

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



Form **990-PF** 

# Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

For	calen	dar year 2011 or tax year beginning AUG	1, 2011	, and ending	<u>JUL 31, 2012</u>	
Nar	ne of	foundation			A Employer identification	number
т	ян	KRAUSE FAMILY FOUNDATI	ON		45-2872991	
		nd street (or P O box number if mail is not delivered to street		Room/suite	B Telephone number	
	09	IDLEWYLD DRIVE	•		954-224-17	62
		own, state, and ZIP code		<del> </del>	C If exemption application is p	
-		LAUDERDALE, FL 33301			o ii exemption application is p	ending, check hare
		all that apply: X Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	check here
•	nio on	Final return	Amended return	minor public onarty	T. Torongir organizations	s, one on the re-
		Address change	Name change	-	Foreign organizations me 2 check here and attach co	eting the 85% test,
H C	heck	type of organization: X Section 501(c)(3) ex			]	
$\Box$	_		Other taxable private founda	ition	E If private foundation stated under section 507(b)(1)	
I Fa			ing method: X Cash	Accrual	F If the foundation is in a	
		·	ther (specify)		under section 507(b)(1)	
•		3,061,592. (Part I, colu	mn (d) must be on cash b	pasis)		(5), 611661 11616
_	ırt I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	3,464,914.		N/A	
	2	Check if the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	93,313.	93,313.		
	5a	Gross rents				
	ь	Net rental income or (loss)				
ø.	6a	Net gain or (loss) from sale of assets not on line 10	71,068.			
Š	b	Gross sales price for all assets on line 6a 4,101,494.				
All Senue	7	Capital gain net income (from Part IV, line 2)		71,068.	-	
₹ <b>•</b>	8	Net short-term capital gain				
ത	9	Income modifications				
0	10a	Gross sales less returns and allowances				_
۲	b	Less Cost of goods sold				
0	C	Gross profit or (loss)				
	11	Other income	2 522 225	151 001		
4	12	Total. Add lines 1 through 11	3,629,295.	164,381	L)COE.	
	13	Compensation of officers, directors, trustees, etc	0.		KECFINED	0.
(S)	14	Other employee salaries and wages				
	15	Pension plans, employee benefits	11 500		SEP 27 7012	
nse	16a	Legal fees	11,582.	O.		18 18 0.
Operating and Administrative Expenses@@ANINED	D	Accounting fees Other professional fees			0000	18 18 18 18 18 18 18 18 18 18 18 18 18 1
e E	C   17	Interest		<u> </u>	OUDEN TIL	
¥.	18	Taxes	1,251.	1,251.		0.
str	19	Depreciation and depletion	1,431.	1,431.		<u> </u>
i <u>r</u>	20	Occupancy				
Adn	21	Travel, conferences, and meetings				
þ	22	Printing and publications		-		-
g	23	Other expenses	2,674.	2,674.		0.
Ħ	24	Total operating and administrative	2,0,1	2/0/40		<u> </u>
)er:		expenses. Add lines 13 through 23	15,507.	3,925.		0.
Ö	25	Contributions, gifts, grants paid	728,500.			728,500.
	26	Total expenses and disbursements.				
		Add lines 24 and 25	744,007.	3,925.	<u> </u>	728,500.
	27	Subtract line 26 from line 12:				
	a	Excess of revenue over expenses and disbursements	2,885,288.			
	Ь	Net investment income (if negative, enter -0-)		160,456.		
	c	Adjusted net income (if negative, enter -0-)			N/A	

123501 12-02-11 LHA For Paperwork Reduction Act Notice, see instructions.

۵	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	year
뜨	ait	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		6,500.	6,500.
	2	Savings and temporary cash investments		57,964.	57,964.
		Accounts receivable ►		-	
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
	Ī	Less; allowance for doubtful accounts ▶			
	5	Grants receivable			
	_	Receivables due from officers, directors, trustees, and other			
	١	disqualified persons			
	7	Other notes and toans receivable			
	<b>'</b>	Less; allowance for doubtful accounts			
-	,	* * * * * * * * * * * * * * * * * * * *			<del></del>
Assets	_	Inventories for sale or use			
Ass		Prepaid expenses and deferred charges			
•	1	Investments - U.S. and state government obligations		1 400 047	1 545 240
	1	Investments - corporate stock STMT 5	0.	1,422,047.	1,545,340.
	C	Investments - corporate bonds STMT 6	0.	1,136,246.	1,199,075.
	11	Investments - land, buildings, and equipment, basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 7	0.	262,531.	<u>252,713.</u>
	14	Land, buildings, and equipment: basis			
		Less accumulated depreciation			
	15	Other assets (describe ►			
		,			
	16	Total assets (to be completed by all filers)	0.	2,885,288.	3,061,592.
		Accounts payable and accrued expenses			
	18	Grants payable			-
(n	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Ē	21	Mortgages and other notes payable			
Ë					
	22	Other liabilities (describe )			
		Test lishilising (add lines 17 through 00)	0.	0	
	23	Total liabilities (add lines 17 through 22)	U •	0.	
		Foundations that follow SFAS 117, check here			
ģ	l	and complete lines 24 through 26 and lines 30 and 31.	1		
ည		Unrestricted			
<u>a</u>	25	Temporarily restricted			
Ä	26	Permanently restricted			
Net Assets or Fund Balance		Foundations that do not follow SFAS 117, check here			
F		and complete lines 27 through 31.	•		
Si	27	Capital stock, trust principal, or current funds	0.	0.	
Se	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
¥	29	Retained earnings, accumulated income, endowment, or other funds	0.	2,885,288.	
Š	30	Total net assets or fund balances	0.	2,885,288.	
	31	Total liabilities and net assets/fund balances	0.	2,885,288.	
P	art	III Analysis of Changes in Net Assets or Fund B	alances	***	
1		net assets or fund balances at beginning of year - Part II, column (a), line	ა0		^
_	•	st agree with end-of-year figure reported on prior year's return)		1	0.
		r amount from Part I, line 27a		2	2,885,288.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	2,885,288.
-		eases not included in line 2 (itemize)		5	0.
<u>6</u>	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30		2,885,288.
					Form <b>990-PF</b> (2011)

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Form **990-PF** (2011)

Add lines 5 and 6

Enter qualifying distributions from Part XII, line 4

7

	990-PF (2011) THE KRAUSE FAMILY FOUNDATION		45-287	<u> 2991</u>		Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940		4948 - see	instru	ictio	ns)
	Exempt operating foundations described in section 4940(d)(2), check here   and er					
	Date of ruling or determination letter: (attach copy of letter if nec					
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	► L and enter 1%	1		3,2	<u>09.</u>
	of Part I, line 27b		1 1			
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%		1 _ 1			_
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Other	thers enter -0-)	2			<u>0.</u>
	Add lines 1 and 2		3		3,2	<u>09.</u>
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Of	iners enter -U-)	4		2 2	<del>_ 0 •</del>
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5		3,2	<u>09.</u>
	Credits/Payments:	اما				
	2011 estimated tax payments and 2010 overpayment credited to 2011	6a	<b>-</b>			
	Exempt foreign organizations - tax withheld at source	6b -	-			
	Tax paid with application for extension of time to file (Form 8868)	6c	-			
	Backup withholding erroneously withheld  Total conditions and assemble Add lines for through 6d.	6d	-			^
	Total credits and payments. Add lines 6a through 6d	ahad	7		_	72.
	Enter any penalty for underpayment of estimated tax. Check here  if Form 2220 is attack to the left have 5 and 8 in more than line 7, anter a required and 1.	cnea	8		3,2	
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9		3,4	01.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  Enter the amount of line 10 to be: Credited to 2012 estimated tax	Refunded	10	-		
	rt VII-A   Statements Regarding Activities	Neivilleu				
	During the tax year, did the foundation attempt to influence any national, state, or local legisl	lation or did it participate or intervei	ne in		Yes	No
	any political campaign?	iation of did it participate of intervol		1a		
	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos	ses (see instructions for definition)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and			15-		
	distributed by the foundation in connection with the activities	a copies of any materials passes				
	Did the foundation file Form 1120-POL for this year?			10		х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	vear:				
·	(1) On the foundation. $\blacktriangleright$ \$ (2) On foundation managers.		•			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expendi		<del>-</del>			
Ū	managers. ▶ \$ 0 •			1	ľ	
2	Has the foundation engaged in any activities that have not previously been reported to the IF	RS?		2		Х
	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing in	instrument, articles of incorporation	, or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year			4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	•		5		X
	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied en	ither:				
	By language in the governing instrument, or					
	ullet By state legislation that effectively amends the governing instrument so that no mandatory	y directions that conflict with the sta	ite law	-		
	remain in the governing instrument?			6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	L
	If "Yes," complete Part II, col. (c), and Part XV					
8a	Enter the states to which the foundation reports or with which it is registered (see instruction	ins) ►				
	FL					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	ttorney General (or designate)				
_	of each state as required by General Instruction G? If "No," attach explanation			8b	X	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of ser		ılendar			
	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," c			9	-	X
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedu	ile listing their names and addresses		10		X (0044)
			F	orm <b>990</b>	<b>,-アト</b> (	(2011)

	990-PF (2011) THE KRAUSE FAMILY FOUNDATION	45-2872	<u> 991</u>		Page <b>5</b>
Pa	rt VII-A Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of				
	section 512(b)(13)? If "Yes," attach schedule (see instructions)		11		<u>X</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory	privileges?			
	If "Yes," attach statement (see instructions)	27 / 2	12		<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	N/A	13		
	Website address ► N/A	▶954-22	1 1	760	
14	·	ZIP+4 ►33		104	
46	Located at ► 1218 PONCE DE LEON DRIVE, FT. LAUDERDALE, FL  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	ZIP+4 <b>▶</b> 3.	210		ГТ
10	and enter the amount of tax-exempt interest received or accrued during the year	15	N	/A	لب
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,	10		Yes	No
-	securities, or other financial account in a foreign country?		- ī6		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign		-"		
	country				
Pa	irt VII-B   Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly):				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	es X No		1	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
		es X No			
		es X No			
		es X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	'es X No			
	for the benefit or use of a disqualified person)?  (6) Agree to pay money or property to a government official? (Exception. Check "No"	es La_ NU			
	If the foundation agreed to make a grant to or to employ the official for a period after				
		es X No			
ь	If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations		-		
_	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here	ightharpoons			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		-		
	before the first day of the tax year beginning in 2011?		1c		<u>X</u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation				
	defined in section 4942(j)(3) or 4942(j)(5)):				
а	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning the second of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning the second of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning the second of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning the second of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning the second of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning the second of tax year 2011.				
		es X No			
	If "Yes," list the years ▶,,,,,,,,,,,,,,,, Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect	<b>\</b>			
0	valuation of assets) to the year's undistributed income? (If applying the provisions of section 4942(a)(2) (relating to incorrection 4942(a)(2) to all years listed, answer "No" and attaction of assets) to the year's undistributed income?				
	statement - see instructions.)	"N/A	2b		
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.	11, 11			
Ĭ			1		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				
		es X No			
b	If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons a	fter			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to	dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule				
	Form 4720, to determine if the foundation had excess business holdings in 2011.)	N/A	3b	<u> </u>	
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a	<u> </u>	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpos	se that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2011?		4b	 	X
		Fo	m <b>990</b>	)-PF (	2011)

12-02-11

Fprm 990-PF (2011) THE KRAUSE FAMILY FOUNDA Part VII-B   Statements Regarding Activities for Which F			45-28729 ued)	91 Page 6
<ul> <li>5a During the year did the foundation pay or incur any amount to: <ul> <li>(1) Carry on propaganda, or otherwise attempt to influence legislation (section</li> <li>(2) Influence the outcome of any specific public election (see section 4955); o any voter registration drive?</li> <li>(3) Provide a grant to an individual for travel, study, or other similar purposes'</li> <li>(4) Provide a grant to an organization other than a charitable, etc., organization 509(a)(1), (2), or (3), or section 4940(d)(2)?</li> <li>(5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals?</li> <li>b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und section 53.4945 or in a current notice regarding disaster assistance (see instru Organizations relying on a current notice regarding disaster assistance check h</li> <li>c If the answer is "Yes" to question 5a(4), does the foundation claim exemption frexpenditure responsibility for the grant?</li> <li>If "Yes," attach the statement required by Regulations section 53 4945</li> </ul> </li> <li>6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract?</li> <li>b Did the foundation, during the year, pay premiums, directly or indirectly, on a pif "Yes" to 6b, file Form 8870</li> <li>7a At any time during the tax year, was the foundation a party to a prohibited tax set if "Yes," did the foundation receive any proceeds or have any net income attribution in paid the foundation About Officers, Directors, Trustor Paid Employees, and Contractors</li> </ul> <li>Part VIII Information About Officers, Directors, Trustor Paid Employees, and Contractors</li>	r to carry on, directly or indirectly or indirectly or indirectly or indirectly or indirectly or indirectly or educational purposes, or indirectly or educational purposes, or indirectly or educations described octions)?  ere from the tax because it maintally on the indirectly or in	ectly,	NO NO N/A	5b X
1 List all officers, directors, trustees, foundation managers and their	compensation. (b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	account, other allowances
509 IDLEWYLD DRIVE FT. LAUDERDALE, FL 33301	DIRECTOR  2.00  DIRECTOR  2.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc	,	enter "NONE."	(d) Contributions to	(a) Evacaca
(a) Name and address of each employee paid more than \$50,000  NONE	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	(e) Expense account, other allowances
Total number of other employees paid over \$50,000		1	<b></b>	0

Form 990-PF (2011) THE KRAUSE FAMILY FOUNDATION	45-2	872991 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "I	NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		=
Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities		▶ 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers product	al information such as the	Expenses
1 N/A	60, 610.	
2		
3		
4		
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lin	es 1 and 2	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
Total. Add lines 1 through 3	<b>•</b>	0.

. Page **8** 

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	, see instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	-	<del></del>
·a	Average monthly fair market value of securities	1a	3,275,926.
	Average of monthly cash balances	1b	84,708
	Fair market value of all other assets	1c	<u> </u>
d	Total (add lines 1a, b, and c)	1d	3,360,634
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	3,360,634
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	50,410
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,310,224
6	Minimum investment return. Enter 5% of line 5	6	165,511
_	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	165,511
2a	Tax on investment income for 2011 from Part VI, line 5 2a 3, 209.		
þ	Income tax for 2011. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	3,209
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	162,302
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	162,302
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	162,302
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	728,500
b	Program-related investments - total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	728,500
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	728,500
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies fo	or the section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI,			<del>.</del>	
line 7				<u>1</u> 62,302.
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only			0.	
<b>b</b> Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2011:				
<b>a</b> From 2006		_		
<b>b</b> From 2007		-		
c From 2008				
<b>d</b> From 2009				
e From 2010				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2011 from				
Part XII, line 4: ► \$ 728,500.				
a Applied to 2010, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior		_		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2011 distributable amount				162,302.
e Remaining amount distributed out of corpus	566,198.			
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	566,198.			
<b>b</b> Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously		0		
assessed		0.		
d Subtract line 6c from line 6b. Taxable		0.		
amount - see instructions  e Undistributed income for 2010. Subtract line		. 0.		
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2011. Subtract		· · · · · · · · · · · · · · · · · · ·		
lines 4d and 5 from line 1. This amount must				
be distributed in 2012				0.
7 Amounts treated as distributions out of				0.
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2006				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2012.				
Subtract lines 7 and 8 from line 6a	566,198.			
IO Analysis of line 9:				
a Excess from 2007				
b Excess from 2008				
c Excess from 2009				
d Excess from 2010				
e Excess from 2011 566, 198.				
				5 000 DE (0044)

Part XIV Private Operating Fo	USE FAMILY		A supertion (I)		372991 Page 10
<del></del>	<del></del>		A, question 9)	N/A	
1 a If the foundation has received a ruling or		· · · · · ·			
foundation, and the ruling is effective for	•	-	n continu	1042(1)(2) 05 14	942(j)(5)
<b>b</b> Check box to indicate whether the found	Tax year	lg loundation described i	Prior 3 years	4942(j)(3) or4	1
2 a Enter the lesser of the adjusted net income from Part I or the minimum	(a) 2011	<b>(b)</b> 2010	(c) 2009	(d) 2008	(e) Total
	(4) 2011	(8) 2010	(6) 2000	(4) 2000	(0) 10.01
investment return from Part X for					
each year listed b 85% of line 2a		-		·	<del> </del>
• • • • • • • • • • • • • • • • • • • •	-				
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not				-	
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.		:	ļ		
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the					
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:				•	
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					<u> </u>
Part XV Supplementary Info			if the foundation	on had \$5,000 or m	ore in assets
at any time during t	<del> </del>	ructions.)			
1 Information Regarding Foundatio	_				
a List any managers of the foundation wh year (but only if they have contributed in			ributions received by t	he foundation before the clo	ose of any tax
	iore man 45,000). (See s	56611011 507 (d)(2).)			
ROY KRAUSE	100/ 11				
b List any managers of the foundation wh other entity) of which the foundation has			(or an equally large pol	rtion of the ownership of a p	partnership or
NONE	· · · · · · · · · · · · · · · · · ·				
2 Information Regarding Contributi	on Grant Gift Loan	Scholarship etc. Di	ograme:		_
Check here <b>X</b> if the foundation o				s not accept unsolicited req	uests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	ber of the person to who	m applications should be	addressed:		
	•				
	_	4.4.57744		<u>.</u>	
<b>b</b> The form in which applications should b	e submitted and informa	ition and materials they s	hould include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields,	kinds of institutions, o	or other factors:	
123601 12-02-11					Form <b>990-PF</b> (2011)

3 Grants and Contributions Paid During th		Payment		
Recipient Name and address (house as house as)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
ST. PAUL LUTHERAN CHURCH	NONE	RELIGIOUS	DONATION	
701PALMETTO PARK RD		ORGANIZATION		
BOCA RATON, FL 33486				600,000,
H.A.N.D.Y.	NONE	501(C)(3)	DONATION	
501 NE 8TH STREET				
FT, KAUDERDALE, FL 33304		<u> </u>		12,000.
WORLD VISION	NONE	501(C)(3)		
1800 N. BAYSHORE DRIVE				
MIAMI, FL 33132		<del> </del>		1,000.
ONLY A CHILD	NONE	501(C)(3)	DONATION	
PO BOX 990885				10.000
BOSTON, MA 02199				10,000
C.A.R.E.	NONE	501(C)(3)	DONATION	
151 ELLIS STREET NE ATLANTA GA 30303				3.000
	CONTINUATION SHE	ET(S)	<b>▶</b> 3a	728 500
b Approved for future payment				
NONE				
NONE				
***				
		<u> </u>		
<u>Total</u>		<del></del>	<u></u>	0

## Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	Unrelated business income		ded by section 512, 513, or 514	(e)	
	(a)	(b)	(C) Exclu-	(d)	Related or exempt	
1 Program service revenue:	Business code	Amount	sion code	Amount	function income	
			<del> </del>			
· · · · · · · · · · · · · · · · · · ·				<u> </u>		
<u> </u>						
d	-					
e	ļ					
f			ļ			
g Fees and contracts from government agencies	_					
2 Membership dues and assessments						
3 Interest on savings and temporary cash			<u> </u>			
investments						
4 Dividends and interest from securities			14	93,313.		
5 Net rental income or (loss) from real estate:						
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal						
property						
7 Other investment income						
8 Gain or (loss) from sales of assets other						
than inventory			18	71,068.		
9 Net income or (loss) from special events				,		
10 Gross profit or (loss) from sales of inventory		-				
11 Other revenue:			<del>                                     </del>			
a						
b			-			
C						
	1					
d	1					
de	1	0		164 201	0	
e	1	0.		164,381.	0.	
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)	1	0.		164,381.	0. 164,381.	
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)					0. 164,381.	
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)					0. 164,381.	
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t	to the Acc	omplishment of Ex	emp	t Purposes		
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	to the Acc	omplishment of Ex	emp	t Purposes		
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t	to the Acc	omplishment of Ex	emp	t Purposes		
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	to the Acc	omplishment of Ex	emp	t Purposes		
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	to the Acc	omplishment of Ex	emp	t Purposes		
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	to the Acc	omplishment of Ex	emp	t Purposes		
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	to the Acc	omplishment of Ex	emp	t Purposes		
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	to the Acc	omplishment of Ex	emp	t Purposes		
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	to the Acc	omplishment of Ex	emp	t Purposes		
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	to the Acc	omplishment of Ex	emp	t Purposes		
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	to the Acc	omplishment of Ex	emp	t Purposes		
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	to the Acc	omplishment of Ex	emp	t Purposes		
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	to the Acc	omplishment of Ex	emp	t Purposes		
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	to the Acc	omplishment of Ex	emp	t Purposes		
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	to the Acc	omplishment of Ex	emp	t Purposes		
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	to the Acc	omplishment of Ex	emp	t Purposes		
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	to the Acc	omplishment of Ex	emp	t Purposes		
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	to the Acc	omplishment of Ex	emp	t Purposes		
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	to the Acc	omplishment of Ex	emp	t Purposes		
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	to the Acc	omplishment of Ex	emp	t Purposes		
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco	to the Acc	omplishment of Ex	emp	t Purposes		

123621 12-02-11

Part	XVII	Information Re	egarding Tran			ns an	nd Relations	nips With Nor	ncharitabl		age 10
		Exempt Organ					<del></del>				
1 Did	the org	anization directly or indi	rectly engage in any	of the following	g with any other orga	nızatıon	described in secti	on 501(c) of		Yes	No
the	Code (	other than section 501(c)	)(3) organizations) o	or in section 52	7, relating to political	organiz	ations?				
<b>a</b> Tra	nsfers f	rom the reporting founda	ation to a noncharita	ible exempt org	ganization of:						
(1)	Cash								1a(1)	4	X
(2) Other assets									1a(2)		X
b Other transactions:											
(1) Sales of assets to a noncharitable exempt organization									1b(1)		X
(2) Purchases of assets from a noncharitable exempt organization									1b(2)		X
(3)	Rental	of facilities, equipment,	or other assets						1b(3)		X
(4)	Reimb	ursement arrangements							1b(4)		X
(5)	Loans	or loan guarantees		-		-	-	-	1b(5	1	X
(6)	Perfor	mance of services or me	mbership or fundrai	ising solicitatio	ns				1b(6	1	X
c Sha	aring of	facilities, equipment, ma	aling lists, other asse	ets, or paid emp	ployees				1c		<u> </u>
d If ti	ne answ	er to any of the above is	"Yes," complete the	following sche	dule. Column (b) sho	uld alwa	ays show the fair m	arket value of the g	oods, other as	sets,	
or s	services	given by the reporting fo	oundation. If the fou	ndation receive	ed less than fair mark	et value	in any transaction	or sharing arranger	ment, show in		
col	umn <b>(d</b> )	the value of the goods,	other assets, or serv	vices received.							
(a) Line n	0 (	(b) Amount involved	(c) Name of	f noncharitable	exempt organization		(d) Description	of transfers, transaction	ns, and sharing a	rrangeme	ants
				N/A			1				
	:										
					· · · · · · · · · · · · · · · · · · ·						
					·						
					· · · · · · · · · · · · · · · · · · ·						
2a Ist	he four	idation directly or indirec	tly affiliated with, or	related to, one	or more tax-exempt	organiza	ations described				_
ın s	section	501(c) of the Code (othe	r than section 501(c	c)(3)) or in sect	non 527?				Yes	; LX	No
<u>b</u> If "	Yes," co	mplete the following sch			T						
		(a) Name of org	ganization		(b) Type of organize	ation		(c) Description of re	lationship		
		N/A									
											<del></del>
									<u> </u>		
	T				<u> </u>				<del></del>		
		penalties of perjury, I declare lief, it is true, correct, and cor							May the IRS		
Sign		`	1		G/a/-	Ι,		1.0	shown below	w (see in:	str )?
Here			ause		11(3	<u>    ~     </u>	-5 W	430	_	s L	No
	Sign	ature of officer of trustee		D	Date 1	<u> </u>	Title	Chook	DTIN		
		Print/Type preparer's na	ame	Preparer's si	ignature		Date	Check if	PTIN		
D-··				Hood	hD 1 00	N 1	8 heli	self- employed			
Paid		JOSEPH D.		145	) J. 700 -11	'Y   (		1	P0042		<u>,                                    </u>
Prep		Firm's name ► KEE	EFE, MCCUI	TOUGH	& CO/, LL	P, C	J.P.A. 'S	Firm's EIN ► 5	A-1363.	192	
Use (	Uniy	Firm's address > 6.5	EO M BES	V DAT IIT	CITUDAY C	7	₹ 410	<del> </del>			
		i i i i i i i o auui coo 🗩 h 🦰	JOU N PRIDE	KAL HI	LTEWAY SI	U L'I'H	5 4 I U	1			

FT. LAUDERDALE, FL 33308

Phone no.

954-771-0896

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

Department of the Treasury Internal Revenue Service

Name of the organization

## **Schedule of Contributors**

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

OMB No 1545-0047

Employer identification number

2011

Т	HE KRAUSE FAMILY FOUNDATION	45-2872991_
Organization type (check of		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
General Rule  X For an organization contributor Comp	on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in m	
Special Rules		
509(a)(1) and 170	(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the	
total contributions	s of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or edit	
contributions for a If this box is chec purpose. Do not d	use exclusively for religious, charitable, etc., purposes, but these contributions did not to ked, enter here the total contributions that were received during the year for an exclusive complete any of the parts unless the <b>General Rule</b> applies to this organization because it	tal to more than \$1,000 ely religious, charitable, etc ,
but it must answer "No" or	illers of:  Section:  orm 990 or 990-EZ	

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

Name of organization

Employer identification number

#### THE KRAUSE FAMILY FOUNDATION

45-2872991

Part I	Contributors (see instructions) Use duplicate copies of Part I if add	ditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ROY KRAUSE  1218 PONCE DE LEON DRIVE  FT. LAUDERDALE, FL 33316	\$ <u>3,464,914.</u>	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash Complete Part II if there is a noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$Sabadula B / Farm	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Name of organization

Employer identification number

### THE KRAUSE FAMILY FOUNDATION

45-2872991

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if	additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
4	248,203 SHARES SFN GROUP STOCK		
1			
		\$ 3,464,914.	08/25/11_
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Part I		(See mod decision)	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a)		(c)	
No. from Part I	(b)  Description of noncash property given	FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a)			
No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
23453 01-2	2 40	Schedule R (Form 9	90, 990-EZ, or 990-PF) (201

' Onler de la F	7/F 000 000 F7 000 PD (0011)			
Schedule E Name of org	3 (Form 990, 990-EZ, or 990-PF) (2011)			Page   Employer identification number
0, 0,8	,			
	RAUSE FAMILY FOUNDATION			45-2872991
Part III	Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc Use duplicate copies of Part III if addition	he following line entry. For orga c., contributions of <b>\$1,000 or le</b>	nizations comp	or (10) organizations that total more than \$1,000 for the leting Part III, enter (Enter this information once) \$
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
-		(e) Transfer	of gift	
-	Transferee's name, address, a	nd ZIP + 4	Re	elationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
_		(e) Transfer	of gift	
	Transferee's name, address, a	nd ZIP + 4	R	elationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
-		(e) Transfer	of gift	
_	Transferee's name, address, a	nd ZIP + 4	R	elationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
-		(e) Transfer	of gift	
	Transferee's name, address, a			elationship of transferor to transferee
		<del></del>		

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

KRAUSE FAMILY FOUNDATION NORTHERN TRUST NA, Schedule D Detail of Short-term Capital Gains and Losses

Totals																													
		20508.8 MFB NORTHERN FDS FIXED	INDEX FD	3283.31 MFB NORTHERN FDS STK	1 1	CAP FD	1809,8 MFB NORTHN MULTIMGR MID	2	2253 OS MEB NOBTHW MILTIMCD	3248.98 MFB NORTHN MULTI-MANAGER	MUL	RTHN FDS	100. MFC SPDR GOLD TR GOLD SHS			CAP FD	169.57 MFB NORTHN MULTIMGR MID			INTL	TI-MANAGE	MULTI-MANAC	- 1	CAP FD	537.64 MFB NORTHN MULTIMGR MID	SMALT, CAP ED	1		1 1
		12/19/2011	10/20/2011	09/27/2011		10/13/2011	TTO7/CT/0T	10/10/10/1	10/13/2011		10/13/2011		13	10/20/2011		10/13/2011		10/13/2011		10/13/2011	1 4	10/13/2011		10/13/2011	TT02/CT/0T	10/12/2011	10/13/2011	1	Date Acquired
		/26/	03/26/2012	03/26/2012		03/26/2012	7107/97/60	01/1/1010	03/26/2012		03/26/2012		04/	11/04/2011		11/04/2011		11/04/2011		11/04/2011		11/04/2011		10/26/2011	TT02/02/0T	10/26/201	10/26/2011		Date Sold
589,590.00		214,521.99		65,739.00		22,713.00	22,553,00		30,378.00		3,356.00		17,073.13	56,282.00		1,967.00		2,678.00		60,778.00		4 667 00		6.070.00	0,0,1,00	00 663 3	17,621.00		Gross Sales Price
565,512.00		١.	49,479.48	61,782.05		19,618.23	70,398.42		28,201.14	l 1•	3,425,61		233	54,579.77		1.838.14		2,513.51		59.409.12		4 433 66		5.828.02	0,000.04		17,052.23		Cost or Other Basis
24,079.00		227.	8,142.52	3,956.95		3.094.77	1,554.58	1	2,176.86	( ) . ( ) .	-69 61	1	- h	1.702.23	١.	128 86	100	164.49	ı۰	1.368.88		222 24		241 98	00.102	300	568.77		Short-term Gain/Loss

JSA 1F0971 2.000

;

;

3 Grants and Contributions Paid During th				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
PROJECT HOPE	NONE	501(C)(3)	DONATION	
MILLWOOD , VA 22646				3,00
SALVATION ARMY 5631 VAN DYKE RD LUTZ, FL 33558	NONE 	501(C)(3)	DONATION	10,00
LUTHERAN INDIAN MINISTRIES 3525 N. 12TH STREET	NONE	RELIGIOUS ORGANIZATION	DONATION	
EUTHERAN CHURCH MISSOURI 1333 S. KIRKWOOD ROAD 5T. LOUIS MO 63122	NONE	RELIGIOUS ORGANIZATION	DONATION	10,00
UNICEF 125 MAIDEN LANE NEW YORK, NY 10038	NONE	501(C)(3)	DONATION	2,0
MOST MINISTERIES PO BOX 130678 ANN ARBOR, MI 48113	NONE	RELIGIOUS ORGANIZATION	DONATION	10,0
GROUNDWORK GUATAMALA 713 E. JASMINE STREET MESA , AZ 85203	NONE	501(C)(3)	DONATION	2,0
USO #2650659 PO BOX 96322 WASHINGTON, DC 20090	NONE	501(C)(3)	DONATION	1,0
LUTHERAN SERVICES OF FLORIDA 3627A WEST WATERS AVENUE TAMPA FL 33614	none	RELIGIOUS ORGANIZATION	DONATION	5,0
JUNIOR ACHIEVEMENT 1130 COCNUT CREEK BLVD COCNUT CREEK, FL 33066	NONE	501(C)(3)	DONATION	20,0

Part XV Supplementary Informatio				
3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
BROWARD TECHNICAL FOUNDATION	NONE	501(C)(3)	DONATION	
6500 NOVA DRIVE				
DAVIE, FL 33317				1,000,
AMERICAN RED CROSS	NONE	501(C)(3)	DONATION	
335 SW 27TH AVENUE		-		
MIAMI, FL 33135				35,000,
NATIONAL MULTIPLE SCLEROSIS SOCIETY	NONE	501(C)(3)	DONATION	
3201 W. COMMERCIAL BLVD				
FT. LAUDERDALE, FL 33309				1,000.
OPERATION HOMEFRONT	NONE	501(C)(3)	DONATION	
8930 FOURWINDS DRIVE				
SAN ANTONIO, TX 78239				500,
				<del> </del>
Total from continuation sheets		<u> </u>		<del> </del>

FORM 990-PF DIVIDEN	DS AND	INTER	EST FROM	SECUE	RITIES	STATEMENT	1	
SOURCE		GROSS	AMOUNT		TAL GAINS	COLUMN (A AMOUNT	)	
NORTHERN TRUST NOMINEE	•		130,374.		37,061.	93,3	13.	
TOTAL TO FM 990-PF, PART I,	LN 4		130,374.		37,061.	93,3	13.	
FORM 990-PF		LEGAL	FEES		<del></del>	STATEMENT	2	
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOME	(D) CHARITA E PURPOS		
LEGAL FEES	1	1,582.		0.			0.	
TO FM 990-PF, PG 1, LN 16A	1	1,582.		0.			0.	
FORM 990-PF		TAX	ES			STATEMENT	3	
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM			
FOREIGN TAXES		1,251.	1	,251.			0.	
TO FORM 990-PF, PG 1, LN 18		1,251.	1	,251.			0.	
FORM 990-PF	0	THER E	XPENSES			STATEMENT	4	
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN		(C) ADJUSTED NET INCOM	(D) CHARITA E PURPOS		
INVESTMENT MANAGEMENT FEES		2,674.	2	,674.		0.		
TO FORM 990-PF, PG 1, LN 23		2,674.	2	,674.			0.	

FORM 990-PF	CORPORATE STOCK		STATEMENT	5	
DESCRIPTION		BOOK VALUE	FAIR MARKET	ŗ	
NORTHERN TRUST - EQUITY SECURI	TTIES	1,422,047.	1,545,34	10.	
TOTAL TO FORM 990-PF, PART II,	, LINE 10B	1,422,047.	1,545,340		
FORM 990-PF	CORPORATE BONDS		STATEMENT	6	
DESCRIPTION		BOOK VALUE	FAIR MARKET		
NORTHERN TRUST - FIXED INCOME	SECURITIES	1,136,246.	1,199,075.		
TOTAL TO FORM 990-PF, PART II,	, LINE 10C	1,136,246.	1,199,07	75.	
FORM 990-PF	OTHER INVESTMENTS		STATEMENT	7	
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET		
NORTHERN TRUST - COMMODITIES	COST	262,531.	252,71	.3.	
TOTAL TO FORM 990-PF, PART II,	- , LINE 13	262,531.	252,71	3.	