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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

2012

Employer identification number

63-6056702 Steiner Foundation Organization type (check one): 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 ☐ 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that receipt during the year, total contributions of more than \$1,000 for use exclusively for or educational purposes, or the prevention of cruelty to children or animals. Compared to the For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that recent during the year, contributions for use exclusively for religious, charitable, etc. not total to more than \$1,000. If this box is checked, enter here the total contributions that year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the conteral Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). Name of organization Steiner Foundation

Employer identification number 63-6056702

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) No. Type of contribution **Total contributions** Name, address, and ZIP + 4 Dorothy L. Steiner Charitable Income Person Pavroll - Arnold Steiner, Trustee 103,283.51 Noncash 2702-Altadena-Road----- Birmingham, ALK 35243 (Complete Part II if there is a noncash contribution.) Administered by:----Northern Trust Co.(b) (d) (a) (c) Chicago, $II_{Name, address, and ZIP + 4}$ No. **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II if there is a noncash contribution.) (a) (b) (d) (c) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II if there is a noncash contribution.) (d) (a) (b) (c) Total contributions Type of contribution No. Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II if there is a noncash contribution.) (a) (b) (c) (d) Type of contribution No. Name, address, and ZiP + 4 **Total contributions** Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

0425876270 Dec. 24, 2012 LTR 2697C 0 R 63-6056702 201207 44 00019759

STEINER FOUNDATION 2702 ALTADENA RD BIRMINGHAM AL 35243



024400

DECLARATION

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the `best of my knowledge and belief, it is true, correct and complete. I understand that this declaration will become permanent part of that return.

Signature of Officer or Trustee

Janua 4, 2013

