T 7	ים דכו א	—
THE INTOMPATION REQUIRED FOR	A COM.	EDELE LIDING IS NO	T 1127	MVAI	GADUE •	
					· · · · · · · · · · · · · · · · · ·	
			- ,			
8a If this application is for Form 990-BL, 990-PF, 990-T, 472	.0, or 6069, e	nter the tentative tax, Jess any				^
nonrefundable credits. See instructions.			8a	_\$		0.
b If this application is for Form 990-PF, 990-T, 4720, or 600						
tax payments made. Include any prior year overpayment	t allowed as a	a credit and any amount paid				
previously with Form 8868.			8b_			0.
c Balance due. Subtract line 8b from line 8a include your	payment wit	th this form, if required, by using	- f			
EFTPS (Electronic Federal Tax Payment System). See in			8c	\$		0.
		st be completed for Part II o	-			
Under penalties of perjury, I declare that I have examined this form, inc	luding accomp	panying schedules and statements, and to	the best o	my knowle	dge and belief,	
t is true, correct, and complete, and that I am authorized to prepare thi				_1	nlin	
Signature Title	- ASSIS	TANT TREASURER	Da <u>te</u>	<u> 2</u>	7/13	
<b>&gt;</b>				Form	8868 (Rev. 1-2	012)

Form **8868** 

(Rev January 2012)

Department of the Treasury Internal Revenue Service

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

► File a separate application for each return.

OMB No 1545-1709

Form 8868 (Rev 1-2012)

• If you	ı are filing for an Automatic 3-Month Extension, complet	e only Pa	rt I and check this box			<b>▶</b> X
•	ı are filing for an Addit <mark>ional (Not Automatic) 3-Month Ex</mark> t		· · · · · ·			
Do not	complete Part II unless you have already been granted a	in automa	tic 3-month extension on a previous	sly filed For	m 8868	
	nic filing <sub>(e-file)</sub> . You can electronically file Form 8868 if y					
	d to file Form 990-T), or an additional (not automatic) 3-mor		•		•	
	to file any of the forms listed in Part I or Part II with the exc					
	al Benefit Contracts, which must be sent to the IRS in pap		(see instructions) For more details o	on the elec	tronic filing o	f this form,
	w irs gov/efile and click on e-file for Charities & Nonprofits					
Part	***					
A corpo Part I o	oration required to file Form 990-T and requesting an autor nly	natic 6-mo	onth extension - check this box and	complete		<b>D</b>
	er corporations (including 1120-C filers), partnerships, REM ncome tax returns	ICs, and ti	rusts must use Form 7004 to reques	st an exten.	sion of time	
Туре о	Name of exempt organization or other filer, see instru	ctions		Employer	identification	number (EIN) or
print	MANDEL SUPPORTING FOUNDATIONS - JACK N.					
	& LILYAN MANDEL FUND			X	34-13505	66
File by thi due date		or suite no. If a P.O. box, see instructions.  Social security number (SS				r (SSN)
filing youi return Se	25701 SCIENCE PARK DRIVE				•	
instructio		oreign add	ress, see instructions			
	CLEVELAND, OH 44122	Ü	,			
Enter tl	ne Return code for the return that this application is for (file	e a separa	te application for each return)			0 1
Applic	ation	Return	Application			Return
ls For		Code	ls For			Code
Form 9	90	01	Form 990-T (corporation)			07
Form 9		02	Form 1041-A			08
Form 9		01	Form 4720			09
Form 9		04	Form 5227			10
	90-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
	90-T (trust other than above)	06	Form 8870			12
	BARRY REIS		1 01111 0070	<del></del>		
• The	books are in the care of > 25701 SCIENCE PARK DR	VE - CL	EVELAND, OH 44122			
	phone No > 216-593-2900		FAX No > 216-593-2901	<del></del>		
	e organization does not have an office or place of busines	s in the Ur				
	is is for a Group Return, enter the organization's four digit			If this is fo	r the whole a	roup, check this
	. If it is for part of the group, check this box	7			-	
	request an automatic 3-month (6 months for a corporation				era tric exter	131011 13 101
•			tion return for the organization nam		The extension	חח
	s for the organization's return for:	- 0.94	inon rotal rotal organization ham	ica above	THO CALCITOR	11
_	➤ □ calendar year or					
1	X tax year beginning JUL 1, 2011	. an	dending JUN 30, 2012			
•					<b>-</b> '	
2 I	f the tax year entered in line 1 is for less than 12 months, one Change in accounting period	check reas	on· Initial return	Fınal retur	n	
20 1	f this application is far Form COO DI COO DE COOT 4700	or 6000 -	mtouth a tout tour tour			
	f this application is for Form 990-BL, 990-PF, 990-T, 4720, nonrefundable credits. See instructions	ur 6069, 6	enter the tentative tax, less any	25		0.
-		entoren	refundable credits and	3a	\$	
	f this application is for Form 990-PF, 990-T, 4720, or 6069,			3L		0.
_	estimated tax payments made Include any prior year over			3b	\$	
	Balance due. Subtract line 3b from line 3a Include your pa		•	_	_	Δ.
	by using EFTPS (Electronic Federal Tax Payment System)			3c	\$	0.
	ur urwarate dolog lo make an electronic timo withdrawal l	WITH THIS -	Orm 8868 COO LORM 8/152.5() 00/2 5	-0rm 9970	1 tor novem	ADT IDETRICTIONS

LHA

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

### SCHEDULE C (Form 990 or 990-EZ)

**Political Campaign and Lobbying Activities** 

For Organizations Exempt From Income Tax Under section 501(c) and section 527

➤ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

If the organization answered "Yes" to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes" to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

	e organization answered "Yes" to		Tax), or Form 990-EZ	, Part V, line 35c (Proxy Ta	ax), then
	Section 501(c)(4), (5), or (6) organizate e of organization MANDEL SUPP	ons Complete Part III		Emple	oyer identification number
IVAIII	& LILYAN MA		.K N.	Limpie	34-1350566
Pai		anization is exempt und	er section 501(c)	or is a section 527 or	
1 2	Provide a description of the organiz Political expenditures Volunteer hours				
Pa	្រ្តាំ Complete if the org	janization is exempt und	ler section 501(c)(	3).	
1	Enter the amount of any excise tax	incurred by the organization und	der section 4955	<b>▶</b> \$	
2	Enter the amount of any excise tax	incurred by organization manage	ers under section 4955	<b>▶</b> \$	
3	If the organization incurred a section	n 4955 tax, did it file Form 4720	for this year?		Yes No
4a	Was a correction made?				└── Yes └── No
	If "Yes," describe in Part IV	janization is exempt und	ler section 501(c),	except section 501(	c)( <del>3</del> ).
1	Enter the amount directly expended				
	Enter the amount of the filing organ		•		<del></del>
	exempt function activities		· ·	▶ \$	
3	Total exempt function expenditures	s. Add lines 1 and 2 Enter here a	and on Form 1120-POL.		
	line 17b		,		
4	Did the filing organization file Form	1120-POL for this year?			Yes No
	Enter the names, addresses and er made payments. For each organiza contributions received that were pr political action committee (PAC) If	nployer identification number (El tion listed, enter the amount pai omptly and directly delivered to	d from the filing organiz a separate political orga	ration's funds Also enter th anization, such as a separa	e amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form 990 or 990-EZ) 2011 &	LILYAN MANDEL F	UND		34-1350	1566	Page 2
Partill-A Complete if the orga	nization is exen	npt under section	n 501(c)(3) and fil	ed Form 5768		
(election under secti	on 501(h)).					
A Check If the filing organization	on belongs to an affil	ated group (and list in	Part IV each affiliated	group member's name	e, address,	EIN,
expenses, and share	of excess lobbying e	expenditures)				
B Check  if the filing organization	on checked box A an	d "limited control" pro	visions apply.			
Limits	on Lobbying Exper	ditures		(a) Filing	(b) Affiliate	
		nts paid or incurred.)		organization's totals	tota	.ls
· · · · · · · · · · · · · · · · · · ·				101015		
1a Total lobbying expenditures to influe						
<b>b</b> Total lobbying expenditures to influe	=	ly (direct lobbying)	l			
c Total lobbying expenditures (add line	•					
d Other exempt purpose expenditures						
e Total exempt purpose expenditures	· ·	•				
f Lobbying nontaxable amount Enter				<del></del>	-	
If the amount on line 1e, column (a) or		bying nontaxable am	ount is:		-	•
Not over \$500,000	-	the amount on line 1e		** · ```	,	
Over \$500,000 but not over \$1,000,		0 plus 15% of the exc	•	Essertation levels land		
Over \$1,000,000 but not over \$1,50	1	0 plus 10% of the exc			Sec. 1. 10	*
Over \$1,500,000 but not over \$17,0	\$1.000.	0 plus 5% of the exce	ss over \$1,500,000			×
Over \$17,000,000	\$1,000,					,
g Grassroots nontaxable amount (enti-	or 25% of line 1f	<del></del>		The state of the s	_ / 4_ /*_	
h Subtract line 1g from line 1a If zero	•			· · ·	_	
Subtract line 1f from line 1c If zero						
If there is an amount other than zero		line 1. did the organiz	ation file Form 4720			
reporting section 4911 tax for this y		mic ii, ala tre organiz	410111101 01111 4720	Г	Yes	☐ No
		eraging Period Under	Section 501(h)			
(Some organiza		ection 501(h) election		plete all of the five		
coli	umns below. See th	e instructions for line	es 2a through 2f on p	age 4.)		
	Lobbying Expe	nditures During 4-Yea	ar Averaging Period			
Calendar year						
(or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) T	otal
					ļ	
2a Lobbying nontaxable amount		Van to the Colombia Colombia Colombia		(III Speed V. J. Copper Ministration Section S		
b Lobbying ceiling amount						
(150% of line 2a, column(e))	***					
- Tabel labeling a superside was						
c Total lobbying expenditures					-	
d Grassroots nontaxable amount						
e Grassroots ceiling amount				**************************************		
(150% of line 2d, column (e))						
(	- 20 24 - 1 400 All 120 4 All 128	**************************************			t	
f Grassroots lobbying expenditures					1	

Schedule C (Form 990 or 990-EZ) 2011

## Schedule C (Form 990 or 990-EZ) 2011 & LILYAN MANDEL FUND 34-1350566 Part 1-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For ea	ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description	(a	3)	(b	)
of the	lobbying activity.	Yes	No	Amo	unt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	, ,	6 1 1	,	×
а	Volunteers?		Х		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Х	r	
С	Media advertisements?		Х		
d	Mailings to members, legislators, or the public?		х		
е	Publications, or published or broadcast statements?		х		
f	Grants to other organizations for lobbying purposes?	Х			3,333.
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Х		-
ħ	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х		
i	Other activities?		Х		
j	Total Add lines 1c through 1i				3,333.
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х		~
	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		13.3		
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6).	ion 501(c)	)(5), or se	ection	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		
1	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes."  Dues, assessments and similar amounts from members		1	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures).	tical			
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
	Carryover from last year		2b		
	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the e	xcess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	d political			
	expenditure next year?		4		
_5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par	UN Supplemental Information				
Com	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5;	Part II-A; and	d Part II-B, I	ne 1 Also,	complete
	oart for any additional information. 1 II-B, LINE 1, LOBBYING ACTIVITIES:				
	RIBUTIONS TO CUYAHOGA COUNTY ACTION COMMITTEE - CUYAHOGA COUNTY				
					<u> </u>
HEAL	TH & HUMAN SERVICES LEVY				

### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
► Complete of the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

MANDEL SUPPORTING FOUNDATIONS - JACK N.

Employer identification number

	& LILYAN MANDEL FUND		A.:		34-1350300
,Par			Other Similar Fund	ds or Accounts	Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6				
		(a) Dor	nor advised funds	(b) Funds a	nd other accounts
1	Total number at end of year				
2	Aggregate contributions to (during year)				
3	Aggregate grants from (during year)				
4	Aggregate value at end of year				
	Did the organization inform all donors and donor advisors in wri	iting that the	assets held in donor ad	vised funds	
	are the organization's property, subject to the organization's ex	-			Yes No
6	Did the organization inform all grantees, donors, and donor adv	_		be used only	
	for charitable purposes and not for the benefit of the donor or co				
	impermissible private benefit?		, ,		Yes No
Par	till Conservation Easements. Complete if the organ	nızatıon ans	wered "Yes" to Form 990	, Part IV, line 7	
1	Purpose(s) of conservation easements held by the organization			·	
•	Preservation of land for public use (e.g., recreation or edu	•	Preservation of an	historically importai	nt land area
	Protection of natural habitat	254110111	Preservation of a c		
	Preservation of open space		reservation of a c	oranica riistorio stru	oral o
2		d consonist	ion contribution in the fo	m of a conceniation	n assament on the last
2	Complete lines 2a through 2d if the organization held a qualified	u conservat	ion continuation in the fol	ini ol a conservatio	ii casciliciii oli lile iasi
	day of the tax year			The He	ld at the End of the Tax Year
	Tatal aumbas of appears their accession				IN BE THE CHU OF THE TAX TEST
a	Total number of conservation easements			2a	
b	Total acreage restricted by conservation easements	_4	-1 ··- (-)	2b	
C	Number of conservation easements on a certified historic struc		* *	2c	<del></del>
d		ter 8/17/06,	and not on a historic stru		
	listed in the National Register			2d	
3	Number of conservation easements modified, transferred, release	ased, exting	uished, or terminated by	the organization du	uring the tax
	year ▶		. •		
4	Number of states where property subject to conservation ease			_	
5	Does the organization have a written policy regarding the period	odic monitori	ng, inspection, handling	of	
	violations, and enforcement of the conservation easements it h				└─ Yes └─ No
6	Staff and volunteer hours devoted to monitoring, inspecting, a	ind enforcing	g conservation easement	s during the year 🕨	·
7	Amount of expenses incurred in monitoring, inspecting, and er	_		_	
8	Does each conservation easement reported on line 2(d) above	satisfy the	requirements of section 1	170(h)(4)(B)(ı)	
	and section 170(h)(4)(B)(ii)?				Yes No
9	In Part XIV, describe how the organization reports conservation	n easements	s in its revenue and expe	nse statement, and	balance sheet, and
	include, if applicable, the text of the footnote to the organization	on's financia	I statements that describ	es the organization	's accounting for
	conservation easements				
Pa	Tt.III Organizations Maintaining Collections of	Art, Histo	orical Treasures, or	Other Similar	Assets.
	Complete if the organization answered "Yes" to Form 9	90, Part IV, I	ine 8		
1a	If the organization elected, as permitted under SFAS 116 (ASC	2 958), not to	report in its revenue sta	tement and balanc	e sheet works of art,
	historical treasures, or other similar assets held for public exhib				
	the text of the footnote to its financial statements that describe			•	
b	If the organization elected, as permitted under SFAS 116 (ASC			nent and balance sh	neet works of art, historical
_	treasures, or other similar assets held for public exhibition, edu				
	relating to these items:			,	
	(i) Revenues included in Form 990, Part VIII, line 1			<b>*</b>	
	(ii) Assets included in Form 990, Part X			<b>Σ</b> Ψ_	
2	If the organization received or held works of art, historical treas	elirge or oth	or similar assets for finar		
2	•			iciai gairi, provide	
_	the following amounts required to be reported under SFAS 110	o (430 838)	relating to these items.	<b>k</b> 6	
a	Revenues included in Form 990, Part VIII, line 1			▶ \$_	
α	Assets included in Form 990, Part X			<b>▶</b> \$_	·

Sche	dule D (Form 990) 2011 & LILYAN MA	NDEL FUND						4-13505	66	Page_2
Par	Organizations Maintaining C	ollections of Ar	t, Histo	orical Tre	easures, c	or Other	r Simil	ar Asse	<b>ts</b> (contii	าued)
3	Using the organization's acquisition, accessi	on, and other record	s, check	any of the f	following tha	t are a sig	ınıfıcant	use of its	collection	ı ıtems
	(check all that apply)									
а	Public exhibition	d			nange progra	ams				
b	Scholarly research	е		Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	•		-	-			ose in Par	t XIV	
5	During the year, did the organization solicit o	r receive donations o	of art, his	torical treas	sures, or oth	er sımılar	assets		٦	
1500	to be sold to raise funds rather than to be ma						_		<u> Yes</u>	No
Pai	Escrow and Custodial Arran		ete if the	organizatio	n answered	"Yes" to F	Form 990	, Part IV,	line 9, or	
_	reported an amount on Form 990, Par	<del></del>		<del></del>		<del></del>	<del></del>			
1a	Is the organization an agent, trustee, custodi	an or other intermed	liary for c	contribution	s or other as	ssets not i	ncluded	_	٦.,	┌─┐,,
	on Form 990, Part X?								<b>」Yes</b>	L No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	illowing t	able						
							-	_	Amoun	<u>:                                    </u>
	Beginning balance						1c	_		
	Additions during the year						1d			
_	Distributions during the year						1e			
f O-	Ending balance	000 D-+ V I	010				1f		Yes	No
	Did the organization include an amount on Fi	orm 990, Part X, line	121?					L	_ res	NO
	If "Yes," explain the arrangement in Part XIV	f the organization ar	newored '	"Ves" to Fo	rm 000 Part	t IV line 10				
. 207	Endownient Landor Complete	(a) Current year		rior year	(c) Two yea			years back	(a) Four	r years back
19	Beginning of year balance	(a) Current year	(0)1	ioi yeai	(C) Two year	13 back (	u) illico	y cars back	(e) Tou	yours buok
	Contributions								F	<del>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</del>
	Net investment earnings, gains, and losses	· · - · · - · · · · · · · · · · · · · ·				-	-	_	WE T	<del></del>
c d	Grants or scholarships					<del></del>			100 may 1	+
	Other expenditures for facilities		_				-	_	WE !	7 · · · · ·
·	and programs		}		ļ				2.5	
f	Administrative expenses								2275	<del></del>
9	End of year balance								5	34
2	Provide the estimated percentage of the cur	rent year end haland	e (line 1	a column (s	l held as:			_	4.4450000000000000000000000000000000000	4001 18
	Board designated or quasi-endowment	rone your one building	% %	g, oolaliii (c	2)) 11010 00					
b	Permanent endowment	%	<b>—</b> ~							
	Temporarily restricted endowment	^								
	The percentages in lines 2a, 2b, and 2c should									
3a	Are there endowment funds not in the posse		ation tha	it are held a	ind administ	ered for th	ne ordan	zation		
	by .					•	3			Yes No
	(i) unrelated organizations								3a(ı)	
	(ii) related organizations								3a(ii)	
b,	If "Yes" to 3a(ii), are the related organization:	s listed as required o	on Sched	lule R?					3b	
4	Describe in Part XIV the intended uses of the	e organization's end	owment	funds.						
Pa	t VI Land, Buildings, and Equipn	nent. See Form 99	0, Part X,	line 10				-		
	Description of property	(a) Cost or o	other	(b) Cost	or other	(c) Ac	cumulat	ed	(d) Boo	k value
		basıs (ınvesti	ment)	basis	(other)	<u> </u>	preciation			
1a	Land		]				)1 √ <del>                                    </del>			
b	Buildings									
¢	Leasehold improvements		]							
d	Equipment									
	Other					<u> </u>				
Tota	I. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	t X, colun	nn (B), line	10(c).)					0

Schedule D (Form 990) 2011

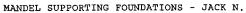
& LILYAN MANDEL FUND

			_
P	ao	e	3

34-1350566

Schedule D (Form 990) 2011 & LILYAN MANDEL F			34-1350566	Page 3
Part VII Investments - Other Securities. See	Form 990, Part X, line 12			
(a) Description of security or category (including name of security)	(b) Book value	Co	(c) Method of valuation ost or end of year market value	
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A) MAF INVESTMENTS LTD	78,410,981.	END-OF-YEAR	MARKET VALUE	
(B) COLONY INVESTORS IV, LP	342,200.	END-OF-YEAR	MARKET VALUE	
(C) FRANCISCO PARTNERS	1,637,527.	END-OF-YEAR	MARKET VALUE	
(D) GREENHILL CAPITAL PARTNERS (CAYMAN),				
(E) LP	151,763.	END-OF-YEAR	MARKET VALUE	
(F) LANDMARK PARTNERS IX	614,604.		MARKET VALUE	
(G) FMVP II, L.P.	32,621.		MARKET VALUE	<del></del>
(H) SPIRE CAPITAL PARTNERS, LP	512,646.		MARKET VALUE	
	403,914.		MARKET VALUE	
		END-OF-IEAR	TARRET VALUE	
Total (Col (b) must equal Form 990, Part X, col (B) line 12.)	560,281,760.			
Part VIII Investments - Program Related. Se	ee Form 990, Part X, line 1	3		
(a) Description of investment type	(b) Book value	С	(c) Method of valuation ost or end-of-year market value	
(1)				
(2)				
(3)				
(4)				
(5)				-
(6)				
(7)				
(8)				
(9)	-			
(10)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)	<del></del>	Same Same	All and the second of the seco	201 1 2 2
Part IX Other Assets. See Form 990, Part X, line	15	5 1/4/44 April 1997 - Security	1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984	1 39% - 2 - L
	Description		(b) Bo	ook value
			(, -	
(1)				
(2)	<del></del>	<del></del>		
(3)	<del></del>	·		
(4)	·			
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Column (b) must equal Form 990, Part X, col (B) line	e 15)		A	
Part X Other Liabilities. See Form 990, Part X,	line 25.			
1. (a) Description of liability		(b) Book value		14 15 15 15 15 15 15 15 15 15 15 15 15 15
(1) Federal income taxes				
(2)		<del></del>		
(3)				
(4)	<del></del>	<del></del>		
(5)				
(6)				
		<del></del>		
(8)				
(9)				
(11)			- b 、	
Total. (Column (b) must equal Form 990, Part X, col (B) line	e 25 ) <b>&gt;</b>			
	e 25 ) o the organization's financial state	ments that reports the org	panization's liability for uncertain tax position	s unoer

Sche	dule D (Form 990) 2011 & LILYAN MANDEL FUND		34-1350566 Page <b>4</b>
Pai	t:XI  Reconciliation of Change in Net Assets from Form 990 to A	Audited Financial Sta	itements
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	<del></del>
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8 9	
9	Total adjustments (net) Add lines 4 through 8		
10 Par	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and to XIII Reconciliation of Revenue per Audited Financial Statemer		r Return
1	Total revenue, gains, and other support per audited financial statements	<u> </u>	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	`.
С	Recoveries of prior year grants	2c	<
d	Other (Describe in Part XIV)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
С	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5
· Pa	Reconciliation of Expenses per Audited Financial Stateme	ents With Expenses p	per Return
1	Total expenses and losses per audited financial statements		1 5/88/9/3
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	ا م ا	
a		2a	
	Prior year adjustments	2b	
	Other losses	2c	
d	,	2d	
e 2	Add lines 2a through 2d Subtract line 2e from line 1		3
3 4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
a		4a	
	Other (Describe in Part XIV)	4b	
	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5
	rt XIV Supplemental Information		
Con	iplete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II	I, lines 1a and 4; Part IV, lin	es 1b and 2b; Part V, line 4, Part
X, lır	ne 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b Also comp	lete this part to provide any	y additional information
INC	OME TAXES - THE FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAXES (	NDER	
	THE SALES AND THE THEORY PROPERTY AND THEORY OF THE SALES AND THE SALES		
SEC	TION 501(C)(3) OF THE INTERNAL REVENUE CODE, EXCEPT ON INCOME DE	EKIVED	
FRO	M UNRELATED BUSINESS ACTIVITIES. THE FOUNDATION FOLLOWS THE		
TUA	HORITATIVE GUIDANCE ON ACCOUNTING FOR AND DISCLOSURE OF UNCERTA	INTY IN	
INC	OME TAXES WHICH PRESCRIBES THE MINIMUM RECOGNITION THRESHOLD A	XAT	
POS	ITION MUST MEET IN CONNECTION WITH ACCOUNTING FOR UNCERTAINTIES	IN	
INC	OME TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN BY AN ENTITY BE	FORE	
BEI	NG MEASURED AND RECOGNIZED IN THE FINANCIAL STATEMENTS. NO INCO	OME TAX	Schedule D (Form 990) 2011
4000			201122210 D (1 0111 000) 20 1 1



Schedule D (Form 990) 2011 & LILYAN MANDEL FUND	34-1350566	Page 5
Schedule D (Form 990) 2011 & LILYAN MANDEL FUND  Part XIV Supplemental Information (continued)		
		·
LIABILITY FOR UNCERTAIN TAX POSITIONS OR PROVISION FOR INCOME TAX HAS BEEN		
RECOGNIZED IN THE COMBINED ACCOMPANYING FINANCIAL STATEMENTS, THE		
EARLIEST YEAR THAT THE FOUNDATION IS SUBJECT TO EXAMINATION BY THE IRS IS		
THE FISCAL YEAR ENDED JUNE 30, 2009. THE FOUNDATION EXPENSES INTEREST AND		
PENALTIES AS INCURRED.		
	<u></u>	
	<del></del>	
	<del></del>	

& LILYAN MANDEL FUND

Schedule D (Form 990) 2011 & LILYAN MANDEL FUNI Part XIV Supplemental Information (continued)

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
G ASIAN COMMUNICATIONS FUND II	55,362.	FMV
OVERSEAS FUND, LTD,	993,315.	FMV
DX PAINE CAPITAL PARTNERS II/INTERNATIONAL	3,771,705.	FMV
RONTENAC VIII LIMITED PARTNERSHIP	1,006,938.	FMV
CONTENAC VIII DIMITED FARINERSHIF	1,000,330.	THY
IRSTMARK III, LP	1,532,468.	FMV
IMON CHARITABLE PUBLIC LLC	285,963,688.	FMV
SF PRIVATE EQUITY FUND LLC	99,267,482.	FMV
SF REAL ESTATE FUND LLC	60,312,517,	FMV
HESTER CAPITAL LP	21,437,029	FMV
ARKWOOD LLC	3,835,000	FMV
· · · · · · · · · · · · · · · · · · ·		<del>                                     </del>
		ļ

## SCHEDULE F (Form 990)

### **Statement of Activities Outside the United States**

► Complete if the organization answered "Yes" to Form 990,

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Part IV, line 14b, 15, or 16.

➤ Attach to Form 990. ➤ See separate instructions.

Open to Public Inspection

vame of the organization				Employer identifi	Cation number
MANDEL SUPPORTING FOUND	ATIONS - JAC	K N.		34-1350566	
LILYAN MANDEL FUND	motion on A	ativities Out	side the United States. Comple		/"
1		Ctivities Out	.side the Officed States. Comple	ete if the organization answered	res
to Form 990, Part  1 For grantmakers. Does		maintain record	ds to substantiate the amount of its gra	ente and other assistance	
•	•		the selection criteria used to award the		Yes No
the grantees enginetry to	or the grants or e	issistance, and	ino selection offend assa to award the	grants of assistance	
2 For grantmakers. Descri	ribe in Part V the	organization's i	procedures for monitoring the use of it	s grants and other assistance out:	side the
United States			·	·	
3 Activities per Region (Tr	ne following Part	I, line 3 table ca	an be duplicated if additional space is i	needed)	
(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in region	(e) If activity listed in (d)	(f) Total
	offices	employees, agents, and independent contractors	(by type) (e g , fundraising, program	is a program service,	expenditures for and
	in the region	independent	services, investments, grants to	describe specific type of service(s) in region	ınvestments
·		in region	recipients located in the region)	of service(s) in region	in region
	:			Į.	
'					
MIDDLE EAST AND		_			
NORTH AFRICA	0	0	GRANTMAKING		10,753,357.
COMMENT AVERTON AND		<b>\</b>		}	Ì
CENTRAL AMERICA AND THE CARIBBEAN	,	0	INVESTMENTS		4,972,147.
THE CARIBBEAN	- ·	ļ	INVESTMENTS		1,372,117.
MIDDLE EAST AND				OVERSIGHT OF GRANT	1
NORTH AFRICA	) .		PROGRAM SERVICES	RECIPIENTS	5,192.
					<del>                                     </del>
			1		
	}		1		
	,				
					<u> </u>
	1	1	1		
			1		
					<del> </del>
					1
		0			\$\frac{15}{730,696}.
3 a Sub-total		1			13,730,030.
b Total from continuation	1				· o.
sheets to Part I  c Totals (add lines 3a	<del> </del>	<del>`</del>			*
and 3b)		0	1.00		15,730,696.
und obj	<del></del>	1	THE CONTRACT OF STREET STREET,	n 10mm/mm/mm/mm/mm/mm/mm/mm/mm/mm/mm/mm/mm/	·   / · / · /

& LILYAN MANDEL FUND

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000. Schedule F (Form 990) 2011

Page 2

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(a) Name of organization and EIN (if applicable)  (b) IRS code section and EIN (if applicable)  (c) Region (c) Region and EIN (if applicable)	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST AND NORTH AFRICA MIDDLE EAST AND NORTH AFRICA	OPERATING SUPPORT OPERATING SUPPORT	554,361.	WIRE TRANSFER	0	-	
		MIDDLE	OPERATING SUPPORT	129.	WIRE TRANSFER	0.		
		MIDDLE EAST AND NORTH AFRICA	OPERATING SUPPORT	314,722,WIRE	VIRE TRANSFER	.0		
		MIDDLE EAST AND NORTH AFRICA	SCHOOL CONSTRUCTION	6,000,000.WIRE	VIRE TRANSFER	0		
1 to								
al number of r	ecipient organizatio	ons listed above that are	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by	foreign country,	recognized as tax·e)	empt by		\$
2 2 2	2 500 5 001 05 0	シャンション さつきょうこう つばこし						

132072 01-23-12

Enter total number of other organizations or entities

က

Schedule F (Form 990) 2011

& LILYAN MANDEL FUND

Schedule F (Form 990) 2011

34-1350566

Page 3

Epartilia Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16

Schedule F (Form 990) 2011 (h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (c) Number of (d) Amount of recipients cash grant Part III can be duplicated if additional space is needed (b) Region (a) Type of grant or assistance

	ule F (Form 990) 2011 & LILYAN MANDEL FUND	34-1350566	Page 4
Part	V  Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign		
_	Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	X Yes	□ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	X Yes	□ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	X Yes	□ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	X No

Schedule F (Form 990) 2011

Page 5

& LILYAN MANDEL FUND

chedule F	(Fo	m 990) 2	2011	∝	PITTIAM	MANDED	FUNI

Complete this part to provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method,
amounts of investments vs expenditures per region); Part II, line 1 (accounting method), Part III (accounting method); and Part III, column
(c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information
SCHEDULE F, PART I, LINE 2. ALL GRANTEES ARE REQUIRED TO SIGN AND SUBMIT
GRANT BUDGETS THAT STIPULATE THE TERMS AND CONDITIONS OF THE GRANT
INCLUDING HOW THE DOLLARS ARE TO BE SPENT AND OVER WHAT PERIOD OF TIME.
THE ORGANIZATION REQUIRES MONTHLY BUDGET TO ACTUAL REPORTS AND ANNUAL
AUDITED FINANCIAL STATEMENTS. THE GRANTEES SUBMIT MONTHLY PROGRAMMATIC
UPDATES. PERIODIC SITE VISITS ARE CONDUCTED BY CERTAIN TRUSTEES TO
MONITOR THE PROGRESS OF FUNDED PROGRAMS.
BASED ON RECENTLY AMENDED WORDING IN THE IRS' 990 INSTRUCTIONS, THE
CURRENT LIST OF GRANTS IN SCHEDULE F REFLECTS GRANTS ACCRUED IN PRIOR
YEARS, BUT NOT PAID, AS WELL AS CURRENT YEAR GRANT EXPENSES. GRANT
SCHEDULES IN PREVIOUS 990 FILINGS HAD BEEN PRESENTED ON A PAID/CASH
BASIS.
AMOUNTS INCLUDED IN GRANTS PAYABLE AS OF 7/1/2011 AND INCLUDED IN THE
GRANTS LISTED ON SCHEDULE F ARE AS FOLLOWS:
MIDDLE EAST AND NORTH AFRICA - \$6,134,879

_	
SCHEDULE	(Form 990)

Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

OMB No 1545-0047

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

Open to Publications in Spections	Employer identification number	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

				Attach to I dill soo.				A. W. W. W. T. A. V. VI T. W. C. W.
Name of the organization MANDEL SUPPORTING FOUNDATIONS - JACK N	DEL SUPPORTING	S FOUNDATION	NS - JACK N.					Employer identification number
E L)	& LILYAN MANDEL FUND	FUND						34-1350566
্টিটুন্ধী General Information on Grants and Assistance	on Grants and	Assistance			j j			
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	ntain records to si	ubstantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	stance, and the selec	tion
criteria used to award the grants or assistance?	grants or assistan	ce?						X Yes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	anization's proced	dures for monito	pring the use of grant	funds in the Unite	d States			
<b>Partilly</b> Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	ssistance to Gov	ernments and	Organizations in the	e United States.	complete if the orga	Inization answered "Y	es" to Form 990, Part	IV, line 21, for any
recipient that receive	d more than \$5,0	00. Check this	box if no one recipier	nt received more th	ian \$5,000 Part II	can be duplicated if	recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed	ded 🕨
1 (a) Name and address of organization or government	rganization	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	۳	(f) Method of valuation (book, FMV, appraisal.	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					assistance	other)		
AMERICAN FRIENDS OF THE HEBREW	IEBREW							
	-							

1 (a) Name and address of organization or government	( <b>b</b> ) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN FRIENDS OF THE HEBREW							
UNIVERSITY, INC NATIONAL			•				
HEADQUARTERS, ONE BATTERY PARK							MANDEL CENTER FOR THE
PLAZA, 25TH FLOOR - NEW YORK, NY	13-1568923	501 (C) (3)	833,333.	0.			HUMANITIES
							CONSTRUCTION PROGRAM.
AMERICAN FRIENDS OF THE ISRAEL							MANDEL WING FOR JEWISH
MUSEUM - 500 FIFTH AVENUE, SUITE				_			ART AND LIFE, MUSEUM
2540 - NEW YORK, NY 10110	23-7182582	501 (C) (3)	2,444,445.	0.			ENDOWMENT FUND
BRANDEIS UNIVERSITY							MANDEL CENTER FOR STUDIES
OFFICE OF THE PRESIDENT: MS 100							IN JEWISH EDUCATION,
415 SOUTH STREET - WALTHAM, MA							MANDEL HUMANITIES CENTER
02454	04-2103552	501 (C) (3)	613,514.	0			AND MANDEL HUMANITIES
CASE WESTERN RESERVE UNIVERSITY							MANDEL CENTER FOR
OFFICE OF DEVELOPMENT 10900 EUCLID							NONPROFIT ORGANIZATIONS,
AVENUE, ADELBERT 124 - CLEVELAND,							MANDEL SCHOOL OF APPLIED
OH 4410	34-1018992	501 (C) (3)	463,833.	0.			SOCIAL SCIENCES
HEBREW UNION COLLEGE - JEWISH							MANDEL FELLOWS
INSTITUTE OF RELIGION - C/O							RABBI/EDUCATOR LEADERSHIP
NATIONAL OFFICE OF DEVELOPMENT ONE			•	-			PROGRAM, RECRUITING FOR
WEST 4TH STREET - NEW YORK, NY	31-0537067	501 (C) (3)	277,356.	0.			EXCELLENCE, MANDEL
JEWISH COMMUNITY CENTERS	<b>.</b>						MANDEL CENTER FOR
ASSOCIATION OF NORTH AMERICA - 520							LEADERSHIP EXCELLENCE,
EIGHTH AVENUE, 4TH FLOOR - NEW							MANDEL CENTER FOR JEWISH
YORK, NY 10018	13-5599486	501 (C) (3)	200,000.	0.			EDUCATION, MANDEL CENTER
2 Enter total number of section 501(a)(3) and government organizations	nd agyernment or	_	etect in the line 1 table				22.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table LHA For Paperwork Reduction Act Notice, see the instructions for Form 990. SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) (2011)

Schedule I (Form 990) & LILYAN MANDEL FUND

[Partill Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) MANDEL SUPPORTING FOUNDATIONS - JACK N.

Page 1

34-1350566

(a) Name and address of (b) EIN (c) IRC section organization or government (a) Amount of (b) Amount of (c) IRC section (d) Amount of (e) Amount of (f) Method of (f) Metho	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH FEDERATION OF CLEVELAND 25701 SCIENCE PARK DRIVE CLEVELAND, OH 44122	34-0714445	501 <sub>(C) (3)</sub>	1,404,551.	0.			CAPITAL CAMPAIGN FOR NEW BUILDING, FUND FOR JEWISH FUTURE, MANDEL LEADERSHIP EXCELLENCE HRD PROGRAM,
NEIGHBORHOOD PROGRESS, INC. 1956 WEST 25TH STREET, SUITE 200 CLEVELAND, OH 44113	34-1611055	501 (C) (3)	333,333.	0		, and the second	OPERATING SUPPORT
UNITED WAY OF GREATER CLEVELAND 1331 EUCLID AVENUE CLEVELAND, OH 44115	34-6516654	501 (C) (3)	114,624.	0			NEIGHBORHOOD LEADERSHIP DEVELOPMENT PROJECT, CITIZENSHIP INSTITUTE
CLEVELAND INSTITUTE OF ART 11141 EAST BOULEVARD CLEVELAND, OH 44106	34-0714334	501 (C) (3)	100,000	0			FRAMING OUR FUTURE THE CAMPAIGN FOR A NEW COLLEGE OF ART AND DESIGN CAPITAL CAMPAIGN
CLEVELAND MUSEUM OF ART 11150 EAST BOULEVARD CLEVELAND, OH 44106	34-0714336	501 (C) (3)	566,667.	0			CAPITAL CAMPAIGN. JACK, JOSEPH & MORTON MANDEL CONTEMPORARY GALLERY
FRIENDS OF BEZALEL ACADEMY OF ARTS AND DESIGNS INC - 370 LEXINGTON AVE, SUITE 1612 - NEW YORK, NY 10017	13-2952614	501 (C) (3)	. 66, 667.	0.			END OF YEAR EXHIBITION
JEWISH FEDERATIONS OF NORTH AMERICA, INC - 25 BROADWAY - NEW YORK, NY 10004	13-1624240	501 (C) (3)	333,333.	0			MANDEL CENTER FOR LEADERSHIP EXCELLENCE
HADASSAH THE WOMENS ZIONIST ORGANIZATION OF AMERICA, INC - C/O NATIONAL HEADQUARTERS, 50 WEST 58TH STREET - NEW YORK, NY 10019	13-1656651	501 (C) (3)	16,667.	0			HADASSAH MEDICAL ORGANIZATION· OBTAIN JCI ACCREDITATION
MALTZ MUSEUM OF JEWISH HERITAGE 2929 RICHMOND ROAD BEACHWOOD, OH 44122	04-3684531	501 (C) (3)	66,667.	0.			CAMPAIGN FOR OUR FUTURE
							Schedule I (Form 990)

Schedule I (Form 990)

Page 1

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Schedule I (Form 990) GRANT: COMPLETION OF THE RENOVATION AND EXPANSION MANDEL PUBLIC LIBRARY OF POWER OF THREE CAMPAIGN SUPPLEMENTARY CAPITAL NEW MORTON MANDEL WELCOME (h) Purpose of grant or assistance THE JACK, JOSEPH, CAPACITY BUILDING CAPITAL CAMPAIGN WEST PALM BEACH ANNUAL SUPPORT OF BUILDING BUILDING ENTER (g) Description of non-cash assistance Partill Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II) (book, FMV, appraisal, other) (f) Method of valuation °. ö ं ٥. Ö Ö ö (e) Amount of non-cash assistance (d) Amount of cash grant 1,666,667 50,000 1,666,667 833,333 83,333 16,667 83,333 (c) IRC section if applicable 501 (C) (3) 34-1148828 34-0714468 59-1582799 23-7304942 13-3014387 34-0714439 65-1068311 (b) EIN JOG ROAD - BOYNTON BEACH, FL 33472 SEVERANCE HALL, 11001 EUCLID AVENU WEST PALM BEACH LIBRARY FOUNDATION CLEVELAND - 11400 EUCLID AVENUE -MANDEL JEWISH COMMUNITY CENTER OF GREATER PALM BEACHES, INC - 8500 CLEVELAND - 26001 SOUTH WOODLAND NORTH AMERICA - ONE PENNSYLVANIA PLAZA, SUITE 1606 - NEW YORK, NY THE SHALOM HARTMAN INSTITUTE OF 411 CLEMATIS STREET, 3RD FLOOR JEWISH COMMUNITY CENTER OF THE 1501 EUCLID AVENUE, SUITE 200 (a) Name and address of organization or government PLAYHOUSE SQUARE FOUNDATION ROAD - BEACHWOOD, OH 44122 MUSEUM OF CONTEMPORARY ART WEST PALM BEACH, FL 33401 MUSICAL ARTS ASSOCIATION OH 44106 CLEVELAND, OH 44115 OH 44106 CLEVELAND, CLEVELAND. 10119

& LILYAN MANDEL FUND

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed Schedule I (Form 990) (2011)

Page 2

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(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
	ide the information	n required in Part I,	line 2, and any other	formation required in Part I, line 2, and any other additional information	
PART II, LINE 1, COLUMN (H).					
NAME OF ORGANIZATION OR GOVERNMENT: BRANDEIS UNIVERSITY	RSITY				
(H) PURPOSE OF GRANT OR ASSISTANCE: MANDEL CENTER FOR	FOR STUDIES IN JEWISH	N JEWISH			
EDUCATION, MANDEL HUMANITIES CENTER AND MANDEL HUMANITIES	ANITIES QUAD				
NAME OF ORGANIZATION OR GOVERNMENT.					

38

Schedule I (Form 990) (2011)

LEADERSHIP PROGRAM, RECRUITING FOR EXCELLENCE, MANDEL INITIATIVE FOR

(H) PURPOSE OF GRANT OR ASSISTANCE. MANDEL FELLOWS RABBI/EDUCATOR

HEBREW UNION COLLEGE - JEWISH INSTITUTE OF RELIGION

132102 01-27-12

Schedule I (Form 990) 2011 & LILYAN MANDEL FUND	34-1350566	Page 2
Part V Supplemental Information		
VISIONARY LEADERSHIP		
NAME OF ORGANIZATION OR GOVERNMENT		
JEWISH COMMUNITY CENTERS ASSOCIATION OF NORTH AMERICA		
(H) PURPOSE OF GRANT OR ASSISTANCE: MANDEL CENTER FOR LEADERSHIP		
EXCELLENCE, MANDEL CENTER FOR JEWISH EDUCATION, MANDEL CENTER FOR		
EXCELLENCE IN LEADERSHIP AND MANAGEMENT		
DICEDERAL IN HEIDERALIT AND INCHES		
NAME OF ORGANIZATION OR GOVERNMENT: JEWISH FEDERATION OF CLEVELAND		
(H) PURPOSE OF GRANT OR ASSISTANCE: CAPITAL CAMPAIGN FOR NEW BUILDING,		
FUND FOR JEWISH FUTURE, MANDEL LEADERSHIP EXCELLENCE HRD PROGRAM,		
CAMPAIGN FOR JEWISH NEEDS, MSF OPERATING SUPPORT		
SCHEDULE I, PART II		
THE FOUNDATION REPORTS GRANTS ON SCHEDULE I TO VARIOUS 501(C)(3)		
DOMESTIC U.S. CHARITIES WHICH, AS PART OF THEIR ACTIVITIES, FUND		
OVERSEAS PROJECTS AND EACH FILES A SEPARATE FORM 990 AND DETAILED		
SCHEDULE F.		
BASED ON RECENTLY AMENDED WORDING IN THE IRS' 990 INSTRUCTIONS, THE		
CURRENT LIST OF GRANTS IN SCHEDULE I REFLECTS GRANTS ACCRUED IN PRIOR		
YEARS, BUT NOT PAID, AS WELL AS CURRENT YEAR GRANT EXPENSES. GRANT		
SCHEDULES IN PREVIOUS 990 FILINGS HAD BEEN PRESENTED ON A PAID/CASH		
BASIS.		
AMOUNTS INCLUDED IN GRANTS PAYABLE AS OF 7/1/2011 AND INCLUDED IN THE		
GRANTS LISTED ON SCHEDULE I ARE AS FOLLOWS	<del></del>	

Schedule   (Form 990) 2011 & LILYAN MANDEL FUND	34-1350566	Page 2
Part IV Supplemental Information		- rage z
AMERICAN FRIENDS OF THE HEBREW UNIVERSITY, INC - \$833,333		
AMERICAN EDIENDS OF THE ISPACE MISCELL CO. AAA. AAS		
AMERICAN FRIENDS OF THE ISRAEL MUSEUM - \$2,444,445		
BRANDEIS UNIVERSITY - \$363,514		
CASE WESTERN RESERVE UNIVERSITY - \$312,500		
CLEVELAND INSTITUTE OF ART - \$100,000		
CLEVELAND MUSEUM OF ART - \$566 667		
CLEVELAND MUSEUM OF ART - \$566,667		
FRIENDS OF BEZALEL ACADEMY OF ARTS AND DESIGNS, INC - \$33,333		
HADASSAH THE WOMENS ZIONIST ORGANIZATION OF AMERICA, INC - \$16,667		
JEWISH COMMUNITY CENTER OF THE GREATER PALM BEACHES, INC - \$1,666,667	·····	
JEWISH FEDERATION OF CLEVELAND - \$455,884		
JEWISH COMMUNITY CENTERS ASSOCIATION OF NORTH AMERICA - \$166,667		
JEWISH FEDERATIONS OF NORTH AMERICA, INC - \$166,667		
MALTZ MUSEUM OF JEWISH HERITAGE - \$66,667	<del></del>	
MANDEL JEWISH COMMUNITY CENTER OF CLEVELAND - \$833,333		
MUSICAL ARTS ASSOCIATION - \$16,667		
NEIGHBORHOOD PROGRESS, INC - \$166,667		
INTERN MAY OF CREATER CLEVELAND - 664 967		
UNITED WAY OF GREATER CLEVELAND - \$64,967		
SCHEDULE I, PART I, LINE 2: GRANTEES ARE GENERALLY REQUIRED TO SIGN AND		
RETURN A GRANT AWARD LETTER THAT STIPULATES THE TERMS AND CONDITIONS OF		
THE GRANT INCLUDING HOW THE DOLLARS ARE TO BE SPENT, OVER WHAT PERIOD		
THE GRAVE INCOOPING HOW THE DOLLARS ARE TO BE STERT, OVER WHAT PERIOD		
OF TIME AND REPORTING REQUIREMENTS. THE ORGANIZATION REQUESTS WRITTEN		
REPORTS FROM GRANTEES WHO RECEIVE GRANTS OF \$1,000 OR MORE WITHIN 9-12		
NOVEL OF BROWNING BUR GRAND TO		
MONTHS OF RECEIVING THE GRANT. IN SELECTED CASES, SITE VISITS ARE		<del> </del>
CONDUCTED TO MONITOR THE PROGRESS OF FUNDED PROGRAMS.		

# **SCHEDULE J** (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" to Form 990,

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Part IV, line 23. ► Attach to Form 990. ► See separate instructions. MANDEL SUPPORTING FOUNDATIONS - JACK N.

Employer identification number

& LILYAN MANDEL FUND

34-1350566

Pa	rt Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,	, ×,	1	ٳٙ
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		;	
	First-class or charter travel Housing allowance or residence for personal use		, [	ļ
	Travel for companions Payments for business use of personal residence		·	İ
	Tax indemnification and gross-up payments Health or social club dues or initiation fees		. 1	
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)		ì	Ì
		1		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b_	<b> </b>	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
		1	;	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's	2	, ,	l
	CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to		h .	ĺ
	establish compensation of the CEO/Executive Director Explain in Part III.			ŀ
	Compensation committee Written employment contract	1		
	Independent compensation consultant Compensation survey or study	,^},	, ,	
	Form 990 of other organizations  Approval by the board or compensation committee		,	
			} °€` + :	ĺ
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization.		73	ļ
а	Receive a severance payment or change-of-control payment?	4a	<del> </del>	Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Х	<u> </u>
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	S + # -	X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	-		İ
				,
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.		1 is	
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	7		. 、 .
	contingent on the revenues of:		Later	
а	The organization?	5a	<b>├</b> ─	X
b	Any related organization?	5b	- 12 K ~ 1 m/s	X
	If "Yes" to line 5a or 5b, describe in Part III.			<b>W</b> .
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:	12.7		
а	The organization?	6a	<del> </del>	X
b	Any related organization?	6b	1,78157	X
	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7	-	X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the		1	
	ınıtıal contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	+	X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in		1	
	Regulations section 53.4958-6(c)?	9		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2011

& LILYAN MANDEL FUND

Schedule J (Form 990) 2011

34-1350566

Partill Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

	1	(B) Breakdown of W-2	N-2 and/or 1099-MIS	and/or 1099-MISC compensation	(0)	(Q)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	Retirement and other deferred compensation	Nontaxable benefits	l otal of columns (B)(i)-(D)	Compensation reported as deferred in prior Form 990
	LE	0	0	0	0	0.	0	0
1 STEPHEN H. HOFFMAN	3	512,970.	0	209,091.	12,250.	19,188.	753,499.	0.
	]≘	0.0	0.	0	0	0	0.	0
2 BARRY REIS	: <u>E</u>	240,500.	0	5,264.	12,250.	20,165.	278,179.	0
	18	0	0	0	0	0	0	0.
3 HEDY MILGROM	(E)	153,250.	0	1,873.	7,813.	4,463.	167,399.	0.
	€ €							
	] [							
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7	Ξ							
	Ξ							
8	(ii)							
	Ξ							
6	(E)							
	Ξ							
10	(ii)							
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11	9							
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12	9							
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15	Ξ							
	Ξ							
16	킉							
				,			Schedul	Schedule J (Form 990) 2011

Schedule J (Form 990) 2011 Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information 34-1350566 ΒY COLUMN B(III) OTHER REPORTABLE COMPENSATION. INCLUDED IN THE \$209,091 OF OTHER REPORTABLE COMPENSATION IS \$195,845 RELATED TO A CONTRIBUTION TO A INCLUDED IN W-2 WAGES FROM A RELATED ORGANIZATION IN SCHEDULE J PART II, THIS WAS NOT PAID ORGANIZATION, NONE OF WHICH WERE PAID BY THIS ORGANIZATION, WHICH WERE PART I, LINE 4B. STEPHEN H HOFFMAN HAD WAGES FROM THE SUPPORTED NON-QUALIFIED, VESTED SUPPLEMENTAL RETIREMENT PLAN. & LILYAN MANDEL FUND \*Part∗III Supplemental Information THE REPORTING ORGANIZATION. Schedule J (Form 990) 2011

# SCHEDULE L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Transactions With Interested Persons**

► Complete if the organization answered
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2011

Open To Public Inspection

lame of the or		EL SUPPORT		DATIONS	- JACK N.				mployer 4-13505		cation n	umber
Part I				n 501(c)(3	) and section	n 501(c)(4) organizatio	ns only)					
	omplete if the orga	ınızatıon ansv	vered "Yes"	on Form 9	90, Part IV, I	ine 25a or 25b, or Fo	<u>m 990-E</u>	Z, Part	V, line 401	b		
1	(a) Name of dis	an ialified nere	eon.			(b) Description	of transa	ction			(c) Corr	ected?
						(b) Description					Yes	No
						<del></del>						
<del>-</del>	<del></del>					<del></del>					l I	
	<del></del>									-		
						<del></del>					-	
2 Enter the	amount of tax imp	osed on the o	rganization	managers	or disqualifi	ed persons during the	year un	der				
section 4			J	Ü	,		•		<b>&gt;</b> \$			
3 Enter the	amount of tax, if a	ny, on line 2,	above, reiml	bursed by	the organiza	ation			<b>&gt;</b> \$			
	·											
Part III L	oans to and/o	r From Int	erested F	Persons								
				T		line 26, or Form 990-E			8a	royad	т	
	e of interested and purpose		to or from nization?		nal principal nount	(d) Balance due		) In ault?	(f) App by bo	ard or		ritten ment?
person	and pulpose	<u>-</u> -		{	louit		<del> </del>		comm		+	$\overline{}$
<u> </u>	<del></del>		From				Yes	No	Yes	No	Yes	No
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		<u> </u>	<u></u>	<u> </u>			2550				Armound turi	
Total Part III   C	Grants or Assis	otomoo De	a dikina di	-1	<u>▶ \$</u>		2.5			e e e e e e e e e e e e e e e e e e e		
			_									
	Complete if the organisms Name of interested		wered "Yes"						(2) 0			
(a) I	Name of interested	person		(b) Relati		een interested persor ganization	n and			iount ar assistai	nd type o nce	Л
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Schedule L (Form 990 or 990-EZ) 2011	&	LILYAN	MANDEL	FUND

(a) Name of interested person		b, or 28c	T	(e) Sha	ring o
	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organiz	ation
				Yes	No
ARKWOOD TRUST COMPANY	ENTITY MORE THAN 5%	725,782.	FINANCIAL,		Х
<del></del>				ļ	
					L.
		. <u> </u>	<u> </u>		
			<u> </u>		
				<u>]</u>	
			_		
Part V Supplemental Information					
	onal information for responses to question	s on Schedule L (see	instructions)		
CH L, PART IV, BUSINESS TRANSACTIONS	INVOLVING INTERESTED PERSONS:				
A) NAME OF PERSON. PARKWOOD TRUST CO	YNAAMO				
				_	_
B) RELATIONSHIP BETWEEN INTERESTED F	PERSON AND ORGANIZATION				
- REBRITTONDILL BRINDER INTERNEDIES	THE ON THE ONCIR TENTED IN		_ <del></del> _		
MOTOV MODE MUNN ES OUNIED DV MDIJOMER	OF ODGANIGATION				
NTITY MORE THAN 5% OWNED BY TRUSTEE	OF ORGANIZATION	<del></del>	<del></del>		
D) DESCRIPTION OF TRANSACTION: FINAL	NCIAL, TRUST AND INVESTMENT SERV	ICES			
		<del></del>			
		·			
		·			

## SCHEDULE M (Form 990)

Department of the Treasury

## **Noncash Contributions**

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization

MANDEL SUPPORTING FOUNDATIONS - JACK N.

& I.TI.YAN MANDEL FUND

Employer identification number

34-1350566

<sub>ž</sub> Par	Types of Property	<u></u>				
1 Tame 2 To 1 To 1 To 1 To 1 To 1 To 1 To 1 To		(a) Check if applicable	(b) Number of contributions or Items contributed	(c) Noncash contribution amounts reported on Form 990 Part VIII, line 1g	Method of c noncash contrib	letermining
1	Art - Works of art					
2	Art - Historical treasures					
3	Art - Fractional interests					
4	Books and publications		<b>发展等。</b> 提为2			
5	Clothing and household goods					
6	Cars and other vehicles					
7	Boats and planes		1			
8	Intellectual property					
9	Securities - Publicly traded	Х	6	2,747,188.	FAIR MARKET VAL	UE
10	Securities - Closely held stock	Х	3	3,445,000.	FAIR MARKET VAL	UE
11	Securities - Partnership, LLC, or					
	trust interests					
12	Securities - Miscellaneous					
13	Qualified conservation contribution -					
	Historic structures	1				
14	Qualified conservation contribution - Other					
15	Real estate - Residential					
16	Real estate - Commercial					
17	Real estate - Other					
18	Collectibles					
19	Food inventory					
20	Drugs and medical supplies					
21	Taxidermy			<u></u>		
22	Historical artifacts					
23	Scientific specimens					
24	Archeological artifacts					
25	Other ()					
26	Other () Other ()					
27	Other ()					<u>-</u>
28	Other ()					
29	Number of Forms 8283 received by the organ	nization durir	ng the tax year for	contributions		
	for which the organization completed Form 8	283, Part IV,	Donee Acknowled	dgement 29		3
	- -					Yes No
30a	During the year, did the organization receive at least three years from the date of the initial	-				30a X
	the entire holding period?					30a X
b	If "Yes," describe the arrangement in Part II					

- 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?
- **32a** Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?
  - b If "Yes," describe in Part 11.
- If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

Yes No
30a X
31 X
32a X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) (2011)

Schedule M (Form 990) (2011) & LILYAN MANDEL FUND	34-1350566	Page 2
Supplemental Information. Complete this part to provide the information required by Part the organization is reporting in Part I, column (b), the number of contributions, the number of items Also complete this part for any additional information	I, lines 30b, 32b, and 33 received, or a combinat	, and whether
SCHEDULE M, LINE 32B SCHEDULE M, LINE 31: THE FOUNDATION FOLLOWS THE		
PRINCIPLES OF THE GIFT ACCEPTANCE POLICY OF THE FEDERATION, THE		
SUPPORTED ORGANIZATION, FOR NON-STANDARD CONTRIBUTIONS.		
		<del></del>
	<del></del>	
	<del>-</del>	
	<u>-</u>	
	<del></del>	
<u> </u>	<del></del> -	

#### SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2011
Open to Public Inspection

Name of the organization	MANDEL SUPPORTING FOUNDATIONS - JACK N. & LILYAN MANDEL FUND	Employer identification number 34-1350566
FORM 990, PART I, LINE	1, DESCRIPTION OF ORGANIZATION MISSION.	
FOUNDATION OF THE JEWIS	SH FEDERATION OF CLEVELAND AND AS SUCH, IS	····
ORGANIZED AND OPERATED	EXCLUSIVELY FOR CHARITABLE, EDUCATIONAL OR	
RELIGIOUS PURPOSES BY	CONDUCTING OR SUPPORTING ACTIVITIES FOR THE	
BENEFIT OF, OR TO CARRY	Y OUT THE PURPOSES OF, THE FEDERATION. IT WAS	
ESTABLISHED TO MEET ID	ENTIFIED NEEDS OF THE JEWISH AND GENERAL	
COMMUNITIES.		·
	······································	
FORM 990, PART III, LI	NE 1, DESCRIPTION OF ORGANIZATION MISSION.	
SUPPORTING ACTIVITIES	FOR THE BENEFIT OF, OR TO CARRY OUT THE PURPOSES	
OF, THE FEDERATION. I	T WAS ESTABLISHED TO MEET IDENTIFIED NEEDS OF THE	
JEWISH AND GENERAL COM	MUNITIES.	
FORM 990, PART VI, SEC	TION A, LINE 2: THE FOLLOWING TRUSTEES/OFFICERS	
HAVE A FAMILY RELATION	SHIP.	
1. MORTON L. MANDEL AN	D BARBARA A. MANDEL	
2. STEPHEN J. WEINBERG	AND PENNI WEINBERG	
THE FOLLOWING TRUSTEES	/OFFICERS HAVE A BUSINESS RELATIONSHIP:	
1. STEPHEN J. WEINBERG	, MORTON L. MANDEL AND STEPHEN H. HOFFMAN	
STEPHEN H. HOFFMAN, BA	RRY REIS, AND HEDY MILGROM HAVE A BUSINESS	2000
RELATIONSHIP. THEY AR	E OFFICERS OR EMPLOYEES OF THE FEDERATION, THE	
SUPPORTED ORGANIZATION		

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization MANDEL SUPPORTING FOUNDATIONS - JACK N. & LILYAN MANDEL FUND	Employer identification number 34-1350566
FORM 990, PART VI, SECTION A, LINE 6. TWO CLASSES OF VOTING	
MEMBERS (A)THE FEDERATION MEMBER WHICH HAS A MAJORITY OF THE MEMBER VOTING	
POWER AND IS THE JEWISH FEDERATION OF CLEVELAND (FEDERATION), THE SUPPORTED	
ORGANIZATION (HEREAFTER "SUPPORTED ORGANIZATION"), AND (B)DONOR MEMBER(S) -	
INDIVIDUALS WHO HAVE IN THE AGGREGATE A MINORITY OF THE MEMBER VOTING	
POWER.	
FORM 990, PART VI, SECTION A, LINE 7A: THE FEDERATION MEMBER ELECTS A	
MAJORITY OF THE BOARD OF TRUSTEES, THE DONOR MEMBER(S) ELECT A MINORITY OF	
THE BOARD OF TRUSTEES.	
FORM 990, PART VI, SECTION A, LINE 7B: UNDER STATE LAW, MEMBERS MUST	
APPROVE ANY DISSOLUTION ACTION ADOPTED BY THE BOARD AND ANY BOARD APPROVED	
SALE OR OTHER DISPOSITION OF SUBSTANTIALLY ALL OF THE FOUNDATION'S ASSETS	
AS WELL AS MERGER OR CONSOLIDATION.	
FORM 990, PART VI, SECTION B, LINE 11: FORM 990 IS EMAILED TO EACH	
OFFICER/TRUSTEE FOR REVIEW BEFORE FILING. FORM 990 IS PREPARED BY THE	
SUPPORTED ORGANIZATION'S STAFF AND THEN, BEFORE FILING, IS REVIEWED BY THE	
FOUNDATION'S OUTSIDE AUDITORS AND BY THE FOUNDATION'S ASSISTANT TREASURER	
(WHO ALSO IS THE SUPPORTED ORGANIZATION'S CFO). THE CIRCULATED COPY DOES	····
NOT INCLUDE SCHEDULE B CONTRIBUTORS, IF ANY, OR COMPENSATION PAID BY THE	
RELATED ORGANIZATION. THIS INFORMATION IS MADE AVAILABLE UPON REQUEST.	
FORM 990, PART VI, SECTION B, LINE 12C EVERY TRUSTEE, OFFICER, BOARD	
MEMBER, COMMITTEE MEMBER AND EMPLOYEE IN A POSITION TO INFLUENCE, PROVIDE	
NON-PUBLIC INFORMATION OR VOTE ON FOUNDATION POLICIES OR EXPENDITURES, (A 132212 01-23-12	
01-23-12	Schedule O (Form 990 or 990-EZ) (2011

Schedule O (Form 990 or 990 EZ) (2011)	Page 2
Name of the organization MANDEL SUPPORTING FOUNDATIONS - JACK N. & LILYAN MANDEL FUND	Employer identification number 34-1350566
W DIDITAL IMMODIL TONS	1 34 1330300
KEY INDIVIDUAL) IS REQUIRED TO SIGN A STATEMENT ACKNOWLEDGING AND AGREEING	
TO THE TERMS OF THE CONFLICT OF INTEREST POLICY PRIOR TO EMPLOYMENT OR	
CERUTING ON THE POINTAMION POARD OF VEY CONSTRUCE. IN ADDITION AND NEW VEY	
SERVING ON THE FOUNDATION BOARD OR KEY COMMITTEE. IN ADDITION, ANY NEW KEY	
INDIVIDUAL IS PROVIDED A COPY OF THE POLICY UPON COMMENCEMENT OF HIS OR HER	
POSITION AS A KEY INDIVIDUAL AND IS REQUIRED TO SIGN AND DELIVER TO THE	
FOUNDATION A STATEMENT ACKNOWLEDGING AND AGREEING TO THE TERMS OF THE	
POLICY. THE FEDERATION (SUPPORTED ORGANIZATION) ENDOWMENT DEPARTMENT	
PERSONNEL ARE RESPONSIBLE FOR MAINTAINING COPIES OF SIGNED STATEMENTS AND	
FOLLOWING UP TO ENSURE THAT A STATEMENT IS OBTAINED FROM EACH KEY	
INDIVIDUAL. THE ASSISTANT TREASURER OF THE FOUNDATION (WHO IS ALSO CFO OF	
THE SUPPORTED ORGANIZATION) IS RESPONSIBLE FOR MONITORING CONFLICT	
SITUATIONS, IF ANY.	
FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS, CONFLICT OF	
INTEREST POLICY AND FINANCIAL STATEMENTS ARE NOT MADE AVAILABLE TO THE	
PUBLIC.	
A OBBITC.	
FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS	
NET UNREALIZED LOSSES ON INVESTMENTS: -36,701,531.	
PARTNERSHIP INCOME NOT RECORDED ON BOOKS -3,834,604.	
TOTAL TO FORM 990, PART XI, LINE 5 -40,536,135.	·
Party 200 Party at 17th 16th	
FORM 990, PART VI, LINE 16B	
PROCEDURE REGARDING JOINT VENTURES	
THE ORGANIZATION'S INVESTMENT COMMITTEE APPROVES ALL NEW INVESTMENTS	
AND EVALUACES MURCE INTEGRATING ON AN ONCOUNT PLACE.	
AND EVALUATES THESE INVESTMENTS ON AN ONGOING BASIS. DOCUMENTS RELATED	
TO THESE INVESTMENTS GO THROUGH A LEGAL REVIEW AND A REVIEW BY THE	
SUPPORTED ORGANIZATION'S STAFF, ATTENTION IS GIVEN TO THE	

Name of the organization MANDEL SUPPORTING FOUNDATIONS - JACK N.	Employer identification number
& LILYAN MANDEL FUND	34-1350566
ORGANIZATION'S EXEMPT STATUS IN THAT REVIEW PROCESS. THERE IS NO	<del></del>
ACTIVE PARTICIPATION IN THE OPERATIONS OF THESE INVESTMENTS AS THEY ARE	
HELD FOR INVESTMENT PURPOSES ONLY.	
FORM 990, PART VI, SECTION B, LINE 15A & 15B	
NO COMPENSATION IS PAID BY THE ORGANIZATION. THE COMPENSATION PAID ON	
SCHEDULE J WAS PAID BY THE FEDERATION FOR SERVICES RENDERED TO THE	
FEDERATION BY FULL TIME FEDERATION EMPLOYEES.	

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Name of the organization

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 Attach to Form 990.

Open to Publication 2011

OMB No 1545-0047

Employer identification number

34-1350566

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33) Part

MANDEL SUPPORTING FOUNDATIONS - JACK N.

& LILYAN MANDEL FUND

(a) Name, address, and ElN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
Partilication of Related Tax-Exempt Organizations (Complete of the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)	tions (Complete if the organization an	Iswered "Yes" to Form 990, Par	t IV, line 34 because	it had one or more re	lated tax-exempt
			<u> </u>		

(a)	(q)	(0)	(p)	(e)	£	(g)	, chydda
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	controlled	Iled
of related organization		foreign country)	section	status (if section	entity	entity?	12
				501(c)(3))		Yes	N <sub>o</sub>
JEWISH FEDERATION OF CLEVELAND - 34-0714445	GRANTS & ALLOCATIONS FOR			1			
25701 SCIENCE PARK DRIVE	CHARITABLE, EDUCATIONAL						
CLEVELAND, OH 44122-7302	AND RELIGIOUS PURPOSES	отно	501(C)(3)	7	N/A		×
ADLER FAMILY FOUNDATION - 34-1858749	SUPPORT CHARITABLE,						
25701 SCIENCE PARK DRIVE	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	отно	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
MILDRED & MARTIN BECKER FAMILY FOUNDATION -	SUPPORT CHARITABLE,						
34-1711965, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	DHIO	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
THE SEMI J. AND RUTH W. BEGUN FOUNDATION -	SUPPORT CHARITABLE,						
34-1594565, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	DHIO	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	ns for Form 990.				Schedule R (Form 990) 2011	orm 990	) 2011

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

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34-1350566

& LILYAN MANDEL FUND Schedule R (Form 990) [Partill] Continuation of Identification of Related Tax-Exempt Organizations

Name, address, and EiN  of related organization  blumenthal Family Foundation - 34-1832963  Support Charitable, 25701 SCIENCE PARK DRIVE  CLEVELAND, OH 44122-7302  CLEVELAND HEBREW SCHOOLS EDUCATIONAL AND REL DRIVE, CLEVELAND, OH 44122-7302  PURPOSES OF FEDERAT  CHELM FAMILY FOUNDATION - 30-0226826  SUPPORT CHARITABLE, PURPOSES OF FEDERAT  CHELM FAMILY FOUNDATION - 30-0226826  SUPPORT CHARITABLE, 25701 SCIENCE PARK DRIVE  CLEVELAND, OH 44122-7302  CLEVELAND, OH 44122-7302  CLEVELAND, OH 44122-7302  SUPPORT CHARITABLE, ELLEN E. & VICTOR J. COHN SUPPORTING  SUPPORT CHARITABLE, ELLEN E. & VIC	y  TION  TIO	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section 501(c)(3))	Direct controlling entity	Section 5 12(0X13) controlled organization?	(0)(13) led lon?
Janization - 34-1832963  ATION - 34-1832963  EDUCATIONAL  S EDUCATIONAL  1122-7302  - 30-0226826  - 30-0226826  IN SUPPORTING  IN SUPPORTING	LIGIOUS LIGIOUS LIGIOUS LIGIOUS LIGIOUS LIGIOUS LIGIOUS LIGIOUS LIGIOUS LIGIOUS	foreign country)	section	status (if section 501(c)(3))	entity	organiza	
ATION - 34-1832963  2  10  10  10  1122-7302  - 30-0226826  - 30-0226826  11	LIGIOUS LIGIOUS LIGIOUS LIGIOUS LIGIOUS LIGIOUS LIGIOUS LIGIOUS LIGIOUS LIGIOUS					Yes	٤
12 12 12 122-7301 122-7302 - 30-0226826 13 - 0226826 14 SUPPORTING 18 SUPPORTING	LIGIOUS LIGIOUS LIGIOUS LIGIOUS LIGIOUS LIGIOUS LIGIOUS LIGIOUS LIGIOUS						
3 EDUCATIONAL 25701 SCIENCE PARK 1122-7302 - 30-0226826 3 3 11 SUPPORTING 11 SUPPORTING 12 ST01 SCIENCE PARK	LIGIOUS LIGIOUS LIGIOUS LION LIGIOUS LION LION LION LION LION LION LION LION				DEWISH FEDERATION		>
S EDUCATIONAL 25701 SCIENCE PARK 1122-7302 - 30-0226826 3 3 12 1N SUPPORTING 1N SUPPORTING 25701 SCIENCE PARK	LIGIOUS LION LIGIOUS LION LION LION LION LION LION LION LION		501(C)(3)	11A TYPE 1	OF CLEVELAND		 د
1122-7302 - 30-0226826 - 30-0226826 3 10 SUPPORTING 11 SUPPORTING	LIGIOUS LIGIOUS LIGIOUS LIGIOUS LIGIOUS LIGIOUS LIGIOUS LIGIOUS						
1122-7302 - 30-0226826 5 12 1N SUPPORTING 25701 SCIENCE PARK	LIGIOUS LIGIOUS LIGIOUS LIGIOUS LIGIOUS LIGIOUS				JEWISH FEDERATION		<b>;</b>
- 30-0226826 5 10 10 10 10 10 10 10 10 10 10	LIGIOUS LION LION LION LION LION LION	отно	501(C)(3)	11A TYPE 1	OF CLEVELAND		۱
A STATE  -7302  COHN SUPPORTING 939, 25701 SCIENCE PARK	RELIGIOUS BLE, RELIGIOUS ERATION BLE, RELIGIOUS						
COHN SUPPORTING 939, 25701 SCIENCE PARK	BLE, RELIGIOUS ERATION BLE, RELIGIOUS						;
COHN SUPPORTING 939, 25701 SCIENCE PARK	BLE, RELIGIOUS ERATION BLE, RELIGIOUS	онго	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
31-1606939, 25701 SCIENCE PARK	RELIGIOUS ERATION BLE, RELIGIOUS						
	ERATION BLE, RELIGIOUS				JEWISH FEDERATION		<b>&gt;</b>
DRIVE, CLEVELAND, OH 44122-7302 PURPOSES OF	ARITABLE, L AND RELIGIOUS	онто	501(C)(3)	11A TYPE 1	OF CLEVELAND		۷
COMMISSION ON CEMETERY PRESERVATION - SUPPORT CHARITABLE	L AND RELIGIOUS						
34-1771506, 25701 SCIENCE PARK DRIVE, EDUCATIONAL AND							<b>\$</b>
CLEVELAND, OH 44122-7302 PURPOSES OF	FEDERATION	отно	501(C)(3)	11A TYPE 1	OF CLEVELAND		۱
FEDERATION HOLDINGS, INC 23-7133908							
25701 SCIENCE PARK DRIVE HOLDS LEGAL TITLE TO	0				JEWISH FEDERATION		>
CLEVELAND, OH 44122-7302 DONATED REAL ESTATE		оніо	501(C)(2)	N/A	OF CLEVELAND		۱
RINA & SAMUEL M. FRANKEL FAMILY FOUNDATION - SUPPORT CHARITABLE	ARITABLE,						
31-1502121, 25701 SCIENCE PARK DRIVE, EDUCATIONAL	SUC		:	,			>
CLEVELAND, OH 44122-7302 PURPOSES OF	PURPOSES OF FEDERATION	отно	501(C)(3)	11A TYPE 1	OF CLEVELAND		۱
PEGGY AND JOHN GARSON FAMILY FOUNDATION - SUPPORT CHARITABLE	ARITABLE,						
34-1916905, 25701 SCIENCE PARK DRIVE, EDUCATIONAL	EDUCATIONAL AND RELIGIOUS			!	DEWISH FEDERALION		<b>&gt;</b>
CLEVELAND, OH 44122-7302 PURPOSES OF	NOI	онго	501(C)(3)	11A TYPE 1	OF CLEVELAND		< ا
NATHAN L. & REGINA HERMAN CHARITABLE FUND - SUPPORT CHARITABLE.	ARITABLE,						
34-1344368, 25701 SCIENCE PARK DRIVE, EDUCATIONAL	SUC						>
CLEVELAND, OH 44122-7302 PURPOSES OF	TON	отно	501(C)(3)	11A TYPE 1	OF CLEVELAND		۱
	ARITABLE,				NOIPROGUES DEIMER		
FOUNDATION - 34-1916908, 25701 SCIENCE PARK EDUCATIONAL	EDUCATIONAL AND RELIGIOUS			!	DEWISH FEDERALLON		>
DRIVE, CLEVELAND, OH 44122-7302 PURPOSES OF	PURPOSES OF FEDERATION D	онто	501(C)(3)	11A TYPE 1	OF CLEVELAND		۱
THE IMMERMAN FOUNDATION - 34-1533181 SUPPORT CHARITABLE	ARITABLE,						
25701 SCIENCE PARK DRIVE EDUCATIONAL	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		>
CLEVELAND, OH 44122-7302 PURPOSES OF	PURPOSES OF FEDERATION D	онго	501(C)(3)	11A TYPE 1	OF CLEVELAND		۱
JEWISH COMMUNITY HOUSING INC, - 34-1276120 SUPPORT CHARITABLE	ARITABLE,				NOTE REGIONS		
NCE PARK DRIVE	SOC				DEWISH FEDERALLON	_	>
CLEVELAND OH 44122-7302 PURPOSES OF	FEDERATION	ОНІО	501(C)(3)	LIA TYPE 1	DF CLEVELAND		,

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34-1350566

& LILYAN MANDEL FUND Schedule R (Form 990) Continuation of Identification of Related Tax-Exempt Organizations

Partill

(g) Section 512(b)(13) Ŷ organization? × × × × × × × × × × controlled × × Yes JEWISH FEDERATION TEWISH FEDERATION EWISH FEDERATION TEWISH FEDERATION TEWISH FEDERATION EWISH FEDERATION EWISH FEDERATION TEWISH FEDERATION EWISH FEDERATION FWISH FEDERATION TEWISH FEDERATION TEWISH FEDERATION Direct controlling OF CLEVELAND DF CLEVELAND OF CLEVELAND entity Ξ status (if section Public charity ч LIA TYPE 1 501(c)(3)) TYPE 1 TYPE TYPE TYPE TYPE TYPE TYPE TYPE TYPE TYPETYPE 11A 11A 11A 11A 11A I 1A 11A 11A 11A 11A 11A Exempt Code section 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) (01(C)(3) 01(C)(3) 01(C)(3) 01(C)(3) Legal domicile (state or foreign country) OHIO OHIO OHIO OHIO OIHC OHIO OHIO OHIO OHIO OHIO OHIO OHIO EDUCATIONAL AND RELIGIOUS EDUCATIONAL AND RELIGIOUS SDUCATIONAL AND RELIGIOUS EDUCATIONAL AND RELIGIOUS PURPOSES OF FEDERATION PURPOSES OF FEDERATION PURPOSES OF FEDERATION PURPOSES OF FEDERATION URPOSES OF FEDERATION PURPOSES OF FEDERATION URPOSES OF FEDERATION PURPOSES OF FEDERATION Primary activity SUPPORT CHARITABLE, SUPPORT CHARITABLE SUPPORT CHARITABLE, SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE, SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE ЮН ALEX & ANNE MILLER FAMILY CHARITABLE FUND 25701 MILLER GOOD FAMILY CHARITABLE FOUNDATION 34-1777878, 11000 EUCLID AVE, CLEVELAND, AND MANDEL SUPPORTING FDTNS - MORTON L. AND 25701 ALLEN & RUTH MILLER FAMILY FOUNDATION MEISEL FAMILY FOUNDATION - 31-1583883 31-1502113, 25701 SCIENCE PARK DRIVE, THE MT. SINAI HEALTH CARE FOUNDATION 34-1832965, 25701 SCIENCE PARK DRIVE, 31-1204735, 25701 SCIENCE PARK DRIVE MALTZ FAMILY FOUNDATION - 31-1566163 31-1566160 MANDEL SUPPORTING FDINS - JOSEPH C. MADAV XVIII FOUNDATION - 34-1827878 PLORENCE MANDEL FUND - 34-1350568, MADAV XVII FOUNDATION - 34-1827879 SCIENCE PARK DRIVE, CLEVELAND, OH BARBARA MANDEL FUND - 34-1350570, НО MADAV IX FOUNDATION - 34-1638258 Vame, address, and EIN of related organization SCIENCE PARK DRIVE, CLEVELAND, CLEVELAND, OH 44122-7302 CLEVELAND OH 44122-7302 CLEVELAND, OH 44122-7302 CLEVELAND, OH 44122-7302 CLEVELAND, OH 44122-7302 CLEVELAND, OH 44122-7302 ОН 44122-7302 CLEVELAND, OH 44122-7302 OH 44122-7302 25701 SCIENCE PARK DRIVE 25701 SCIENCE PARK DRIVE 25701 SCIENCE PARK DRIVE 25701 SCIENCE PARK DRIVE 25701 SCIENCE PARK DRIVE 25701 SCIENCE PARK DRIVE FAMILY FOUNDATION CLEVELAND, CLEVELAND, 14106

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34-1350566

& LILYAN MANDEL FUND Schedule R (Form 990) Partil Continuation of Identification of Related Tax-Exempt Organizations

(a)	(q)	(c)	(q)	(e)	(J)	(6)	; ;
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	Section 512(b) controlled	12(b)(13) Iled
of related organization		foreign country)	section	status (if section 501(c)(3))	entity	ves No	No No
DAVID & RUTH MOSKOWITZ FAMILY CHARITABLE	SUPPORT CHARITABLE,						
FOUNDATION - 34-1806783, 25701 SCIENCE PARK	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
DRIVE, CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	ОНІО	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
DAVID AND INEZ MYERS FOUNDATION - 34-6560945	SUPPORT CHARITABLE,						
25701 SCIENCE PARK DRIVE	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оню	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
EILEEN AND MYRON NICKMAN FAMILY SUPPORTING	SUPPORT CHARITABLE,						
FOUNDATION - 34-1916911, 25701 SCIENCE PARK	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
DRIVE, CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оню	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
PHYLLIS & DEBRA ANN NOVEMBER CHILDREN'S	SUPPORT CHARITABLE,						
FUND - 31-1566156, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	онго	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
OSTARA - 31-1606934	SUPPORT CHARITABLE,						
25701 SCIENCE PARK DRIVE	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	онто	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
THE HARRY RATNER HUMAN SERVICES FUND -	SUPPORT CHARITABLE,						
34-1360076, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	онго	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
THE RIMON XLI FOUNDATION - 34-1916913	SUPPORT CHARITABLE,						
25701 SCIENCE PARK DRIVE	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	онго	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
FGI FOUNDATION - 34-1916912	SUPPORT CHARITABLE,					_	
25701 SCIENCE PARK DRIVE	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	онго	501(C)(3)	11A TYPE 1	DF CLEVELAND		×
ROBERT S. & SYLVIA K. REITMAN FAMILY	SUPPORT CHARITABLE,						
FOUNDATION - 31-1502117, 25701 SCIENCE PARK	EDUCATIONAL AND RELIGIOUS						
DRIVE, CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	онго	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
NATHAN & FANNYE SHAFRAN FOUNDATION -	SUPPORT CHARITABLE,					-	
34-1458950, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION	•	
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	онго	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
LAWRENCE C. SHERMAN FAMILY FOUNDATION -	SUPPORT CHARITABLE,						
34-1806781, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	отно	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
MICHAEL & ANITA SIEGAL FAMILY FOUNDATION -	SUPPORT CHARITABLE,				,		
34-1832962, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		;
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	онго	501(C)(3)	11A TYPE 1	DF CLEVELAND		×

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34-1350566

& LILYAN MANDEL FUND Schedule R (Form 990) Partil. Continuation of Identification of Related Tax-Exempt Organizations

(a)	(q)	(0)	(q)	(e)	<b>(</b> )	(g) Section 512(b)(13)	(b)(13)
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	controlled	pe,
of related organization		foreign country)	section	status (if section 501(c)(3))	enuty	Yes No	2 2
NORMA AND ERNIE SIEGLER FAMILY FOUNDATION -	SUPPORT CHARITABLE,						
34-1546349, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	онто	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
SIMON FAMILY FOUNDATION - 34-1808584	SUPPORT CHARITABLE,						
25701 SCIENCE PARK DRIVE	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	онто	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
NAOMI G. & EDWIN Z. SINGER FAMILY FUND -	SUPPORT CHARITABLE,		,				
34-1638257, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	онго	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
DAVID AND ROBERT STEIN FOUNDATION -	SUPPORT CHARITABLE,						
34-1466318, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		:
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оню	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
IRVING I, STONE SUPPORT FOUNDATION -	SUPPORT CHARITABLE,		_	-			
34-1476465, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		;
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	онго	501(C)(3)	11A TYPE 1	OF CLEVELAND		<u>  </u>
NINA & NORMAN WAIN FAMILY FOUNDATION -	SUPPORT CHARITABLE,			-			
31-1502119, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		1
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	онто	501(C)(3)	11A TYPE 1	OF CLEVELAND		<u> </u>
WOLF FAMILY FOUNDATION - 34-1638259	SUPPORT CHARITABLE,				1		
25701 SCIENCE PARK DRIVE	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		,
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оню	501(C)(3)	11A TYPE 1	OF CLEVELAND		  ×
BENNETT & DONNA YANOWITZ FAMILY FOUNDATION -	SUPPORT CHARITABLE,						
34-1562999, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		;
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	онто	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
ZILBER FAMILY FOUNDATION - 34-1711966	SUPPORT CHARITABLE,						
25701 SCIENCE PARK DRIVE	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		;
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	онго	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
				_			
			i				

& LILYAN MANDEL FUND Schedule R (Form 990) 2011

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year) Part III

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(a)	(q)	(0)	(b)	(e)	(£)	(6)	(h)	(3)	3	( <del>K</del> )
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or	Direct controlling entity	Predominant income (related, unrelated,	Share of total income	Share of end-of-year	Disproportion- ate allocations?	Code V-UBI amount in box	General or managing partner?	General or Percentage managing ownership partner?
		foreign country)		sections 512-514)		assets	Yes No		Yes No	
SIMON CHARITABLE PUBLIC LLC -										
20-3948339, 25701 SCIENCE										
PARK DRIVE, CLEVELAND, OH	<b></b>						-			,
44122	INVESTMENTS	DE	N/A	(D)	31,883,456.	285,963,688.	×	183,707.	×	46.19%
MSF PRIVATE EQUITY FUND LLC -										
20-5060858, 25701 SCIENCE										
PARK DRIVE, CLEVELAND, OH										,
44122	INVESTMENTS	DE	N/A	(D)	6,640,735.	99,267,482.	×	<588,772.>	×	54.00%
MSF REAL ESTATE FUND LLC -							,			
20-5060891, 25701 SCIENCE	<b></b> -		•••		-					
PARK DRIVE, CLEVELAND, OH										
44122	INVESTMENTS	DE	N/A	(D)	4,762,238.	60,312,517.	×	160,607.	×	44.00%
MAF INVESTMENTS LTD -										
34-1796304, 25701 SCIENCE										
PARK DRIVE, CLEVELAND, OH					-					6
44122	INVESTMENTS	но	N/A	(D)	6,557,409.	78,410,981.	×	305,627.	×	33,33*

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Part (V

(a)	(q)	(3)	(p)	(e)	<b>(£)</b>	(6)	(귀)
Name, address, and EIN of related organization	Primary activity	rcile (y	Direct	Type of entity (C corp, S corp, or trust)	Shar	Share of end-of-year assets	Percentage ownership
PARKWOOD TRUST COMPANY - 34-1851693							
919 N. MARKET ST., SUITE 429	FINANCIAL, TRUST AND					,	
WILMINGTON, DE 19801	INVESTMENT SERVICES	DE	PARKWOOD LLC	C CORP	0	0.	21.67
	•						

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& LILYAN MANDEL FUND

<u> Partilii</u> Continuation of Identification of Related Organizations Taxable as a Partnership Schedule R (Form 990)

I.Cthorston mass:	4	3	(7)	(0)	(£)	(b)	(£)	(i)	3	(K)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	trolling /	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share	Share of end-of-year assets	tion-	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner? Yes No	General or Percentage managing ownership partner?
PARKWOOD LLC - 37-1665471 2829 EUCLID AVENUE CLEVELAND, OH 44115	FINANCIAL AND INVESTMENT SERVICES	l I	N/A	N/A	0.0	0.	×	N/A	×	21.678

& LILYAN MANDEL FUND Schedule R (Form 990) 2011

Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36) Part

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Yes

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Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II IV?

Receipt of (I) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

Sale of assets to related organization(s)

g Purchase of assets from related organization(s)

Exchange of assets with related organization(s) ᆮ

i Lease of facilities, equipment, or other assets to related organization(s)

j Lease of facilities, equipment, or other assets from related organization(s)

k Performance of services or membership or fundraising solicitations for related organization(s)

l Performance of services or membership or fundraising solicitations by related organization(s)

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m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

n Sharing of paid employees with related organization(s)

Reimbursement paid to related organization(s) for expenses 0

Reimbursement paid by related organization(s) for expenses ۵

q Other transfer of cash or property to related organization(s)

Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) MSF PRIVATE EQUITY FUND LLC	Д	13,311,000.	
(2) MAP INVESTMENTS LTD	æ	17,500,000.	
(3) SIMON CHARITABLE PUBLIC LLC	В	12,390,000.	
(4) SIMON CHARITABLE PUBLIC LLC	R	11,529,000.	
(5) MSF REAL ESTATE FUND LLC	В	2,024,000.	
(6) PARKWOOD TRUST COMPANY	ø	725,782.	
132163 01-23-12	59		Schedule R (Form 990) 2011

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Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37)

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Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(8)	(a)	[3]	(p)	(e)	(4)	(b)	Œ	(0)	(1)	(K)
	Primary activity	Legal domicile (state or foreign	t incom related, om tax	Are all partners sec 501(c)(3) orgs 7	Share of total	Share of end-of-year	Dispropor- tionate alfocations?	Cod amount of Sch	General or managing partner?	Percentage ownership
		- [	under section 512-514)	Yes No		233623	Yes No	(2001)	Yes No	
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Part VII Supplemental Information		
Complete this part to provide additional information for responses to questions on Schedule R (see instru	uctions)	
PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS.		
		-
NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION.		
		<del></del>
MANDEL SUPPORTING FDTNS - JOSEPH C. AND FLORENCE MANDEL		<del></del>
FUND		
	-	
EIN· 34-1350568		<del> </del>
25701 SCIENCE PARK DRIVE		
CLEVELAND, OH 44122-7302		
NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:		
MANIDEL CUIDDODUTING EDUNG MODUON I AND DADDADA MANIDEL DUND		
MANDEL SUPPORTING FDTNS - MORTON L. AND BARBARA MANDEL FUND		
EIN: 34-1350570		
AFRICA COLUMN DADY DAYYO		
25701 SCIENCE PARK DRIVE		
CLEVELAND, OH 44122-7302		
SCHEDULE R, PART V, QUESTION 2		
(1) - (5) ADDITIONAL CASH INVESTMENTS IN OR DISTRIBUTIONS FROM LIMITED		
LIABILITY INVESTMENT VEHICLES		
(6) PAYMENT OF FEES FOR INVESTMENT MANAGEMENT CONSULTING		
		<del></del>
		<del> </del>