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#### 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.

Department of the Treasury Internal Revenue Service

OMB No 1545-0052

1	For c	alen	idar year 2012 or tax year be	ginning			, and ending		
•	Nar	ne of	foundation					A Employer identificati	on number
-	A	US:	MAN FAMILY FO	UNDAT 1	ON I	NC.		16-609302	10
	Nun	iber a	nd street (or P O®box number if ma	B Telephone number					
	1	<u>08</u>	33 WILSHIRE B	LVD			416	(760)567-	2792
			own, state, and ZIP code					C If exemption application i	s pending, check here
	L	<u>os</u>	ANGELES, CA	90024	<u> </u>				
	G C	heck	===	itial return		Initial return of a	former public charity	D 1 Foreign organization	ons, check here
			== '''	nal return		Amended return		2 Foreign organizations	meeting the 85% test
				Idress chang		X Name change	<del></del>	2 Foreign organizations check here and attach	computation
ļ	<u> </u>	_				kempt private foundation		E If private foundation s	
	<u> </u>		ction 4947(a)(1) nonexempt of			Other taxable private found	i	under section 507(b)	(1)(A), check here
			arket value of all assets at end	of year   J		ing method: X Cash	Accrual	F If the foundation is in	
	-		Part II, col. (c), line 16)	250 /0	01 	ther (specify)	henry )	under section 507(b)	(1)(B), check here
ſ	D				art i, colu	mn (d) must be on cash		<del>                                     </del>	(4) =
l	Pa	rt I	(The total of amounts in columns necessarily equal the amounts in	(b), (c), and (d)	may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
		1	Contributions, gifts, grants, e	etc., received		2,736,254	•	N/A	
		2	Check If the foundation is n		ch Sch B				
		3	Interest on savings and temporary cash investments						
		4	Dividends and interest from s	securities		576			STATEMENT 1
			Gross rents		90.	90.	. 90	•	STATEMENT 2
			Net rental income or (loss)	<del></del>		6,096	<u> </u>		
	ĭe	h	Net gain or (loss) from sale of asse Gross sales price for all	185,2		0,050	•		
	Revenue	7	assets on line 6a  Capital gain net income (from Part				6,096		
	ŭ	8	Net short-term capital gain				İ	REC	FIVED
~	3	9	Income modifications					F	
2013	5	10a	Gross sales less returns and allowances					I I NOV	5 2013 O
		b	Less Cost of goods sold					₩ NOV	2 7 2013 0
2		С	Gross profit or (loss)					<u> </u>	
		11	Other income			2 742 016	6 762	H OGD	EN, UI
NOV		12	Total. Add lines 1 through 1			2,743,016 130,200	<del></del>		0.
		13 14	Other employee salaries and		;	130,200	• 0	•	
NED			Pension plans, employee ber	-					
7	es	40-	Legal fees	STMT	. 3	381.858	. 0		0.
SCAN	Expense	Ь	Accounting fees	STMT	. 4	3,500	. 0	•	0.
SC	쮯	C	Other professional fees						
	e Se	17	Interest						
	t.	18	Taxes	STMT	5 5	745	0	•	0.
	nis	19	Depreciation and depletion						
	튣	20	Occupancy	_		50,428			0.
	and Administratite	21	Travel, conferences, and med	etings		57,868	. 0	•	0.
	au	22	Printing and publications	STMT	n 6	27,366	. 0		0.
	Operating	23 24	Other expenses  Total operating and adminis		. 0	21,300	•	•	0.
	era	24	expenses. Add lines 13 thro			651,965	.  0		0.
	Ö	25	Contributions, gifts, grants p			31,136			31,136.
			Total expenses and disburs						
		L	Add lines 24 and 25			683,101	. 0	•	31,136.
		27	Subtract line 26 from line 12	:					
		a	Excess of revenue over expenses	and disbursem	nents	2,059,915			
		ı	Net investment income (if ne		I <del>-</del> )		6,762		<del> </del>
	2225		Adjusted net income (if negat	tive, enter -0-)		<u>.                                    </u>	<u> </u>	N/A	200 55

Form **990-PF** (2012)

For	m 99	0-PF (2012) AUSMAN FAMILY FOUNDATION	16-6093020 Page 2				
Гр	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	<u> </u>		
<u> </u>	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing		134,247.			
	2	Savings and temporary cash investments	449,405.	322.	322.		
	3	Accounts receivable -					
		Less: allowance for doubtful accounts					
	4	Pledges receivable ▶					
		Less: allowance for doubtful accounts					
	_	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
	_	disqualified persons					
	7	Other notes and loans receivable					
		Less: allowance for doubtful accounts					
Assets	1 -	Inventories for sale or use					
Ass	_	Prepaid expenses and deferred charges Investments - U.S. and state government obligations					
-		Investments - corporate stock STMT 7	179,084.	174,511.	130,894.		
		Investments - corporate bonds	177,004.	1/4,311.	130,074.		
	11	tnyestments - Land, buildings, and equipment basis	•				
	''	Less accumulated depreciation					
	12	Investments - mortgage loans					
	13	Investments - other STMT 8	0.	2,441,359.	1,570,795.		
		Land, buildings, and equipment: basis					
	'''	Less accumulated depreciation					
	15	Other assets (describe ▶					
	"						
	16	Total assets (to be completed by all filers)	628,489.	2,750,439.	1,836,258.		
	17	Accounts payable and accrued expenses	6,632.	6,632.			
	18	Grants payable					
S	19	Deferred revenue					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons					
iabi	21	Mortgages and other notes payable					
	22	Other liabilities (describe ► <u>DUE TO DCA TRUST</u> )	0.	50,000.			
	23	Total liabilities (add lines 17 through 22)	6,632.	56,632.			
		Foundations that follow SFAS 117, check here					
Ś		and complete lines 24 through 26 and lines 30 and 31.	601 057	0 602 007			
2	24	Unrestricted	621,857.	2,693,807.			
aga	25	Temporarily restricted					
Fund Balances	26	Permanently restricted  Foundations that do not follow SFAS 117 check here					
2	-	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.					
ō	27	Capital stock, trust principal, or current funds					
Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund					
Ass	29	Retained earnings, accumulated income, endowment, or other funds					
Net/	30	Total net assets or fund balances	621,857.	2,693,807.			
Z	"	Total net assets of folia balances					
	31	Total liabilities and net assets/fund balances	628,489.	2,750,439.			
P	art	Analysis of Changes in Net Assets of Fund Ba	alances				
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line 3	30				
	(mu	st agree with end-of-year figure reported on prior year's return)		1	621,857.		
2	Ente	r amount from Part I, line 27a		2	2,059,915.		
3	Othe	er increases not included in line 2 (itemize)  OTHER		3	14,650.		
4	Add	lines 1, 2, and 3		4	2,696,422.		
5	Deci	reases not included in line 2 (itemize) FEDERAL TAX		5	2,615.		
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	2,693,807.		
					Earm <b>QQA-PF</b> (2012)		

Part IV Capital Gains a	and Losses for Tax on In	vestment	t Income					
(a) List and descr 2-story brick wa	ibe the kind(s) of property sold (e.g rehouse; or common stock, 200 shs	., real estate, s. MLC Co.)		P-F	w acquired Purchase Donation	(c) Date (mo., c	acquired lay, yr.)	(d) Date sold (mo , day, yr.)
1a				ļ		· · · · · · · · · · · · · · · · · · ·		
b SEE ATTACHED	STATEMENT			ļ				
<u>c</u>				ļ				ļ
<u>d</u> ' '								
<u>e</u>				<u> </u>				
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				iain or (loss) s (f) minus (	
<u>a</u>								
<u>b</u>								
C								
d 105 071			100 10					
e 185,271.			179,17	5.				6,096.
Complete only for assets showin	g gain in column (h) and owned by	the foundation	on 12/31/69				Col. (h) gaın not less thar	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any				(from col. (	
a	<u> </u>							
b								
С								
d								
e								6,096.
2 Capital gain net income or (net ca	pital loss) { If gain, also enter If (loss), enter -0:			}	2			6,096.
3 Net short-term capital gain or (los							·	
If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8		iu ( <i>0)</i> .		}	3		N/A	
Part V Qualification U	nder Section 4940(e) for	Reduced	Tax on Net			come	N/A	
(For optional use by domestic private								
(For optional use by domestic private	foundations subject to the section 2	1940(a) lax uli	i net investment in	icome.)				
If section 4940(d)(2) applies, leave th	iis part blank.							
Man the foundation liable for the cost	on 4040 toy on the distributable are	ount of one un	oor in the base nor	-10 dO				Yes X No
Was the foundation liable for the sect			•	i iou r				Yes _A NO
If "Yes," the foundation does not qual  Enter the appropriate amount in e	ach column for each year; see the ii			ntries				<del></del>
(a)		istructions be	lore making any e					(d)
Base periód years	(b) Adjusted qualifying dis	tributions	Net value of no	(c) oncharita	ible-use asset	s	Distrib	utión ratio
Calendar year (or tax year beginning	19 1117	1,969.	1101 14100 01110				(col. (b) div	ided by col. (c)) • 050804
2011		9,000.			<u>629,26</u> 6 <b>4</b> 5,12			.044953
2010	•				643,1 <u>2</u> 647,44			
2009		6,086.			647,44 698,44			.055736
2008		7,600.						.053834
2007		3,200.			767, <u>4</u> 6	<del>- •  </del>	Υ	.043260
• • • • • • • • • • • • • • • • • • •								240507
2 Total of line 1, column (d)				,		2		.248587
3 Average distribution ratio for the 5		on line 2 by 5,	or by the number	of year	S			040515
the foundation has been in exister	nce if less than 5 years					3		.049717
4 Enter the net value of noncharitab	le-use assets for 2012 from Part X,	line 5				4		808,554.
5 Multiply line 4 by line 3						5		40,199.
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)					6		68.
7 Add lines 5 and 6						7		40,267.
8 Enter qualifying distributions from	n Part XII. line 4					8		31,136.
If line 8 is equal to or greater than	line 7, check the box in Part VI, line	1b, and comp	olete that part usin	ng a 1%	tax rate.	_ <u>~</u> _	.k	
See the Part VI instructions.								

	m 990-PF (2012) AUSMAN FAMILY FOUNDATION INC.	40(1-) 4040(-) 4	<u>16-6</u>	093020		Page 4
	art VI Excise Tax Based on Investment Income (Section 4940(a), 494		<del>948 -</del> :	see instri	CTIO	ns)
	a Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and enter "N/A" o					
	Date of ruling or determination letter: (attach copy of letter if necessary-see	e instructions)				2 -
	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🔲 and	d enter 1%	1		1	<u>35.</u>
	of Part I, line 27b					
	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, h					_
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter	-0-)	2			0.
-			3		1	35.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter	· -0-)	4			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5		1	35.
	1 1					
	a 2012 estimated tax payments and 2011 overpayment credited to 2012					
b	b Exempt foreign organizations - tax withheld at source					
C	c Tax paid with application for extension of time to file (Form 8868)		1			
d	d Backup withholding erroneously withheld 6d   6d	2,583.				
	Total credits and payments. Add lines 6a through 6d		7		$\frac{2}{5}$	<u>83.</u>
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached		8			
	·	▶	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	<b>▶</b>	10		2,4	
		,448. Refunded ►	11			<u>0.</u>
	art VII-A Statements Regarding Activities			<del></del>	1.4	<u> </u>
1a	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or di	d it participate or intervene	IN		Yes	No
	any political campaign?			1a	ļ	X
	<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see ins			1b	ļ	<u>X</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of	of any matenals publishe	d or			
	distributed by the foundation in connection with the activities.					
	c Did the foundation file Form 1120-POL for this year?			<u>1c</u>	<u> </u>	X
d	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	_				
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$	<u> </u>				
е	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax im	posed on foundation				
	managers. ► \$0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2	<u> </u>	X
	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument,	, articles of incorporation, o	r		l	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3_	X	<u> </u>
	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4 <u>a</u>	ļ	X
	b If "Yes," has it filed a tax return on Form 990-T for this year?		N/		ļ	<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5	1	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 either					ŀ
	By language in the governing instrument, or					
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions</li> </ul>	s that conflict with the state	law		l	
	remain in the governing instrument?			6	X	<del>                                     </del>
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	<u> </u>
	If "Yes," complete Part II, col (c), and Part XV.					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)   NY					
b	b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Ger	neral (or designate)			1	
	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 section 4942	?(j)(3) or 4942(j)(5) for cale	ndar		1	
	year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete I			9		X
10			TMT	9 10	X	<u> </u>
				Form <b>99</b> 0	)-PF	(2012)

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orm 990-PF (2012) AUSMAN FAMILY FOUNDATION			<u>16-60930</u>	20 Page 6
Part VII-B   Statements Regarding Activities for Which I	-orm 4/20 May Be I	Requirea (contin	ued)	
5a During the year did the foundation pay or incur any amount to.	_	<del>1</del>	[==	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es X No	
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indir			
any voter registration drive?			es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y6	es 🗶 No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No	
'(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or			
the prevention of cruelty to children or animals?			es 🗶 No	
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify unit		ın Regulatıons		
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for				
expenditure responsibility for the grant?		I∕A ∐Y∈	es L No	
If "Yes," attach the statement required by Regulations section 53 494			+	
${\bf 6a}$ Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			.
a personal benefit contract?		Ye	es X No	
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		<u> </u>	Sb X
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	es X No	
b If Yes, did the foundation receive any proceeds or have any net income attribu				7b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	inagers, Highly	<i>'</i>	
List all officers, directors, trustees, foundation managers and their	compensation			
List all officers, directors, a distees, foundation managers and their	1	(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
TAMEC AUCHAN	to position PRESIDENT	enter -0-)	compensation	allowances
JAMES AUSMAN 70-950 FAIRWAY DRIVE	LKESIDEMI			
RANCHO MIRAGE, CA 92270	10.00	0.	0.	0.
SHELL AUSMAN	TREASURER		- 0.	
144 S REEVES DRIVE #201	IKEASOKEK			
BEVERLY HILLS, CA 90212	20.00	130,200.	0.	0.
DEVERDI NIDES, CA 30212	20.00	130,200.	0.	
			-	
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average	(a) Companyation	(d) Contributions to employee benefit plans	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	allowances
NONE				
				<del></del>
	]			
Total number of other employees paid over \$50,000				0
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Part VIII Information About Officers, Directors, Trustees, Foundate Paid Employees, and Contractors (continued)	tion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
REED SMITH LLP		
255 FIFTH AVE, PITTSBURGH, PA 15222	LEGAL	381,858.
	J	
Total number of others receiving over \$50,000 for professional services		<u>▶</u> 0
Part IX-A Summary of Direct Charitable Activities	<u>-</u>	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statisti number of organizations and other beneficiaries served, conferences convened, research papers produced.		Expenses
1 N/A		
2		-
		<u> </u>
3		
4		
A SHARWAY TAKEN		
D-+IV DIG (D DI-LII)		
Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on I	10	A
	mes I and 2.	Amount
1 <u>N/A</u>		
Mark the second		
2		
All other program-related investments. See instructions.		
. •		
3		
Total. Add lines 1 through 3	<b>&gt;</b>	0.
		Form <b>990-PF</b> (2012)

Р	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, se	ee instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	34,275.
b	Average of monthly cash balances	1b	82,235.
C	Fair market value of all other assets	1c	704,357.
d	Total (add lines 1a, b, and c)	1d	820,867.
e	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	820,867.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	12,313.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	808,554.
6	Minimum investment return. Enter 5% of line 5	6	40,428.
P	<b>art XI</b> 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.)	ıd certaın	
1	Minimum investment return from Part X, line 6	1	40,428.
2a	Tax on investment income for 2012 from Part VI, line 5		
b	Income tax for 2012. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	135.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	40,293.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	40,293.
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	40,293.
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	31,136.
Ь	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	31,136.
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	31,136.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for the	he section

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI,		· · · · · · · · · · · · · · · · · · ·	-	
line 7				40,293.
2 Undistributed income, if any, as of the end of 2012			-	
a Enter amount for 2011 only			31,136.	
b Total for prior years:				
, ,		0.		
3 Excess distributions carryover, if any, to 2012:				
<b>a</b> From 2007				
<b>b</b> From 2008				
<b>c</b> From 2009				
d From 2010				
e From 2011				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2012 from		"		
Part XII, line 4: ►\$ 31,136.				
a Applied to 2011, but not more than line 2a			31,136.	
<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 2012 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
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				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2011. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2012. Subtract	!			
lines 4d and 5 from line 1. This amount must				
be distributed in 2013				40,293.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2007				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2013				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2008				
b Excess from 2009				
c Excess from 2010				
d Excess from 2011				
e Excess from 2012				
				Form <b>990-PF</b> (2012)

Part XIV Private Operating F	FAMILY FOUN				193020 Page 10			
			FA, question 9)	N/A				
1 a If the foundation has received a ruling o		, , ,						
foundation, and the ruling is effective for 2012, enter the date of the ruling								
<b>b</b> Check box to indicate whether the found		ng toundation described I		4942(j)(3) or4	942(j)(5)			
2 a Enter the lesser of the adjusted net	Tax year (a) 2012	(b) 2011	Prior 3 years (c) 2010	(d) 2009	(a) Total			
income from Part I or the minimum	(a) 2012	(0) 2011	(6) 2010	(0) 2009	(e) Total			
investment return from Part X for								
each year listed					<del>                                     </del>			
b 85% of line 2a					<del>-</del>			
c Qualifying distributions from Part XII,								
line 4 for each year listed			<del> </del>					
d Amounts included in line 2c not used directly for active conduct of								
exempt activities								
e Qualifying distributions made directly								
for active conduct of exempt activities.								
Subtract line 2d from line 2c								
3 Complete 3a, b, or c for the								
alternative test relied upon:								
<ul><li>a "Assets" alternative test - enter:</li><li>(1) Value of all assets</li></ul>								
(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  Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	n had \$5 000 or m	ore in assets			
at any time during t			ii tiio iodiidatio					
1 Information Regarding Foundation	n Managers:	<u> </u>						
a List any managers of the foundation wh		than 2% of the total con	tributions received by t	ne foundation before the clo	se of any tax			
year (but only if they have contributed n	nore than \$5,000). (See s	ection 507(d)(2).)						
NONE					<del>-</del>			
<b>b</b> List any managers of the foundation wh			(or an equally large por	tion of the ownership of a p	artnership or			
other entity) of which the foundation has	s a 10% or greater interes	šl.						
NONE					<del>-</del>			
2 Information Regarding Contributi		• • • • •	_		. aata faa faan da 16			
Check here Lifthe foundation of the foundation makes gifts, grants, etc.								
a The name, address, and telephone num	,	· · · · · · · · · · · · · · · · · · ·	<del></del>	complete nome bay of of an	<u> </u>			
	· ·	in to whom applications	siloulu de audi esseu,					
JAMES AUSMAN, (760)567-2792 10833 WILSHIRE BLVD STE 416, LOS ANGELES, CA 90024								
<b>b</b> The form in which applications should b	e submitted and informati	tion and materials they s						
c Any submission deadlines:	TI AND FURE	ODB			<u>.</u>			
NONE								
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:  USUALLY RESTRICTED TO MEDICAL SCIENCE AND EDUCATION								
			2200111011					

Form **990-PF** (2012)

Total

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income
1 Program service revenue.	code	Amount	code	Amount	Tunction income
a			-		
·					
c		<del>-</del>	-		
d		<del></del>	<u> </u>		
e					
g Fees and contracts from government agencies					
<ul><li>g Fees and contracts from government agencies</li><li>2 Membership dues and assessments</li></ul>			<del> </del>		
3 Interest on savings and temporary cash			<del>                                     </del>		
investments	523920				
4 Dividends and interest from securities	523920	576.			
5 Net rental income or (loss) from real estate:	320320				
a Debt-financed property					
b Not debt-financed property	531190	90.			
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory	523000	6,096.	.		
9 Net income or (loss) from special events			I l		
10 Gross profit or (loss) from sales of inventory					,
11 Other revenue:					
a					
b	l l				
C					
d			<del>  </del>		
e					
12 Subtotal. Add columns (b), (d), and (e)		6,762.	<u> </u>	<u> </u>	
13 Total Add line 12, columns (b), (d), and (e)				13	6,762.
(See worksheet in line 13 instructions to verify calculation	ons.)			-	-
Part XVI-B Relationship of Activit	ies to the Accom	plishment of E	kempt F	Purposes	
1. M. Fully halo have and ask the fact the	h	olumn (a) of Dort V/I (	\	d manatanthi to the cook	malahment of
Explain below how each activity for which the foundation's exempt purposes (other			A CONTRIDUTE	d importantly to the accor	inplistiment of
the foundation's exempt purposes (other	than by providing lunus	- July 2001 purposes j.		· · · · · · · · · · · · · · · · · · ·	
	··· <u>-</u>				
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Form 990	-PF (2012) <b>AUSM</b> 2	AN FAMILY	FOUNDA	TION INC.		16-609	3020	Pa	ige <b>13</b>
Part X	VII Information P	legarding Tra	nsfers To a	and Transactions a	nd Relations	hips With Noncha	ritable	•	
	Exempt Orga	nizations					_		
1 Did	the organization directly or inc	lirectly engage in ar	y of the followin	g with any other organization	on described in sect	tion 501(c) of		Yes	No
	Code (other than section 501(				izations?				
<b>a</b> Tran	isfers from the reporting foun	dation to a nonchar	itable exempt or	ganization of:					
	Cash						1a(1)		X
	Other assets						1a(2)		X
	er transactions:								
( ' /	Sales of assets to a noncharit						1b(1)		X
	Purchases of assets from a n		t organization				1b(2)		X
	Rental of facilities, equipment						1b(3)		X
٠,	Reimbursement arrangement	S					1b(4)		X
٠,	Loans or loan guarantees						1b(5)		X
٠,	Performance of services or m	· ·	=				1b(6)		X
	ring of facilities, equipment, m	-					1c		X
	e answer to any of the above i							eis,	
	ervices given by the reporting imn (d) the value of the goods			en 1622 man jan market kam	ic ili aliy ilalisaciloi	TO SHAINING ATTAING THE TILL, S	IIOW III		
(a) Line no		<del></del>		e exempt organization	(d) Description	n of transfers, transactions, and	sharing an	angeme	ents
(4)2	(5),	(5)	N/A	, o	(C) Decempose				-
			14/21				<del></del>		
		-		·					
		<del>                                     </del>							
-			-						
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				en raise					
			<del> </del>						
						·			
		<u> </u>			<u> </u>				
	ne foundation directly or indire	•	•	· •	zations described	_	_,		~
	ection 501(c) of the Code (oth		(c)(3)) or in sect	tion 527?		L	Yes	LX	] No
<b>b</b> _lf *Y	es," complete the following so			(h) Turn of accompany	1	(a) December of relations			
	(a) Name of o	rganization		(b) Type of organization	<u> </u>	(c) Description of relations	ılıþ		
	N/A								
							<del></del>		
-									
	Under penalties of perjury, I declar	e that I have examined	this return, includir	ng accompanying schedules and	statements, and to the	best of my knowledge			
Sign Here	and belief, it is true, correct and/o	omplete Declaration of WTM	preparer (other tha	n taxpayer) is based on all inform  X11-13-13	nation of which prepare	retu	y the IRS of irn with the wn below Yes	e prepar (see ins	er
	Signature of officer or truste	ee		Date	Title				
	Print/Type preparer's	name	Preparer's s	ignature	Date	Check if PTIN			
Paid	DAVID THA	W	Dul	the	11 13 13	self- employed P0	0179	919	
Prepa Use C	rer Firm's name ► GU		VETT IN	C.		Firm's EIN ► 95-2			

Firm's address ► 1723 CLOVERFIELD BLVD.

SANTA MONICA, CA 90404

Phone no.

(310)828-9798 Form **990-PF** (2012)

#### 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

16-6093020 AUSMAN FAMILY FOUNDATION INC 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 X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

AUSMA	N FAMILY FOUNDATION INC.	1	5-6093020
Part I	Contributors (see instructions) Use duplicate copies of Part I if additiona	al space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CHRISTINE AUSMAN  1401 N. WESTERN AVE  LAKE FOREST, IL 60045	\$ 1,200,000.	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
2	CHRISTINE AUSMAN  1401 N. WESTERN AVE  LAKE FOREST, IL 60045	\$ 1,000,000.	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
3	CHRISTINE AUSMAN  1401 N. WESTERN AVE  LAKE FOREST, IL 60045	\$ 536,254.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person Payroll Noncash Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

#### AUSMAN FAMILY FOUNDATION INC.

16-6093020

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		
1	RESIDENTIAL REAL ESTATE 5461 E GLEN EAGLES DRIVE TUSCON AZ 85718	\$ 1,200,000.	08/15/12		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
2	RESIDENTIAL REAL ESTATE 3538 WILLOW VALLEY ROAD LONG GROVE IL 60047	sss	08/15/12		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		<b>\$</b>			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		<b>\$</b>			
(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		
223453 12-2		\$Schedule R /Form 9	90, 990-EZ, or 990-PF) (201		

Schedule B	3 (Form 990, 990-EZ, or 990-PF) (2012)		Page				
Name of org			Employer identification number				
AUSMAN Part III	FAMILY FOUNDATION INC.  Exclusively religious, charitable, etc., individual year Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc.,	dual contributions to section 501(c	16-6093020 )(7), (8), or (10) organizations that total more than \$1,000 for the organizations that total more than \$1,000 for the organizations that total more than \$1,000 for the organization by \$				
	Use duplicate copies of Part III if additional		the year. (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 gif	t				
	Transferee's name, address, and	d ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	Transferee's name, address, and	(e) Transfer of gif	Relationship 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, and	d ZIP + 4	Relationship 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 gif					
-	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee				

P.O BOX 43010

COMPUTERSHARE

PROVIDENCE RI 02940-3010

Payer's Federal ID Number 43-1912740

,	Account Number. C0000136484	Recipient's ID No. ending in ***-**-3020
DONALD C AUSMAN FAMILY FOUNDATION INC C/O JAMES I AUSMAN •70950 FAIRWAY DR RANCHO MIRAGE CA 92270	Reported Sales pnce to IRS Sales price loss commissions and opton premiums	Corrected (if checked)

OMB No. Form 1099-B - Proceeds From Broker and Barter Exchange Transactions

2012

1545-0715

14 State 15 State tax identification withheld (\$) 8036173CI3 క Description 13 State 100 of 100 Shares Sold Cost 4 FEDERAL 5 Wash sale 6a Check if 6b Check if 6b or other INCOME TAX loss disallowed Noncovered Basis reported basis (\$\$) WITHHELD (\$\$) Your sale of 100 shares of COMMON STOCK (CUSIP: 28176E108) sold @ \$71.95 on 03 Feb 2012 and totaling \$7,195.00 will be reported to the IRS as follows:
03 Feb 2012 2,014 60 ∑1,014 60 区 Stocks, 3 bonds, etc. (\$) Quantity 2a sold Type of 1d Slock or 1e gain or other symbol loss 18 Date of 18 Date of 1c sale or acquisition exchange

Issuer Name: Edwards Lifesciences Corporation

503.65

NOTE: The Payer will report the amount in column 2a to the IRS. The difference between the reportable proceeds in column 2a and the net proceeds you received represents withholding taxes and nonstandard service fees or charges you may have paid

Copy B - For Recipient (Keep for your records)
This is important tax information and is being furnished to the internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported

DONALD C AUSMAN FAMILY FOUNDATION INC C/O JAMES I AUSMAN 70950 FAIRWAY DR 2 RANCHO MIRAGE CA 92270

Payer's Details
COMPUTERSHARE
PO BOX 43010
PROVIDENCE RI 02940-3010
Payer's Federal ID Number 43-1912740

Reported Sales price to IRS Sales price Sales commissions and option premiums Corrected (if checked)

Account Number: C0000238198 Recipient's ID No 16-6093020

, 3, 3,

2012

1545-0715

OMB No.

# Form 1099-B - Proceeds From Broker and Barter Exchange Transactions

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Description 13 14 State 15 State tax State 15 State tax State 16 identification withheld (\$)	81 of 81 Shares Sold CA 8036173Cl3 142.01
19 Date of 15 Type of 16 Stock or 19 sold bonds, or other   INCOME TAX   Security   Basis reported   Basis r	Your sale of 81 shares of COMMON (CUSIP: 14170T101) sold @ \$25.045061 on 06 Feb 2012 and totaling \$2,028.65 will be reported to the IRS as follows: 06 Feb 2012 568 02 ⊠ □ □

Department of the Treasury - Internal Revenue Service NOTE: The Payer will report the amount in column 2a to the IRS. The difference between the reportable proceeds in column 2a and the net proceeds you received represents withholding taxes and nonstandard service fees or charges you may have pard. Copy B - For Recipient (Keep for your records)

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

101UTX\_01CM5B\_01

Part IV   Capital Gains and Los	ses for Tax on Investment Income				
	describe the kind(s) of property sol ick warehouse; or common stock, 2		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a COCA COLA COMPA	ANY		P	VARIOUS	02/06/12
b MCDONALDS CORP			P	VARIOUS	02/06/12
c MEDTRONIC			P	VARIOUS	02/06/12
d WAL-MART STORE	SINC		P	VARIOUS	02/06/12
e WALGREEN 'COMPAI	YY		P	VARIOUS	02/06/12
1 ISHARES DJ US	ENERGY		P	VARIOUS	02/06/12
g BAXTER INTL IN	C		P	VARIOUS	03/22/12
h CARDINAL HEALT	H INC		P	VARIOUS	03/22/12
EDWARDS LIFE SO	CIENCES		P	VARIOUS	03/22/12
EDWARDS LIFE S	CIENCES		P	VARIOUS	02/03/12
k CVS CAREMARK CO	ORP		P	VARIOUS	04/09/12
CAREFUSION COR	<u> </u>		P	VARIOUS	02/08/12
m					
n					
0					<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		) Gain or (loss) blus (f) minus (g)	
a 18,626.		19,099.			-473.

	(h) Gain or (loss) (e) plus (f) minus (g)	(g) Cost or other basis plus expense of sale	(f) Depreciation allowed (or allowable)	(e) Gross sales price	
-473.		19,099.		18,626.	
2,146.		17,272.		19,418.	
-2,682.		10,080.		7,398.	
1,229.		14,043.		15,272.	
-2,943.		20,969.		18,026.	
-1,180.		24,390.		23,210.	
7,832.		44,546.		52,378.	
417.		6,245.		6,662.	
-1,099.		8,084.		6,985.	
-916.		8,084.		7,168.	
1,761.		6,363.		8,124.	
2,004.				2,004.	
	(I) Losses (from col. (h))	the foundation on 12/31/69	gain in column (h) and owned by t	Complete only for assets showing	
col. (k),	Gains (excess of col. (h) gain over but not less than "-0-")	(k) Excess of col. (I) over col. (J), If any	(j) Adjusted basis as of 12/31/69	(i) F.M.V. as of 12/31/69	
-473.					
2,146.					

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
			-47
			2,14
			-2,68
			1,22
			-2,94
			-1,18
			7,83
			41
			91
			1,76
			2,00
Capital gain net income or (net cap	ortal loss) {   If gain, also ente	r in Part I, line 7 0-" in Part I, line 7	2 6,09

223591 05-01-12

If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8

FORM 990-PF DIV	IDENDS AND	INTERE	EST FROM	SECUF	RITIES	STATEMENT	1
SOURCE		GROSS	AMOUNT		TAL GAINS	COLUMN (A AMOUNT	)
SPROTT GLOBAL	-	-	576.		0.	5	76.
TOTAL TO FM 990-PF, PART	I, LN 4		576.		0.	5	76.
FORM 990-PF	REN'	ral inc	COME		·	STATEMENT	2
KIND AND LOCATION OF PRO	PERTY				ACTIVITY NUMBER		OME
RESIDENTIAL RENTAL, AZ					1		90.
TOTAL TO FORM 990-PF, PA	RT I, LINE	5 <b>A</b>					90.
FORM 990-PF		LEGAL	FEES			STATEMENT	3
DESCRIPTION	EXPE				ADJUSTED	CHARITA	
LEGAL FEES	38	1,858.		0.			0.
TO FM 990-PF, PG 1, LN 1	6A 38	1,858.		0.			0.
FORM 990-PF	AC	COUNTIN	NG FEES			STATEMENT	4
	EXPE		(B) NET INVE MENT INC				
DESCRIPTION	FER .						
DESCRIPTION	<del></del>	3,500.		0.		<del></del>	0.
				0.			0

FORM 990-PF	TAX	ES		STATEMENT 5
DESCRIPTION .	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
NEW YORK STATE FRANCHISE TAX BOARD	100. 645.		•	0.
TO FORM 990-PF, PG 1, LN 18	745.	0	•	0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
TELEPHONE BANK FEES POSTAGE SUPPLIES INSURANCE OTHER ADMINISTRATIVE EXPENSES	328. 813. 4,608. 4,921. 3,270.	0 0 0 0	•	0. 0. 0. 0.
TO FORM 990-PF, PG 1, LN 23	27,366.			0.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 7
DESCRIPTION		В	OOK VALUE	FAIR MARKET VALUE
ABACUS MINING & EXPLORATION ATNA RES LTD COMSTOCK METALS LTD GOLDQUEST MINING CORP RENEGADE PETROLEUM LTD RESERVOIR MINERALS INC ROXGOLD INC			106,500. 9,747. 9,790. 10,411. 14,848. 9,682. 13,533.	79,680. 8,400. 4,100. 6,720. 13,999. 7,504. 10,491.
TOTAL TO FORM 990-PF, PART I	I, LINE 10B		174,511.	130,894.

FORM 990-PF	OTHER INVESTMENTS		STATEMENT 8
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
REAL ESTATE (IL) REAL ESTATE (AZ) GOLD & SILVER	COST COST COST	1,000,000. 1,200,000. 241,359.	•
TOTAL TO FORM 990-PF,	PART II, LINE 13	2,441,359.	1,570,795.
FORM 990-PF	LIST OF SUBSTANTIAL CONTRIE PART VII-A, LINE 10	BUTORS	STATEMENT 9
NAME OF CONTRIBUTOR	ADDRESS		
CHRISTINE AUSMAN	1401 N. WESTE LAKE FOREST,		

New York State
Department of State
Division of Corporations, State Records and Uniform Commercial Code
One Commerce Plaza, 99 Washington Avenue
Albany, NY 12231
www.dos.ny.gov

# CERTIFICATE OF AMENDMENT OF THE CERTIFICATE OF INCORPORATION OF

Donald C. Ausman Family Foundation Inc.

(Insert Name of Domestic Corporation)

Under Section 803 of the Not-for-Profit Corporation Law

FIRST: The name of the corporation is:  Donald C Ausman Family Foundation Inc.				
SECOND: The certificate of incorporation was filed by the Department of State on:  December 27, 1967				
December 21, 1907				
THIRD: The law the corporation was formed under is: Membership Corporations Law				
FOURTH: The corporation is a corporation as defined in Section 102(a)(5) of the Not-for-Profit Corporation Law.				
FIFTH: The corporation is a Type B corporation. If the corporate purposes are being enlarged, limited or otherwise changed, the corporation shall be a Type corporation.				

# SIXTH: The amendment effected by this certificate of amendment is as follows: (Sct forth each amendment in a separate paragraph providing the subject matter and full text of each amended paragraph. For example, an amendment changing the name of the corporation would read as follows: "Paragraph First of the Certificate of Incorporation relating to the corporation is hereby amended to read in its entirety as follows: First: The name of the corporation is . (new name) ... ") Paragraph First of the Certificate of Incorporation relating to Donald C. Ausman Family Foundation Inc. is hereby [check the appropriate box] added to read in its entirety as follows or amended to read in its entirety as follows: First: The name of the corporation is Ausman Family Foundation Inc.

SEVENTH: The Secretary of State is designated as agent of the corporation upon whom process against it may be served. The address to which the Secretary of State shall forward copies of process accepted on behalf of the corporation is:

Ausman Family Foundation Inc. Attn: James I Ausman, M.D. 70-950 Fairway Drive Rancho Mirage, CA 92270

EIC	GHTH: The certificate of amendment was authorized by: (Check the appropriate box)			
	The amendment was authorized by a vote of a majority of the members at a meeting.			
	The amendment was authorized by the unanimous written consent of the members entitled to vote thereon.			
X	The amendment was authorized by a vote of a majority of the entire board of directors.  The corporation has no members.			
MU AUNIA President				
(Signa	(Signer's Title)			

James I. Ausman, M.D.

(Print or Type Signer's Name)

## CERTIFICATE OF AMENDMENT OF THE CERTIFICATE OF INCORPORATION OF

Donald C. Ausman Family Foundation Inc.

(Insert Name of Domestic Corporation)

Under Section 803 of the Not-for-Profit Corporation Law

·
Filer's Name Michael T. Wycklendt
Address Reed Smith, LLP, 10 South Wacker Drive, Floor 40
City, State and Zip Code Chicago, Illinois 60606
NOTE: The certificate must be submitted with a \$30 filing fee. This form was prepared by the New York State Department of State. It does not contain all optional provisions under the law. You are not required to use this form. You may draft your own form or use forms available at legal stationery stores. The Department of State recommends that all documents be prepared under the guidance of an attorney. Please be sure to review Section 804 and Section 404 of the Not-for-Profit Corporation Law to determine if any consents or approvals are required to be attached to this certificate of amendment.
For Office Use Only

#### Credit Card Authorization

Department of State Division of Licensing Services P O. Box 22001 Albany, NY 12201-2001

The Department of State's Division of Licensing Services accepts MasterCard and Visa for payment of fees. To pay fees using a credit card, simply complete and sign this form and attach it to your application.

We process credit card payments upon receipt.

Please PRINT CLEARLY in blue or black ink.					
APPLICANT'S INFORMATION					
Please enter the name of the person or company this payment is being made for.					
FIRST NAME	MIDDLE NAME.				
COMPANY NAME Donald C. Ausman Family Foundation Inc UNIQUE I DNUMBER (# applicable)					
CREDIT CAP	RD INFORMATION				
NAME AS IT APPEARS ON CARD: John R. Wiktor					
STREET ADDRESS  10 South Wacker Driver, Floor 40  APT / UNIT / PO BOX					
сіту Chicago	STATE Illinois	ZIP+4 60606			
Total Amount Due: \$ 30 00					
Please charge to the following credit card:					
MasterCard Visa Expiratio	n Date: (Month) 02 (Year) 2014	<del>-</del>			
Credit Card No.					
If there is a problem processing this payment, we would like to be able to reach you by phone.					
Optional: Daytime telephone number: (	3 1 2) 2 0 7	2 7 6 9			
Cardholder's Signature:	.7				
Date: 8 /8	1/12				