

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

2012

OMB No 1545-0052

Department of the Treasury Internal Revonue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

For cal	endar year 2012, or tax year beginning	, 2012	, and ending				
1342	Sharing of Blessings Foundat 5 Windcrest Lane	ion		В	Employer identification nur 20-1864617 Telephone number (see the		
Gran	d Haven, MI 49417			С	If exemption application is	pending, check here	▶ □
G Che	eck all that apply Initial return Final return	Initial return of a form	ner public charity	D	1 Foreign organizations, chec	k here	►
	Address change	Name change			2 Foreign organizations meet here and attach computation		ck
H C	heck type of organization X Section 501 Section 4947(a)(1) nonexempt charitable t	(c)(3) exempt private f	oundation orivate foundation	E	If private foundation status		L
	air market value of all assets at end of year J Acc	ounting method: XC			under section 507(b)(1)(A)	, check here	►
▶ \$	807, 983. (Part 1,	column (d) must be or	r cash basis)	F	If the foundation is in a 60 under section 507(b)(1)(B)		
Part I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	(a) Revenue and expenses per books	(b) Net investment income	nt	(c) Adjusted net income	(d) Disburseme for charita purposes (d basis only	ible :ash
	1 Contributions, gifts, grants, etc, received (att sch) 2 Ck lifthe foundn is not reg to att Sch B	125,000.					
	3 Interest on savings and temporary cash investments	61,122.	61,12	22.	61,122.		
	4 Dividends and interest from securities 5 a Gross rents						
	b Net rental income or (loss)						
R E V	6 a Net gain/(loss) from sale of assets not one in the following the fol	VED					
V F	assets on line 6a 7 Capital gain net income (from Part IV, line 2)	101					
E N U	Capital gain net income (from Part V, line 2) 8 Net short-term capital gain 9 Income modifications	8 2013 1821					
Ĕ	10 a Gross sales less returns and	-1117			-		
	10 a Gross sales less returns and allowances b Less Cost of goods sold	N. Ul					
	goods sold c Gross profit/(loss) (att sch)						
	11 Other income (attach schedule)						
	12 Total. Add lines 1 through 11	106 122	C1 12	22	61 100		
	13 Compensation of officers, directors, trustees, etc	186,122. 0.	61,12		61,122.		
	14 Other employee salaries and wages15 Pension plans, employee benefits						
Δ	16 a Legal fees (attach schedule)						
A D M	b Accounting fees (attach sch) See St 1	200.					200.
₹3.	c Other prof fees (attach sch) 17 Interest						
E S	18 Taxes (attach schedule)(see instrs) See Stm 2	1,180.				1.1	180.
R A T	19 Depreciation (attach sch) and depletion					-/-	
	20 Occupancy						!
¥W¥	21 Travel, conferences, and meetings 22 Printing and publications						
VŒ€≥₩ ≃™™™	23 Other expenses (attach schedule)						
SCANNES MAX-24 289 2813	See Statement 3 24 Total operating and administrative	54.					54.
Æ S S	expenses. Add lines 13 through 23	1,434.				1,4	434.
) SC	25 Contributions, gifts, grants paid Stmt 4 26 Total expenses and disbursements.	50,660.				50,6	660.
-	Add lines 24 and 25	52,094.		0.	0.	52,0	094.
	27 Subtract line 26 from line 12 a Excess of revenue over expenses						
	and disbursements	134,028.					
	b Net investment income (if negative, enter -0-) C Adjusted net Income (if negative, enter -0-)		61,12	<u>.z.</u>	61,122.		
BAA F	or Paperwork Reduction Act Notice, see ins	tructions.		TEE	A0504L 12/23/12	Form 990-PF	(2012)

34

Form 990-PF (2012) The Sharing of Blessings Foundation 20-1864617 Page 2 Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) Beginning of year End of year Part II Balance Sheets (a) Book Value (b) Book Value (c) Fair Market Value Cash - non-interest-bearing 10,740 88,647 88,647. 2 Savings and temporary cash investments Accounts receivable Less allowance for doubtful accounts Pledges receivable Less allowance for doubtful accounts ▶ 5 Grants receivable Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) Other notes and loans receivable (attach sch) Less: allowance for doubtful accounts 663,215. 719,336. 719,336 Inventories for sale or use Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations (attach schedule) **b** Investments - corporate stock (attach schedule) c Investments - corporate bonds (attach schedule) 11 Investments - land, buildings, and equipment basis

Less accumulated depreciation (attach schedule) 15 Other assets (describe ▶ Total assets (to be completed by all filers – see the instructions. Also, see page 1, item l) 807,983. 673,955 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue Loans from officers, directors, trustees, & other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe► 23 Total liabilities (add lines 17 through 22) S 0. 0. Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. N F E U T N Unrestricted 25 Temporarily restricted Permanently restricted ASSETS Foundations that do not follow SFAS 117, check here

Part III Analysis of Changes in Net Assets or Fund Balances

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

and complete lines 27 through 31.

(see instructions)

Capital stock, trust principal, or current funds

28 Paid-in or capital surplus, or land, building, and equipment fund

Total liabilities and net assets/fund balances

Less accumulated depreciation

12 Investments - mortgage loans 13 Investments - other (attach schedule) 14 Land, buildings, and equipment basis!

(attach schedule)

1	Total net assets or fund balances at beginning of year— Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)		
	end of year figure reported on prior year's return)	1	673,955.
2	Enter amount from Part I, line 27a	2	134,028.
3	Other increases not included in line 2 (itemize)	3	
4	Add lines 1, 2, and 3	4	807,983.
5	Decreases not included in line 2 (itemize)	5	·
6	Total net assets or fund balances at end of year (line 4 minus line 5)- Part II, column (b), line 30	6	807,983.

673,955

673,955

673,955

807,983

807,983

807,983

В

ALA

N

CE 29

30

31

0 R 807,983.

n er	(a) List and describe	the kind(s) of property sold (e.g., real, or common stock, 200 shares MLC	al estate,	(b) How acquired P — Purchase D — Donation	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a	N/A					
t						_
	3					
	1					-
-	•					
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal		(h) Gain or (e) plus (f) m	
- 8	1					
t	•					
	3					
	1					
		ng gain in column (h) and owned by		-,	(I) Gains (Colu	ımn (h)
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if ar		aın minus column (k an -0-) or Losses (fro	
	1					
)					
	<u></u>					
	•	<u> </u>			Т	
2	Capital gain net income or (net	capital loss).	enter in Part I, line 7 ter -0- in Part I, line 7	2		
3	Net short-term capital gain or (I	oss) as defined in sections 1222(5) a	and (6).			
	If gain, also enter in Part I, line in Part I, line 8	8, column (c) (see instructions). If (loss), enter -0-	- з		
Pa	₹V Qualification Under	Section 4940(e) for Reduced	Tax on Net Investme	nt Income		
If se	ction 4940(d)(2) applies, leave th	•	,,	ŕ	N/A	
	es,' the foundation does not quali	ion 4942 tax on the distributable ame fy under section 4940(e) Do not con	oplete this part.	·	Yes	∐ No
		each column for each year; see the		any entries		
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use ass	ets (colu	(d) Distribution umn (b) divided t	
	2011					
	2010					
	2009					
	2008					
	2007					
	Total of line 1, column (d)			2		
3	Average distribution ratio for the number of years the foundation	e 5-year base period— divide the tota has been in existence if less than 5	on line 2 by 5, or by the years	3		
4	·	able-use assets for 2012 from Part >	•	4		_
7	Litter the flet value of horicilant	able-use assets for 2012 from 1 art 7	v, iiile 5	-		
5	Multiply line 4 by line 3			5		
6	Enter 1% of net investment inco	ome (1% of Part I, line 27b)		6		
7	Add lines 5 and 6			7		
8	Enter qualifying distributions from	om Part XII, line 4		8		
	If line 8 is equal to or greater the Part VI instructions.	nan line 7, check the box in Part VI, l	ine 1b, and complete that p	art using a 1%	tax rate See the	•

Form	990-PF (2012) The Sharing of Blessings Foundation 20-186		_	Page 4
Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948– see instr	ructions))	
1 a	Exempt operating foundations described in section 4940(d)(2), check here			
	Date of ruling or determination letter (attach copy of letter if necessary— see instrs)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V,			L,222.
	check here ► ☐ and enter 1% of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			
_	foundations only. Others enter -0-)			0.
3	Add lines 1 and 2			L, 222.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	 		0.
5	Tax based on investment incomeSubtract line 4 from line 3. If zero or less, enter -0- Credits/Payments			,222.
6				
	2012 estimated tax pmts and 2011 overpayment credited to 2012 Exempt foreign organizations — tax withheld at source.			
	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d		•	L,400.
8	Enter any penalty for underpayment of estimated tax. Check here			1, 100.
9	Tax due If the total of lines 5 and 8 is more than line 7, enteramount owed	- -		0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter theamount overpaid			178.
11	Enter the amount of line 10 to be Credited to 2013 estimated tax. 178. Refunded 111	_		0.
අත	tiVIIFA Statements Regarding Activities			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Y	es No
	participate or intervene in any political campaign?		1 a	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		1 Ь	x
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials publish or distributed by the foundation in connection with the activities	ned		
c	Did the foundation file Form 1120-POL for this year?	-	1 c	Х
C	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation	0.		
	foundation managers •\$ 0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	ľ	2	Х
	If 'Yes,' attach a detailed description of the activities	į,		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
•	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		3	X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4 a	X
b	If 'Yes,' has it filed a tax return on Form 990-T for this year?	Ļ	4 b	N/A
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	i i		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	ct	6	Х
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	-		$\frac{x}{x}$
	Enter the states to which the foundation reports or with which it is registered (see instructions)	Ţ		
	N/A	_		
b	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	_		
	(or designate) of each state as required by General Instruction G? If 'No,' attach explanation		8 b	X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 494 for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)7f 'Yes,' complete Part	12()(5)	9	v
			-	<u>X</u>
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their name: and addresses		10	l x
BAA				PF (2012)

للقاتما	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		х
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)	ad 12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address N/A			
14	The books are in care of Derald A. Trannel Telephone no			
15	Located at ► 13425 Windcrest Lane, Grand Haven, MI ZIP + 4 ► 49417	_{NT/}	-	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of form 1041 — Check here	, M	A '	
	and enter the amount of tax-exempt interest received or accrued during the year		Tv	N/A
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over bank, securities, or other financial account in a foreign country?	a 16	Yes	No 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 ▶			
අන	tiVIIEB 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
1 a	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?	No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X	No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	No E		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X	No		
	(6) Agree to pay money or property to a government official? Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	No		
Ŀ	If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1	b]	N/A
	Organizations relying on a current notice regarding disaster assistance check here.			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2012?	1	С	X
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 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012?	No		
	If 'Yes,' list the years 20, 20, 20	140		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer 'No' and attach statement— see instructions)	2	p j	N/A
C	If the provisions of section 4942(a)(2) are being applied to to the years listed in 2a, list the years here 20, 20, 20, 20			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	No		
t	olf 'Yes,' did it have excess business holdings in 2012 as a result of(1) any purchase by the foundation or disqualified persons after May 26, 1969;(2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period?(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2012)	3	b ,	N/A
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its	3	- - 1	177
	charitable purposes?	4	a	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could geopardize its charitable purpose that had not been removed from jeopardy before the first day of			
	the tax year beginning in 2012?	4	b	Х
BAA		Form !	90-PF	(2012)

Form 990-PF (2012) The Sharing of Ble Part VII-B; Statements Regarding Activit	essings Foundat	ion		-186461	17 Page 6
		14/20 May be Req	uired (continu	ea)	Telephone Transfer and All Control of the Line
5 a During the year did the foundation pay or incu(1) Carry on propaganda, or otherwise attempt	=	n (section 4945(e))?	Yes	X No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	lic election (see section		— — — — — — — — — — — — — — — — — — —	_	
(3) Provide a grant to an individual for travel,		purposes?	Yes Yes	X No X No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, or 4940(d)(2)? (see instri	rganization described uctions)	Yes	X No	
(5) Provide for any purpose other than religio educational purposes, or for the preventio	us, charitable, scientific n of cruelty to children	e, literary, or or animals?	Yes	X No	
b If any answer is 'Yes' to 5a(1)-(5), didany of to described in Regulations section 53.4945 or in (see instructions)?	he transactions fail to q a current notice regard	jualify under the except ding disaster assistance	ions		5b N/A
Organizations relying on a current notice rega	rding disaster assistand	ce check here	•	· 🗍	
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	sibility for the grant?	·	N/A Yes	_ ∏ No	
If 'Yes,' attach the statement required by Reg	ulations section 53 4945	5-5(d)			
6 a Did the foundation, during the year, receive at on a personal benefit contract?			Yes	XNo	
b Did the foundation, during the year, pay prem	iums, directly or indirec	tly, on a personal bene	fit contract?		6b X
If 'Yes' to 6b, file Form 8870	dak				
7 a At any time during the tax year, was the found b If 'Yes,' did the foundation receive any procee				X No	
Part VIII Information About Officers, Dire				N/A	7b
and Contractors	ectors, trustees, ro	undation Wanagers	, nignly Paid El	npioyee	'5 ,
List all officers, directors, trustees, foundation	n managare and their a	amparation (assinct			
List all officers, directors, trustees, foundation	(b) Title, and average			to (a) (Evnance coccupt
(a) Name and address	hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions employee bene plans and defer compensation	efit (Expense account, other allowances
Jerald A. Trannel	Director	0.		0.	0.
13425 Windcrest Lane	0				
Grand Haven, MI 49417					
Diane M. Trannel 13425 Windcrest Lane Grand Haven, MI 49417	Director 0	0.		0.	0.
orana naveny na 19417					
					-
2 Compensation of five highest-paid employee	s (other than those inc	luded on line-1 see ins	tructions). If none	enter 'NC	ONE.'
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions employee bene plans and defer compensation	efit i o	Expense account, other allowances
None					
				_	
					·
Total number of other employees paid over \$50,000				-	
BAA	TEEA0306L 1:	2/25/12		Fc	orm 990-PF (2012)

3 Five highest-paid independent contractors for professional services (see instructions). If r	none, enter 'NONE.'	
	pe of service	(c) Compensation
None	·	<u> </u>
	<u></u>	····
		·
Total number of others receiving over \$50,000 for professional services	•	
Part X-A Summary of Direct Charitable Activities	·	
T CONTROL OF DIRECT CHARTCASIC ACTIVITIES		
List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such a organizations and other beneficiaries served, conferences convened, research papers produced, etc.	as the number of	Expenses
1 N/A		
· Mu		
2		
3		
4		
		
Part X-B Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax yea	r on lines 1 and 2	Amount
1		
N/A		
2		
All about the second se		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		0
		1.1

20-1864617

Page 7

Form 990-PF (2012) The Sharing of Blessings Foundation

Form 990-PF (2012) The Sharing of Blessings Foundation	20-1864617 Page 8
Part X Minimum Investment Return (All domestic foundations must complete this page instructions.)	part. Foreign foundations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purpose a Average monthly fair market value of securities	s: 1a
b Average of monthly cash balances	1b 49,642.
c Fair market value of all other assets (see instructions)	1c 691,135.
d Total (add lines 1a, b, and c).	1d 740,777.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c	
(attach detailed explanation)	0.
2 Acquisition indebtedness applicable to line 1 assets	2 0.
3 Subtract line 2 from line 1d	3 740,777.
4 Cash deemed held for charitable activities, Enter 1-1/2% of line 3	
(for greater amount, see instructions)	4 11,112.
5 Net value of noncharitable-use assetsSubtract line 4 from line 3 Enter here and on Part V, line 4	5 729,665.
6 Minimum investment return Enter 5% of line 5	6 36,483.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private	. •
and certain foreign organizations check here ► and do not complete this	part.)
1 Minimum investment return from Part X, line 6	1 36,483.
2a Tax on investment income for 2012 from Part VI, line 5	.,222.
b Income tax for 2012 (This does not include the tax from Part VI.)	- 1
c Add lines 2a and 2b	2c 1,222.
3 Distributable amount before adjustments Subtract line 2c from line 1	35,261.
4 Recoveries of amounts treated as qualifying distributions	4
5 Add lines 3 and 4	5 35,261.
6 Deduction from distributable amount (see instructions)	6
7 Distributable amountas adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7 35,261.
Part 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 52,094.
b Program-related investments – total from Part IX-B	1b
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. purpose	

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)

3 Amounts set aside for specific charitable projects that satisfy the. a Suitability test (prior IRS approval required)

Adjusted qualifying distributions Subtract line 5 from line 4

b Cash distribution test (attach the required schedule)

BAA

Form **990-PF** (2012)

52,094.

52,094.

3 a

3 b

4

5

6

Part XIII Undistributed Income (see instructions)

1 Distributable amount for 2012 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2012 a Enter amount for 2011 only b Total for prior years 20 _ , 20 _ , 20 3 Excess distributions carryover, if any, to 2012	35,261.
2 Undistributed income, if any, as of the end of 2012 a Enter amount for 2011 only b Total for prior years 20, 20, 20	35,201.
a Enter amount for 2011 only 0. b Total for prior years 20, 20 0.	
b Total for prior years 20, 20, 20	
a From 2007 2, 207.	
b From 2008 10, 331.	
c From 2009 12, 294.	
d From 2010 16,121.	
e From 2011 23, 529.	
f Total of lines 3a through e 64, 482.	
4 Qualifying distributions for 2012 from Part	
XII, line 4 • \$ 52,094.	
a Applied to 2011, but not more than line 2a	
b Applied to undistributed income of prior years (Election required – see instructions)	
c Treated as distributions out of corpus	
(Election required – see instructions)	
d Applied to 2012 distributable amount	35,261.
e Remaining amount distributed out of corpus 16,833.	
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the	0.
same amount 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 81.315	
01/010.	
b Prior years' undistributed income. Subtract line 4b from line 2b	
c Enter the amount of prior years' undistribut-	
ed income for which a notice of deficiency has been issued, or on which the section	
4942(a) tax has been previously assessed	
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 instructions	
f Undistributed income for 2012 Subtract lines	
4d and 5 from line 1 This amount must be	
distributed in 2013	0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed	
by section 170(b)(1)(F) or 4942(g)(3)	!
(see instructions)	
8 Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions) 2 207	
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a 79,108.	
10 Analysis of line 9	
a Excess from 2008 10, 331.	
b Excess from 2009 12, 294.	
c Excess from 2010 16, 121.	
d Excess from 2011 23, 529.	
e Excess from 2012. 16,833.	'

Form 990-PF (2012) The Sharing of Bl	essings Fou	ndation		20-1864617	Page 10
Part XIV Private Operating Foundat				<u> </u>	N/A
1 a If the foundation has received a ruling or d is effective for 2012, enter the date of the	ruling	•		` ` _	
b Check box to indicate whether the foundation		erating foundation o		4942(J)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	45 2011	Prior 3 years	(4) 2000	4-5 T - 4-1
investment return from Part X for each year listed	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
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.					
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				·	
Supplementary Information (assets at any time during the	(Complete this e year — see ir	part only if the structions.)	foundation had	\$5,000 or more	in
Information Regarding Foundation Manag List any managers of the foundation who h close of any tax year (but only if they have None	ave contributed m	ore than 2% of the than \$5,000) (See	total contributions re section 507(d)(2).)	ceived by the found	ation before the
b List any managers of the foundation who o a partnership or other entity) of which the t None	wn 10% or more o foundation has a 1	of the stock of a cor 0% or greater inter-	poration (or an equa est.	lly large portion of t	ne ownership of
2 Information Regarding Contribution, Gran Check here X if the foundation only m requests for funds. If the foundation makes complete items 2a, b, c, and d	akes contributions	to preselected cha	ritable organizations	and does not accep	ot unsolicited conditions,
a The name, address, and telephone number	or e-mail of the p	erson to whom app	olications should be a	addressed	
b The form in which applications should be s	ubmitted and infor	mation and materia	als they should includ	le:	
c Any submission deadlines:	-				
d Any restrictions or limitations on awards, si	uch as by geograp	hical areas, charita	ble fields, kinds of in	stitutions, or other f	actors

Page 11

3 Grants and Contributions Paid During the Year or Approved for Future Payment					
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)	substantial contributor	recipient	Contribution		
a Paid during the year	substantial contributor	recipient			
Total	, 		► 3a		
b Approved for future payment Total			▶ 3b		

Part XVI A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded b	oy section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (See instructions)
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	61,122.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory	AT 12 TO MANAGEMENT OF THE PARTY OF THE PART		AND LINEARING COMMISSION COMMISSI	THE RESERVE AND ADDRESS OF THE PARTY OF THE	
11 Other revenue			建		
a			ļ		
b					
С					
d			1		
e	SHIP OF STATE OF STATE OF		SEE AND DES		
12 Subtotal Add columns (b), (d), and (e)				61,122.	
13 Total. Add line 12, columns (b), (d), and (e)				13	61,122
(See worksheet in line 13 instructions to verify calculations)	itions.)				

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See instructions.)
N/A_	
_	

Form 990-PF (2012) The Sharing of Blessings Foundation 20-1864617 Part: XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

describe	organization direct ed in section 501(c) to political organiz	of the Code (othe	age in any of the following r than section 501(c)(3) org	with any other organ panizations) or in se	nization ction 527,	Yes No
a Transfe	rs from the reportin	ng foundation to a i	noncharitable exempt organ	ization of		
(1) Cas	h					1 a (1) X
(2) Oth	er assets					1 a (2) X
	ansactions					
(1) Sale	es of assets to a no	oncharitable exemp	t organization			1 b (1) X
(2) Pur	chases of assets fr	om a noncharitable	e exempt organization			1 b (2) X
` '	ital of facilities, equ	•	ssets			1 b (3) X
(4) Rem	mbursement arrang	jements				1 b (4) X
` '	ns or Ioan guarante					1 b (5) X
			or fundraising solicitations			1 b (6) X
c Sharing	of facilities, equipi	ment, mailing lists,	other assets, or paid emplo	oyees		1 c X
any trar	nsaction or sharing	arrangement, show	mplete the following schedu the reporting foundation. If v in column (d) the value of	ile. Columr (b) shoul the foundation rece the goods, other as	d always show the fair relived less than fair mark sets, or services receive	market value of ket value in ed.
(a) Line no	(b) Amount involved	(c) Name of no	oncharitable exempt organization	(d) Description	of transfers, transactions, an	d sharing arrangements
N/A			Today take			
		-				
		-				
	•					
			¬		***	
						
	···········					
	· · · · · · · · · · · · · · · · · · ·	<u> </u>				
						
						
describe b if 'Yes,'	ed in section 501(c) complete the follow	of the Code (othe wing schedule.	d with, or related to, one or r than section 501(c)(3)) or	in section 527?		Yes XNo
) Name of organiza	ition	(b) Type of organization	on	(c) Description of re	lationship
N/A						
						
	····	,				
						
Sign Here	nenalties of perjury, I declar , and complete Declaration	e that I have examined this on of preparer (other than	return, including accompanying sched taxpayer) is based on all information	ules and statements, and to n of which preparer has an Directo	ny knowledge	May the IRS discuss this return with the preparer shown below (see instructions)?
	Print/Type preparer's n	ame	Preparer's sumature	Date		PTIN X Yes No
D !!	Lynn F) WIA TEK		5-9	Check	_
Paid			TEV COM	~ 0 /	 	PO1200393
Preparer	Firm's name	LYNN PIENIA			Firm's EIN ►	
Use Only	Firm's address	19110 W EDWA				0) 000 5075
BAA		ANTIOCH, IL	60002-9317		Phone no (63)	
ВАА						Form 990-PF (2012)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2012

Name of the organization		Employer identification number
The Sharing of Blessings	20-1864617	
Organization type (check one).		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not tre	ated as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treate	ed as a private foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by	y 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 Ru	ule and a Special Rule. See instructions
General Rule		
For an organization filing Form 990 contributor (Complete Parts I and I	, 990-EZ, or 990-PF that received, during the year, $\$5,000$ l)	or more (in money or property) from any one
Special Rules		
For a section 501(c)(3) organization 509(a)(1) and 170(b)(1)(A)(vi) and r (2) 2% of the amount on (i) Form 9	n filing Form 990 or 990-EZ that met the 33-1/3% support received from any one contributor, during the year, a cont 90, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete	test of the regulations under sections tribution of the greater ofl) \$5,000 or e Parts I and II.
total contributions of more than \$1,0	organization filing Form 990 or 990-EZ that received from 000 for useexclusively for religious, charitable, scientific, led or animals. Complete Parts I, II, and III.	n any one contributor, during the year, literary, or educational purposes, or
contributions for use exclusively for If this box is checked, enter here th	organization filing Form 990 or 990-EZ that received from religious, charitable, etc, purposes, but these contribution e total contributions that were received during the year foe parts unless the General Rule applies to this organizatio	ns díd not total to more than \$1,000
religious, charitable, etc, contributio	ons of \$5,000 or more during the year	> \$
Caution: An organization that is not covered by the answer 'No' on Part IV, line 2, of its Form 990; meet the filing requirements of Schedul	General Rule and/or the Special Rules does not file Schedule B (Form 990 or check the box on line H of its Form 990 EZ or on Part I, line 2, of le B (Form 990, 990-EZ, or 990-PF).), 990-EZ, or 990 PF) but it must its Form 990-PF, to certify that it does not
BAA For Paperwork Reduction Act No or 990-PF.	tice, see the Instructions for Form 990, 990EZ,	chedule B (Form 990, 990-EZ, or 990-PF) (2012)

Schedule B (Form	990,	990-EZ,	or	990-PF)	(2012)
Name of organization					

1 of Part 1

The Sharing of Blessings Foundation

Page 1 of Employer identification number 20-1864617

Number Name, address, and ZIP + 4 Total contributions Person Payroll Noncash (Complete Part II if there a noncash contribution) Person Payroll Noncash (Complete Part II if there a noncash contribution) Number Name, address, and ZIP + 4 Total contributions Person Payroll Noncash (Complete Part II if there a noncash contribution) Number Name, address, and ZIP + 4 Total contributions Person Payroll Noncash (Complete Part II if there a noncash contribution) Number Name, address, and ZIP + 4 Total contributions Person Payroll Noncash (Complete Part II if there a noncash contribution) Number Name, address, and ZIP + 4 Total contributions Person Payroll Noncash (Complete Part II if there a noncash contribution) Number Name, address, and ZIP + 4 Total contributions Person Payroll Noncash Number Name, address, and ZIP + 4 Total contributions Person Payroll Noncash Payroll Number Payroll Noncash Noncash Payroll Noncash Nonca	(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
Number Name, address, and ZIP + 4 Total contributions Complete Part II if there a noncash contribution	1		\$125,000.	Payroll
Complete Part II if there a noncash contribution Complete Part II if there a noncash contribution		Windermere, FL 34786		(Complete Part II if there is a noncash contribution.)
Payroll	(a) Number		(c) Total contributions	(d) Type of contribution
Complete Part II if there a noncash contribution Person Payroll Noncash Complete Part II if there a noncash contribution Payroll Noncash Non			\$	Payroll Noncash Complete Part II if there is
\$ Payroll	(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
Number Name, address, and ZIP + 4 Colar Type of contribution			\$ 	Payroll Noncash Complete Part II if there is
Person Payroll Noncash Noncash Complete Part II if there a noncash contribution	(a) Number	(b) Name, address, and ZIP + 4	(c) Total	(d)
Number Name, address, and ZIP + 4 Total contributions Person Payroll Noncash (Complete Part II if there a noncash contribution) (a) Number Name, address, and ZIP + 4 Name, address, and ZIP + 4 Person Payroll Total contributions Person Payroll Payroll Person Payroll				Payroll Noncash Complete Part II if there is
Person Payroll Noncash (Complete Part II if there a noncash contribution) (a) Number Name, address, and ZIP + 4 Person Payroll Total contributions Person Payroll Payroll			Total	(d)
(a) Number Name, address, and ZIP + 4 Contributions (d) Type of contribution Person Payroll Payroll				Payroll Noncash (Complete Part II if there is
Person Payroll Payroll	(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	
(Complete Part II if there a noncash contribution)				Payroll Noncash (Complete Part II if there is

Page

1 to

1 of Part II

The Sharing of Blessings Foundation

Employer identification number

20-1864617

Part W 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
	N/A		
		\$\$	
(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) 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) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
BAA		Chedule B (Form 990, 990-F	7

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2012)

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)	Page	1	to	1	of Part III
Name of organization		Emp	oyer ident	ification	number
The Sharing of Blessings Foundation		20	-18646	617	
Part III Exclusively religious, charitable, etc, individual contributions to section					
• organizations that total more than \$1,000 for the year. Complete columns	(a) through (e)	and t	ne followi	ng line	entry.
For organizations completing Part III, enter total of exclusively religious, charitable, etc.				•	-

	Use duplicate copies of Part III if additional	ıl space ıs needed.	istructions.)
(a) o. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	N/A		
	Transferee's name, addr	(e) Transfer of gift ess, and ZIP + 4	Relationship of transferor to transferee
(a) . from 'art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, addro	(e) Transfer of gift ess, and ZIP + 4	Relationship of transferor to transferee
(a) . from art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, addre	(e) Transfer of gift ess, and ZIP + 4	Relationship of transferor to transferee
(a) from art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	

2012	Federal Statements	Page 1
,	The Sharing of Blessings Foundation	20-1864617
Statement 1 Form 990-PF, Part I, Line 16b Accounting Fees	(a) (b) Net (c)	(d)
Accounting expense	Expenses Investment Adjusted Net Income \$ 200. Total \$ 200. \$ 0. \$ 0.	Charitable Purposes \$ 200. \$ 200.
Statement 2 Form 990-PF, Part I, Line 18 Taxes		
Excise Tax	(a) (b) Net (c) Expenses Investment Adjusted Net Income \$ 1,180. Total \$\frac{\\$5}{1},180.\$ \$\frac{1}{5}\$ 0.	(d) Charitable Purposes \$ 1,180. \$ 1,180.
Statement 3 Form 990-PF, Part I, Line 23 Other Expenses		
Annual report Bank chargese	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	(d) Charitable Purposes \$ 20. 34. \$ 54.
Statement 4 Form 990-PF, Part I, Line 25 Contributions, Gifts, and Grants		
Cash Grants and Allocations		
Class of Activity: Donee's Name: Donee's Address:	chuch St. Mary's East Dubuque	
Relationship of Donee: Organizational Status of Do Amount Given:		\$ 5,000.
Class of Activity: Donee's Name: Donee's Address:	School Rosary High School	
Relationship of Donee: Organizational Status of Don Amount Given:	none nee: School	10,000.

•

20	1	2
		_

Page 2

The Sharing of Blessings Foundation

20-1864617

230.

1,000.

250.

3,000.

3,000.

1,000.

3,000.

Statement 4 (continued)
Form 990-PF, Part I, Line 25
Contributions, Gifts, and Grants

Class of Activity: Donee's Name: Donee's Address:

Relationship of Donee: Organizational Status of Donee:

Amount Given:

Class of Activity: Donee's Name:

Donee's Address:

Relationship of Donee:

Organizational Status of Donee: Amount Given:

Class of Activity:

Donee's Name: Donee's Address:

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

Class of Activity: Donee's Name:

Donee's Address:

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

Class of Activity: Donee's Name: Donee's Address:

Relationship of Donee: Organizational Status of Donee:

Amount Given:

Class of Activity:

Donee's Name: Donee's Address:

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

Class of Activity:

Donee's Name: Donee's Address:

Class of Activity:

Relationship of Donee: Organizational Status of Donee:

Amount Given:

501 (c) (3)

Fox Vally Hospice

none

Charitable

501 (c) (3) Hesed House

none

Charitable

School

Loras College

none

School

chuch Holy Cross Church of Batavia

none

Church

chuch

St. Patrick's - Grand Haven, MI

none Church

501 (c) (3)

Northern IL food bank

none

Charitable

chuch

St. Peter's Church

none Church

501 (c) (3)

2012

Federal Statements

Page 3

The Sharing of Blessings Foundation

20-1864617

1,000.

650.

500.

500.

500.

\$

Statement 4 (continued) Form 990-PF, Part I, Line 25 Contributions, Gifts, and Grants

Donee's Name: Donee's Address:

Relationship of Donee: Organizational Status of Donee: none

Amount Given:

Charitable

501 (c) (3)

Class of Activity:

Donee's Name: Donee's Address:

Holland Rescue Mission

Coalition to Salute American's Heroes

Relationship of Donee:

Organizational Status of Donee: Amount Given:

none

Charitable

Class of Activity: 501 (c) (3)

Donee's Name: Donee's Address:

Lazarus House

Relationship of Donee: none

Organizational Status of Donee: Charitable

Amount Given:

1,000.

Class of Activity: 501 (c) (3)

Donee's Name: Donee's Address: Fox Valley Pregnancy Center

Relationship of Donee:

Organizational Status of Donee:

none Charitable

Amount Given:

501 (c) (3)

Class of Activity: Donee's Name: Donee's Address:

The Smile Train

Relationship of Donee:

none Organizational Status of Donee: Charitable

Amount Given:

Class of Activity:

Donee's Name: Donee's Address: 501(c)(3) Mercy Home for Boys & Girls

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

Charitable

Class of Activity:

Donee's Name:

Donee's Address:

501(c)(3)

none

East Dubuque Football League

Relationship of Donee: none

Organizational Status of Donee: Charitable

Amount Given:

300.

Class of Activity:

Donee's Name:

501 (c) (3) Northwestern University

20	1	2
ZU	ч	Z

Page 4

The Sharing of Blessings Foundation

20-1864617

Statement 4 (continued)
Form 990-PF, Part I, Line 25
Contributions, Gifts, and Grants

Donee's Address:

Relationship of Donee: none Organizational Status of Donee: School

Amount Given: \$ 1,000.

Class of Activity: chuch

Donee's Name: St. Patrick's Church - Chicago Donee's Address:

Relationship of Donee: , none

Organizational Status of Donee: Church
Amount Given: 1,000.

Class of Activity: 501(c)(3)

Donee's Name: 501(C)(3)
The Allbright Theatre

Donee's Address:

Relationship of Donee: none Organizational Status of Donee: Chari-

Organizational Status of Donee: Charitable
Amount Given: 400.

Class of Activity: chuch

Donee's Name:
Donee's Address:

Holy Name Cathedral

Relationship of Donee: none

Organizational Status of Donee: Church
Amount Given: 4.675.

Class of Activity: 501(c)(3)

Donee's Name: Pizza 4 Patriots Fund Donee's Address:

,

Relationship of Donee: none
Organizational Status of Donee: Charitable
Amount Given: 1,500.

Class of Activity: Charitable
Donee's Name: Alzheimer's Association

Donee's Address:

Relationship of Donee: none Organizational Status of Donee: Charitable

Amount Given: 250.

Class of Activity: 501(c)(3)
Donee's Name: Big Shoulders Fund - Chicago

Donee's Address:

Relationship of Donee: none Organizational Status of Donee: Charitable

Amount Given: 1,980.

Class of Activity: School

Donee's Name: University of Notre Dame Donee's Address:

20	1	
ZU	'	Z

Page 5

The Sharing of Blessings Foundation

20-1864617

1,500.

500.

2,000.

125.

500.

Statement 4 (continued) Form 990-PF, Part I, Line 25 Contributions, Gifts, and Grants

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

none School

501 (c) (3)

Michigan Parkinson Foundation

Donee's Name: Donee's Address:

Class of Activity:

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

Charitable

Bethany Home

501 (c) (3)

Class of Activity: Donee's Name:

Donee's Address:

Relationship of Donee: Organizational Status of Donee:

Amount Given:

Charitable

Class of Activity: 501 (c) (3)

Donee's Name:

Donee's Address:

American Red Cross

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

none

Charitable

Class of Activity: 501 (c) (3)

Donee's Name:

Donee's Address:

Holy Family Radio

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

none

Charitable

501 (c) (3)

500.

Class of Activity:

Donee's Name:

Donee's Address:

Pancreatic Cancer Foundation

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

none

Charitable

1,000.

Class of Activity:

Donee's Name:

Donee's Address:

501 (c) (3)

Wings of Mercy

Relationship of Donee: Organizational Status of Donee:

Amount Given:

none

Charitable

Class of Activity: 501 (c) (3) Donee's Name:

Donee's Address:

Grand Haven - city

2	^	1	
Z	u	ı	_

Page 6

The Sharing of Blessings Foundation

20-1864617

300.

1,000.

100.

100.

100.

100.

1,000.

Statement 4 (continued) Form 990-PF, Part I, Line 25 Contributions, Gifts, and Grants

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

none

Charitable

Class of Activity: Donee's Name: Donee's Address:

501(c)(3)

Every Mother Counts

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

none

Charitable

Class of Activity:

Donee's Name: Donee's Address: 501(c)(3)

Mission Aviation Fellowship

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

none

Charitable

Class of Activity: Donee's Name: Donee's Address:

501(c)(3) St. Francis Animal Shelter

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

none

Charitable

Class of Activity:

Donee's Name:

Donee's Address:

St. Patrick's Church Naperville,

Relationship of Donee: Organizational Status of Donee:

none

Church

Amount Given:

501(c)(3)

Class of Activity: Donee's Name:

Donee's Address:

Les Turner ALS Foundation

Relationship of Donee:

Organizational Status of Donee:

none

Charitable

Amount Given:

Class of Activity:

Donee's Name: Donee's Address:

Assumption Catholic Church

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

none

Church

Class of Activity:

Donee's Name:

501(c)(3) Radigan's Place

Donee's Address:

none

Relationship of Donee:

2012

Federal Statements

Page 7

The Sharing of Blessings Foundation

20-1864617

Statement 4 (continued) Form 990-PF, Part I, Line 25 Contributions, Gifts, and Grants

Organizational Status of Donee: Charitable Amount Given:

100.

Total \$ 50,660.