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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

For calendar year 2012 or tax year beginning

, and ending

Name of foundation THE SELFRELIANCE FOUNDATION		A Employer identification number 20-5423872			
Number and street (or P O box number if mail is not delivered to street address) 2332 W CHICAGO AVE		Room/suite 60622			
City or town, state, and ZIP code CHICAGO IL 60622		C If exemption application is pending, check here ► <input type="checkbox"/>			
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here ► <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ► <input type="checkbox"/>			
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ► <input type="checkbox"/>			
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ► \$ 5,738,506	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ► <input type="checkbox"/>			
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	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received (attach schedule)		2,009,000			
2 Check ► <input type="checkbox"/> if the foundation is not required to attach Sch B					
3 Interest on savings and temporary cash investments		38,721	38,721		
4 Dividends and interest from securities					
5 a Gross rents					
b Net rental income or (loss) _____					
6 a Net gain or (loss) from sale of assets not on line 10					
b Gross sales price for all assets on line 6a _____					
7 Capital gain net income (from Part IV, line 2) .					
8 Net short-term capital gain					
9 Income modifications					
10 a Gross sales less returns and allowances					
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11		2,047,721	38,721	0	
Operating and Administrative Expenses					
13 Compensation of officers, directors, trustees, etc					
14 Other employee salaries and wages		5,075			
15 Pension plans, employee benefits					
16 a Legal fees (attach schedule)					
b Accounting fees (attach schedule)		440			
c Other professional fees (attach schedule)					
17 Interest					
18 Taxes (attach schedule) (see instructions)					
19 Depreciation (attach schedule) and depletion					
20 Occupancy					
21 Travel, conferences, and meetings					
22 Printing and publications					
23 Other expenses (attach schedule)		139			
24 Total operating and administrative expenses.		5,654	0	0	0
Add lines 13 through 23					
25 Contributions, gifts, grants paid		317,300			317,300
26 Total expenses and disbursements Add lines 24 and 25		322,954	0	0	317,300
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements		1,724,767			
b Net investment income (if negative, enter -0-)			38,721		
c Adjusted net income (if negative, enter -0-)				0	

For Paperwork Reduction Act Notice, see instructions.

HTA

Form 990-PF (2012)

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SCANNED MAY 30 2013

Operating and Administrative Expenses

Revenue

	Part II Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing				
	2 Savings and temporary cash investments		4,013,739	5,738,506	5,738,506
	3 Accounts receivable ►				
	Less allowance for doubtful accounts ►				
	4 Pledges receivable ►				
	Less allowance for doubtful accounts ►				
	5 Grants receivable				
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	7 Other notes and loans receivable (attach schedule) ►				
	Less allowance for doubtful accounts ►				
	8 Inventories for sale or use				
	9 Prepaid expenses and deferred charges				
	10 a Investments—U S and state government obligations (attach schedule)				
	b Investments—corporate stock (attach schedule)				
	c Investments—corporate bonds (attach schedule)				
Liabilities	11 Investments—land, buildings, and equipment basis ►				
	Less accumulated depreciation (attach schedule) ►				
	12 Investments—mortgage loans				
	13 Investments—other (attach schedule)				
	14 Land, buildings, and equipment basis ►				
	Less accumulated depreciation (attach schedule) ►				
	15 Other assets (describe ►)				
	16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)		4,013,739	5,738,506	5,738,506
Net Assets or Fund Balances	17 Accounts payable and accrued expenses				
	18 Grants payable				
	19 Deferred revenue				
	20 Loans from officers, directors, trustees, and other disqualified persons				
	21 Mortgages and other notes payable (attach schedule)				
	22 Other liabilities (describe ►)				
	23 Total liabilities (add lines 17 through 22)		0	0	
	Foundations that follow SFAS 117, check here ► <input checked="" type="checkbox"/>				
	and complete lines 24 through 26 and lines 30 and 31.				
	24 Unrestricted		4,013,739	5,738,506	
Net Assets or Fund Balances	25 Temporarily restricted				
	26 Permanently restricted				
	Foundations that do not follow SFAS 117, check here ► <input type="checkbox"/>				
	and complete lines 27 through 31.				
	27 Capital stock, trust principal, or current funds				
	28 Paid-in or capital surplus, or land, bldg , and equipment fund				
	29 Retained earnings, accumulated income, endowment, or other funds				
	30 Total net assets or fund balances (see instructions)		4,013,739	5,738,506	
	31 Total liabilities and net assets/fund balances (see instructions)		4,013,739	5,738,506	

Part III Analysis of Changes in Net Assets or Fund Balances

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)	1	4,013,739
2 Enter amount from Part I, line 27a	2	1,724,767
3 Other increases not included in line 2 (itemize) ►	3	
4 Add lines 1, 2, and 3	4	5,738,506
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	5,738,506

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)			(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a					
b					
c					
d					
e					
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a					
b					
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69					(i) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
	(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		
a					
b					
c					
d					
e					
2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	0	
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	{ If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 }	3	0	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part

1 Enter the appropriate amount in each column for each year, see the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2011	420,320	0	0 000000
2010	377,800	0	0 000000
2009	266,500	0	0 000000
2008	0	0	0 000000
2007			0 000000

2 Total of line 1, column (d) 2 0 000000

3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years 3 0 000000

4 Enter the net value of noncharitable-use assets for 2012 from Part X, line 5 4

5 Multiply line 4 by line 3 5

6 Enter 1% of net investment income (1% of Part I, line 27b) 6 0

7 Add lines 5 and 6 7 0

8 Enter qualifying distributions from Part XII, line 4 8 0

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

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1 a Exempt operating foundations described in section 4940(d)(2), check here ► and enter "N/A" on line 1
Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)

b Domestic foundations that meet the section 4940(e) requirements in Part V, 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, col. (b)

2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)

3 Add lines 1 and 2

4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)

5 **Tax based on investment income.** Subtract line 4 from line 3 If zero or less, enter -0-

6 Credits/Payments

a 2012 estimated tax payments and 2011 overpayment credited to 2012

b Exempt foreign organizations—tax withheld at source

c Tax paid with application for extension of time to file (Form 8868)

d Backup withholding erroneously withheld

7 Total credits and payments Add lines 6a through 6d

8 Enter any penalty for underpayment of estimated tax Check here if Form 2220 is attached

9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed

10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid

11 Enter the amount of line 10 to be Credited to 2013 estimated tax ►

1 a b c d 7 8 9 10 11	1 N/A	2 0
	3 0	4
	5 0	6
	7 0	8
	9 0	10
Refunded ►	11 0	

Part VII-A Statements Regarding Activities

1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?

b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities

c Did the foundation file Form 1120-POL for this year?

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 ► \$ _____

e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ _____

2 Has the foundation engaged in any activities that have not previously been reported to the IRS?
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, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes

4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?
b If "Yes," has it filed a tax return on Form 990-T for this year?

5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?
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
● 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?

7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV

8 a Enter the states to which the foundation reports or with which it is registered (see instructions) ►
IL
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

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

	Yes	No
1a		
1b		
1c		X
2		X
3		X
4a		X
4b	N/A	
5		X
6	X	
7	X	
8b	X	
9	X	
10		X

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	X
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)	12	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ►	13	X
14	The books are in care of ►	Telephone no ►	
	Located at ►	ZIP+4 ►	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year	► 15	► <input type="checkbox"/>
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If "Yes," enter the name of the foreign country ►	16	Yes No X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	Yes	No
1a	During the year did the foundation (either directly or indirectly)		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(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)?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	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)? Organizations relying on a current notice regarding disaster assistance check here ► <input type="checkbox"/>	1b	N/A
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?	1c	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))		
a	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? If "Yes," list the years ► 20 _____, 20 _____, 20 _____, 20 _____	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
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)	2b	N/A
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20 _____, 20 _____, 20 _____, 20 _____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If "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)	3b	N/A
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b	X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a	During the year did the foundation pay or incur any amount to	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here	<input checked="" type="checkbox"/>	5b	N/A
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? <i>If "Yes," attach the statement required by Regulations section 53.4945–5(d).</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No		
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6b	X
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <i>If "Yes" to 6b, file Form 8870</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No		
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input type="checkbox"/> No	7b	
b	If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ORESTA FEDYNIAK 2332 W CHICAGO AVE CHICAGO, IL 60622	CHAIR 1 00	0		
OLEH KARAWAN 2332 W CHICAGO AVE CHICAGO, IL 60622	VICE CHAIR 1 00	0		
VICTOR WOJTYCHIW 2332 W CHICAGO AVE CHICAGO, IL 60622	SEC/TREASURER 1 00	0		

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(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 to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000				

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		►

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc		Expenses
1	N/A	
2		
3		
4		

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3		► 0

Part X Minimum Investment Return (All domestic foundations must complete this part Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes		
a	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	
c	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	0
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	0
6	Minimum investment return. Enter 5% of line 5	6	0

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ► and do not complete this part)

1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2012 from Part VI, line 5	2a	
b	Income tax for 2012 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	0
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	0

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	317,300
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, purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	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	317,300
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 (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	317,300

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

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				
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only				0
b Total for prior years 20 ____, 20 ____, 20 ____				
3 Excess distributions carryover, if any, to 2012				
a From 2007				
b From 2008				
c 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: ► \$ 317,300				
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				
e Remaining amount distributed out of corpus	317,300			
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:	317,300			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
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				
d Subtract line 6c from line 6b Taxable amount—see instructions				
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)				0
8 Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	317,300			
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	317,300			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2012, enter the date of the ruling ►

b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

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

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

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)(ii)

(3) Largest amount of support from an exempt organization

(4) Gross investment income

Tax year	Prior 3 years				(e) Total
	(a) 2012	(b) 2011	(c) 2010	(d) 2009	
					0
					0
317,300	416,050	377,800	266,500	1,377,650	
					0
317,300	416,050	377,800	266,500	1,377,650	
					0
5,738,506	4,013,739	2,024,109	1,189,457	12,965,811	
5,738,506	4,013,739	2,024,109	1,189,457	12,965,811	
					0
					0
					0
					0
					0
					0

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ► if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or e-mail of the person to whom applications should be addressed

THE SELFRELIANCE FOUNDATION ORESTA FEDYNIAK 2332 W CHICAGO AVE CHICAGO, IL 60622 (773) 328-7500

b The form in which applications should be submitted and information and materials they should include

LETTER REQUESTING ASSISTANCE

c Any submission deadlines

NONE

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

ORGANIZATION MUST HAVE 501 c(3) STATUS

Part XV **Supplementary Information (continued)****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 recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
AMERICAN UKRAINIAN YOUTH ASSN PAVLUSHKOV 2457 W CHICAGO AVE CHICAGO , IL 60622	NONE	NONE	GENERAL EXPENSE	4,000
AMERICAN UKRAINIAN YOUTH ASSN VITOVKSY 136 E ILLINOIS AVE PALATINE, IL 60067	NONE	NONE	GENERAL EXPENSE	2,500
ARCHDIOCESE OF CHICAGO CAMPAIGN 3525 S LAKE PARK AVE CHICAGO, IL 60653	NONE	YES	GENERAL EXPENSE	500
BAHRIANY FOUNDATION 811 S ROOSEVELT RD ARLINGTON HTS, IL 60005	NONE	YES	FOR UKRAINIAN LANG	1,000
HOLY PROTECTION UKRAINIAN ORTHODOX 904 N WASHTENAW CHICAGO , IL 60622	NONE	NONE	GENERAL EXPENSE	2,000
HOLY TRINITY UKRAINIAN ORTHODOX 1009 S CHURCH RD BENSENVILLE, IL 60106	NONE	NONE	GENERAL EXPENSE	8,000
HROMOVYTSIA UKRAINIAN DANCE 2247 W CHICAGO AVE CHICAGO , IL 60622	NONE	NONE	GENERAL EXPENSE	5,000
IMMACULATE CONCEPTION UKRAINIAN CATHOLIC 745 S BENTON ST PALATINE, IL 60067	NONE	NONE	GENERAL EXPENSE	2,500
KYIV MOHYLA FOUNDATION P O BOX 46009 CHICAGO , IL 60646	NONE	NONE	GENERAL EXPENSE	3,000
NATIVITY OF THE BLESSED VIRGIN MARY 8530 W 131ST ST PALOS PARK, IL 60464	NONE	NONE	GENERAL EXPENSE	5,000
ORGANIZATION FOR THE DEFENSE OF LEMKO 6N457 ADRENE LAND ITASCA, IL 60143	NONE	NONE	FOR SCHOOL IN LEMKO	1,000
Total	See Attached Statement			► 3a 317,300
b Approved for future payment				
Total				► 3b 0

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
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	900099	38,721	14		
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					
11 Other revenue	a				
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		38,721		0	0
13 Total. Add line 12, columns (b), (d), and (e)				13	38,721

(See worksheet in line 13 instructions to verify calculations)

Part XVII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

	Yes	No
1a(1)		
1a(2)		
1b(1)		
1b(2)		
1b(3)		
1b(4)		
1b(5)		
1b(6)		
1c		

- a Transfers from the reporting foundation to a noncharitable exempt organization of
 - (1) Cash
 - (2) Other assets
- b Other transactions:
 - (1) Sales of assets to a noncharitable exempt organization
 - (2) Purchases of assets from a noncharitable exempt organization
 - (3) Rental of facilities, equipment, or other assets
 - (4) Reimbursement arrangements
 - (5) Loans or loan guarantees
 - (6) Performance of services or membership or fundraising solicitations
- c Sharing of facilities, equipment, mailing lists, other assets, or paid employees
- d If the answer to any of the above is "Yes," complete the following schedule Column value of the goods, other assets, or services given by the reporting foundation. If the value in any transaction or sharing arrangement, show in column (d) the value of the

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

Yes No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

May the IRS discuss this return
with the preparer shown below (see
instructions)? Yes No

**Sign
Here**

x Oresta Fedynick 5.15.13 ► Chair
Signature of officer or trustee Date Title

Date _____

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	GEORGE M BOZIO		5/14/2013		P00335369
	Firm's name ► GEORGE M BOZIO, P C			Firm's EIN ► 36-4372661	
Firm's address ► 2246 W CHICAGO AVE, CHICAGO, IL 60622			Phone no	(773) 489-1040	

Schedule of Contributors

OMB No. 1545-0047

2012

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

Name of the organization

THE SELFRELIANCE FOUNDATION

Organization type (check one)

Employer identification number

20-5423872

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II

Special Rules

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 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 THE SELFRELIANCE FOUNDATION			Employer identification number 20-5423872
Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed.			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ _____	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II if there is a noncash contribution)
	Foreign State or Province _____ Foreign Country _____		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ _____	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II if there is a noncash contribution)
	Foreign State or Province _____ Foreign Country _____		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ _____	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II if there is a noncash contribution)
	Foreign State or Province _____ Foreign Country _____		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ _____	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II if there is a noncash contribution)
	Foreign State or Province _____ Foreign Country _____		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ _____	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II if there is a noncash contribution)
	Foreign State or Province _____ Foreign Country _____		

Name of organization

THE SELFRELIANCE FOUNDATION

Employer identification number

20-5423872

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
		\$ -----	-----
(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
		\$ -----	-----

Name of organization THE SELFRELIANCE FOUNDATION			Employer identification number 20-5423872
Part III <i>Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once See instructions) ► \$ 0</i> Use duplicate copies of Part III if additional space is needed			
(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 ZIP + 4		Relationship of transferor to transferee	
-----	-----	-----	-----
-----	-----	-----	-----
For Prov	Country	-----	
(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 ZIP + 4		Relationship of transferor to transferee	
-----	-----	-----	-----
-----	-----	-----	-----
For Prov	Country	-----	
(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 ZIP + 4		Relationship of transferor to transferee	
-----	-----	-----	-----
-----	-----	-----	-----
For Prov	Country	-----	

Part I, Line 11 (990-PF) - Other Income

		0	0
Description		Revenue and Expenses per Books	Net Investment Income
1	STALE CHECK - NOT CASHED		0

Part I, Line 11 (990-PF) - Other Income

		0
	Adjusted Net Income	
1		

Part I, Line 16a (990-PF) - Legal Fees

		0	0	0
Description		Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income
1	OLEKSIUK & ASSOCIATES			

Part I, Line 16a (990-PF) - Legal Fees

		0
	Disbursements for Charitable Purposes (Cash Basis Only)	
1		

Part I, Line 16b (990-PF) - Accounting Fees

		440	0	0
Description		Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income
1	GEORGE M BOZIO, P C	440		

Part I, Line 16b (990-PF) - Accounting Fees

0

	Disbursements for Charitable Purposes (Cash Basis Only)
1	

Part I, Line 18 (990-PF) - Taxes

0 0 0

	Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income
1	Real estate tax not included in line 20			
2	Tax on investment income			
3	Income tax			

Part I, Line 18 (990-PF) - Taxes

0

	Disbursements for Charitable Purposes
1	
2	
3	

Part I, Line 23 (990-PF) - Other Expenses

139 0 0

	Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income
1	Fund Raising			
2	Bank Service Charges	114		
3	Secretary of State - Registration	25		

Part I, Line 23 (990-PF) - Other Expenses

0

	Disbursements for Charitable Purposes
1	
2	
3	

	Name	Check "X" if Business	Street	City	State	Zip Code	Foreign Country	Title	Avg Hrs Per Week	Compensation	Benefits	Expense Account
1	ORESTA FEDYNIAK		2332 W CHICAGO AVE	CHICAGO	IL	60622		CHAIR	100	0		
2	OLEH KARAWAN		2332 W CHICAGO AVE	CHICAGO	IL	60622		VICE CHAIR	100	0		
3	VICTOR WOLITCHW		2332 W CHICAGO AVE	CHICAGO	IL	60622		SEC/TREASURER	100	0		
4												

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

PLAST INC

Street

2128 W CHICAGO AVE

City

CHICAGO

State

IL

Zip Code

60622

Foreign Country**Relationship**

NONE

Foundation Status

NONE

Purpose of grant/contribution

GENERAL EXPENSE

Amount

12,000

Name

PLAST KUPO NATIONAL

Street

207 CLARKSVILLE RD

City

WEST WINDSOR

State

NJ

Zip Code

08550

Foreign Country**Relationship**

NONE

Foundation Status

NONE

Purpose of grant/contribution

CENTENNIAL CELEB

Amount

5,000

Name

SHEVCHENKO SCIENTIFIC SOCIETY

Street

63 FOURTH AVE

City

NEW YORK

State

NY

Zip Code

10003

Foreign Country**Relationship**

NONE

Foundation Status

NONE

Purpose of grant/contribution

FOR EUD

Amount

4,000

Name

SISTERS OF THE ORDER OF ST BASIL THE GREAT

Street

710 FOX CHASE ROAD

City

FOX CHASE MANOR

State

PA

Zip Code

19046

Foreign Country**Relationship**

NONE

Foundation Status

NONE

Purpose of grant/contribution

GENERAL EXPENSE

Amount

3,000

Name

SLAVIC EVANGELICAL CHURCH

Street

9313 S 88TH ST

City

HICKORY HILLS

State

IL

Zip Code

60457

Foreign Country**Relationship**

NONE

Foundation Status

NONE

Purpose of grant/contribution

GRAND OPENING

Amount

1,000

Name

SMOLOSKYP FOUNDATION

Street

P O BOX 561

City

ELLIOTT CITY

State

MD

Zip Code

21041

Foreign Country**Relationship**

NONE

Foundation Status

YES

Purpose of grant/contribution

PUBLICATIONS

Amount

1,000

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

ST ANDREW UKRAINIAN ORTHODOX CATHEDRAL

Street

300 E ARMY TRAIL RD

City BLOOMINGDALE	State IL	Zip Code 60191	Foreign Country
-----------------------------	--------------------	--------------------------	------------------------

Relationship NONE	Foundation Status NONE		
-----------------------------	----------------------------------	--	--

Purpose of grant/contribution GENERAL EXPENSE	Amount 9,000
---	------------------------

Name

ST ANDREW UKRAINIAN ORTHODOX CATHEDRAL VODOHRAY

Street

300 E ARMY TRAIL RD

City BLOOMINGDALE	State IL	Zip Code 60191	Foreign Country
-----------------------------	--------------------	--------------------------	------------------------

Relationship NONE	Foundation Status NONE		
-----------------------------	----------------------------------	--	--

Purpose of grant/contribution GENERAL EXPENSE	Amount 1,000
---	------------------------

Name

ST GEORGE UKRAINIAN ORTHODOX CHURCH

Street

506 MCHENRY RD

City WHEELING	State IL	Zip Code 60090	Foreign Country
-------------------------	--------------------	--------------------------	------------------------

Relationship NONE	Foundation Status NONE		
-----------------------------	----------------------------------	--	--

Purpose of grant/contribution GENERAL EXPENSE	Amount 2,000
---	------------------------

Name

ST JOSAPHAT UKRAINIAN CATHOLIC

Street

8624 WHITE OAK ST

City MUNSTER	State IN	Zip Code 46321	Foreign Country
------------------------	--------------------	--------------------------	------------------------

Relationship NONE	Foundation Status NONE		
-----------------------------	----------------------------------	--	--

Purpose of grant/contribution GENERAL EXPENSE	Amount 2,000
---	------------------------

Name

ST JOSEPH UKRAINIAN CATHOLIC

Street

5000 N CUMBERLAND AVE

City CHICAGO	State IL	Zip Code 60656	Foreign Country
------------------------	--------------------	--------------------------	------------------------

Relationship NONE	Foundation Status NONE		
-----------------------------	----------------------------------	--	--

Purpose of grant/contribution RENOVATIONS	Amount 40,000
---	-------------------------

Name

ST JOSEPH UKRAINIAN CATHOLIC VYSHYVANKA

Street

5000 N CUMBERLAND AVE

City CHICAGO	State IL	Zip Code 60656	Foreign Country
------------------------	--------------------	--------------------------	------------------------

Relationship NONE	Foundation Status NONE		
-----------------------------	----------------------------------	--	--

Purpose of grant/contribution GENERAL EXPENSE	Amount 1,000
---	------------------------

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

ST NICHOLAS CATHEDRAL

Street

2224 W RICE ST

City CHICAGO	State IL	Zip Code 60622	Foreign Country
-----------------	-------------	-------------------	-----------------

Relationship

NONE

Foundation Status

NONE

Purpose of grant/contribution GENERAL EXPENSE	Amount 21,000
--	------------------

Name

ST NICHOLAS CATHEDRAL SCHOOL OF THE ARTS

Street

2224 W RICE ST

City CHICAGO	State IL	Zip Code 60622	Foreign Country
-----------------	-------------	-------------------	-----------------

Relationship

NONE

Foundation Status

NONE

Purpose of grant/contribution RENOVATIONS	Amount 500
--	---------------

Name

ST NICHOLAS EPARCHY

Street

2245 W RICE ST

City CHICAGO	State IL	Zip Code 60622	Foreign Country
-----------------	-------------	-------------------	-----------------

Relationship

NONE

Foundation Status

NONE

Purpose of grant/contribution BISHOP SEMINACK	Amount 1,000
--	-----------------

Name

ST NICHOLAS UKRAINIAN CATHOLIC CATHEDRAL

Street

2238 W RICE ST

City CHICAGO	State IL	Zip Code 60622	Foreign Country
-----------------	-------------	-------------------	-----------------

Relationship

NONE

Foundation Status

NONE

Purpose of grant/contribution GENERAL EXPENSE	Amount 5,000
--	-----------------

Name

ST PETER AND PAUL UKRAINIAN ORTHODOX

Street

8410 W 131ST ST

City PALOS PARK	State IL	Zip Code 60464	Foreign Country
--------------------	-------------	-------------------	-----------------

Relationship

NONE

Foundation Status

YES

Purpose of grant/contribution GENERAL EXPENSE	Amount 2,000
--	-----------------

Name

ST SOPHIA UKRAINIAN ORTHODOX

Street

6655 W HIGGINS ST

City CHICAGO	State IL	Zip Code 60656	Foreign Country
-----------------	-------------	-------------------	-----------------

Relationship

NONE

Foundation Status

NONE

Purpose of grant/contribution GENERAL EXPENSE	Amount 7,500
--	-----------------

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

ST SOPHIA UKRAINIAN ORTHODO CHURCH

Street

6655 W HIGGINS ST

City CHICAGO	State IL	Zip Code 60656	Foreign Country
-----------------	-------------	-------------------	-----------------

Relationship

NONE

Foundation Status

NONE

Purpose of grant/contribution

PATRIARCH FILARET

Amount

5,000

Name

ST VOLODYMYR UKRAINIAN ORTHODOX

Street

2238 W CORTEZ ST

City CHICAGO	State IL	Zip Code 60622	Foreign Country
-----------------	-------------	-------------------	-----------------

Relationship

NONE

Foundation Status

YES

Purpose of grant/contribution

GENERAL EXPENSE

Amount

3,000

Name

STS VOLODYMYR AND OLHA UKRAINIAN CATHOLIC

Street

2245 W SUPERIOR ST

City CHICAGO	State IL	Zip Code 60612	Foreign Country
-----------------	-------------	-------------------	-----------------

Relationship

NONE

Foundation Status

NONE

Purpose of grant/contribution

GENERAL EXPENSE

Amount

11,000

Name

STS VOLODYMYR AND OLHA UKRAINIAN CATHOLIC

Street

2245 W SUPERIOR ST

City CHICAGO	State IL	Zip Code 60612	Foreign Country
-----------------	-------------	-------------------	-----------------

Relationship

NONE

Foundation Status

NONE

Purpose of grant/contribution

FOR REV KROTEC

Amount

1,000

Name

STS VOLODYMYR AND OLHA UKRAINIAN CATHOLIC

Street

2245 W SUPERIOR ST

City CHICAGO	State IL	Zip Code 60612	Foreign Country
-----------------	-------------	-------------------	-----------------

Relationship

NONE

Foundation Status

NONE

Purpose of grant/contribution

FOR REV KROTEC

Amount

3,000

Name

STS VOLODYMYR AND OLHA UKRAINIAN CATHOLIC

Street

2245 W SUPERIOR ST

City CHICAGO	State IL	Zip Code 60612	Foreign Country
-----------------	-------------	-------------------	-----------------

Relationship

NONE

Foundation Status

NONE

Purpose of grant/contribution

FOR ANDREY FOUNDATION

Amount

500

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

U-CARE INC

Street

3 KNIGHTS HILL RD

City

MARBLEHEAD

State
MA
Zip Code
01945**Foreign Country****Relationship**

NONE

Foundation Status

NONE

Purpose of grant/contribution

GENERAL EXPENSE

Amount

4,000

Name

UCCA RODU

Street

203 SECOND AVE

City

NEW YORK

State
NY
Zip Code
10003**Foreign Country****Relationship**

NONE

Foundation Status

NONE

Purpose of grant/contribution

PUBLICATIONS

Amount

1,000

Name

UKRAINIAN AMERICAN CULTURAL CENTER NJ

Street

60 N JEFFERSON RD

City

WHIPANNY

State
NJ
Zip Code
07981**Foreign Country****Relationship**

NONE

Foundation Status

NONE

Purpose of grant/contribution

GENERAL EXPENSE

Amount

10,000

Name

UKRAINIAN BAPTIST CHURCH

Street

6751 RIVERSIDE DRIVE

City

BERWYN

State
IL
Zip Code
60402**Foreign Country****Relationship**

NONE

Foundation Status

NONE

Purpose of grant/contribution

THANKSGIVING

Amount

2,500

Name

UKRAINIAN CATHOLIC EDUCATION FOUNDATION

Street

2247 W CHICAGO AVE

City

CHICAGO

State
IL
Zip Code
60622**Foreign Country****Relationship**

NONE

Foundation Status

YES

Purpose of grant/contribution

UKRAINIAN CATHOLIC CHURCH

Amount

25,000

Name

UKRAINIAN CATHOLIC EDUCATION FOUNDATION

Street

2247 W CHICAGO AVE

City

CHICAGO

State
IL
Zip Code
60622**Foreign Country****Relationship**

NONE

Foundation Status

YES

Purpose of grant/contribution

ST SOPHIA IN ROME

Amount

5,000

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

UKRAINIAN CATHOLIC EDUCATION FOUNDATION

Street

2247 W CHICAGO AVE

City CHICAGO	State IL	Zip Code 60622	Foreign Country
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Relationship

NONE

Foundation Status

YES

Purpose of grant/contribution FOR BISHOP GUDZIAK	Amount 5,000
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Name

UKRAINIAN CHRISTIAN PENTECOSTAL CHURCH

Street

644 JOHN ST

City BENSENVILLE	State IL	Zip Code 60106	Foreign Country
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Relationship

NONE

Foundation Status

YES

Purpose of grant/contribution GENERAL EXPENSE	Amount 10,000
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Name

UKRAINIAN CONGRESS COMMITTEE OF AMERICA

Street

203 SECOND AVE

City NEW YORK	State NY	Zip Code 10003	Foreign Country
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Relationship

NONE

Foundation Status

NONE

Purpose of grant/contribution ELECTION OBSERVERS	Amount 2,000
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Name

UKRAINIAN CONGRESS COMMITTEE - ILL BRANCH

Street

2247 W CHICAGO AVE

City CHICAGO	State IL	Zip Code 60622	Foreign Country
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Relationship

NONE

Foundation Status

NONE

Purpose of grant/contribution GENERAL EXPENSE	Amount 3,800
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Name

UKRAINIAN GENOCIDE FAMINE FOUNDATION

Street

2249 W SUPERIOR ST

City CHICAGO	State IL	Zip Code 60612	Foreign Country
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Relationship

NONE

Foundation Status

YES

Purpose of grant/contribution GENERAL EXPENSE	Amount 2,000
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Name

UKRAINIAN INSTITUTE OF MODERN ART

Street

2320 W CHICAGO AVE

City CHICAGO	State IL	Zip Code 60622	Foreign Country
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Relationship

NONE

Foundation Status

NONE

Purpose of grant/contribution GENERAL EXPENSE	Amount 16,000
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Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

UKRAINIAN NATIONAL HOME OF NEW JERSEY

Street

90-96 FLEET ST

City

JERSEY CITY

State
NJZip Code
07306

Foreign Country

Relationship

NONE

Foundation Status
YES

Purpose of grant/contribution

GENERAL EXPENSE

Amount

13,000

Name

UKRAINIAN NATIONAL MUSEUM

Street

2249 W SUPERIOR ST

City

CHICAGO

State
ILZip Code
60612

Foreign Country

Relationship

NONE

Foundation Status
NONE

Purpose of grant/contribution

GENERAL EXPENSE

Amount

10,000

Name

UKRAINIAN NATIONAL MUSEUM

Street

2249 W SUPERIOR ST

City

CHICAGO

State
ILZip Code
60612

Foreign Country

Relationship

NONE

Foundation Status
NONE

Purpose of grant/contribution

STIPENDS FOR UC

Amount

1,000

Name

UKRAINIAN WORLD CONGRESS

Street

225 E 11TH ST

City

NEW YORK

State
NYZip Code
10003

Foreign Country

Relationship

NONE

Foundation Status
NONE

Purpose of grant/contribution

GENERAL EXPENSE

Amount

20,000

Name

UKRAINIAN YOUTH CAMPING ORG - PLAST

Street

2128 W CHICAGO AVE

City

CHICAGO

State
ILZip Code
60622

Foreign Country

Relationship

NONE

Foundation Status
YES

Purpose of grant/contribution

OSELIA

Amount

10,000

Name

UNWLA BRANCH 29 - CHICAGO

Street

1217 N MARION ST

City

OAK PARK

State
ILZip Code
60302

Foreign Country

Relationship

NONE

Foundation Status
NONE

Purpose of grant/contribution

GENERAL EXPENSE

Amount

1,000